

**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) 00089449	2 Total pages filed: 38
3 COMMITTEE NAME Austin Patriot Republican Women		OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/12/2026 Date Hand-delivered or Date Postmarked Receipt # <input type="text"/> Amount <input type="text"/> Date Processed Date Imaged	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address 4501 WESTLAKE DR APT 26 AUSTIN, TX 78746			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mrs.		
	NICKNAME	LAST Knight	SUFFIX
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 4501 Westlake Drive #26 Austin, TX 78746		APT / SUITE #; CITY; STATE; ZIP CODE
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; 4501 Westlake Drive #26 Austin, TX 78746		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 751-2110		
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff		
10 PERIOD COVERED	Month 07/01/2025	Day	Year THROUGH 12/31/2025
11 ELECTION	Month Day Year	ELECTION DATE	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special

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

**FORM GPAC
COVER SHEET PG 2**

12 COMMITTEE NAME Austin Patriot Republican Women		13 FILER ID (Ethics Commission Filers) 00089449
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)	\$ 6,627.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 6,580.62
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 25,619.03
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. Daniela Knight

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 38

17 COMMITTEE NAME Austin Patriot Republican Women	18 FILER ID (Ethics Commission Filers) 00089449
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE	
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	
3. <input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	
4. <input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	
5. <input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	
6. <input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	
7. <input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	
8. <input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	
9. <input type="checkbox"/> SCHEDULE E: LOANS	
10. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	
11. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	
12. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	
13. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	
14. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	
15. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/28 Rpt: 4/38
2 FILER NAME Austin Patriot Republican Women		3 Filer ID (Ethics Commission Filers) 00089449
4 Date 08/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Albert, Charlotte	7 Amount of Contribution (\$) \$45.00
	6 Contributor address; City; State; Zip Code Thrall, TX 76578	
8 Principal occupation / Job title (See Instructions) Retired /Part Time Pastor		9 Employer (See Instructions) NA
Date 08/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Albert, Charlotte	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Thrall, TX 76578	
Principal occupation / Job title (See Instructions) Retired /Part Time Pastor		Employer (See Instructions) NA
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alessandra, Olivia	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Bee Cave, TX 78738	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alessandra, Olivia	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Bee Cave, TX 78738	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 11/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alessandra, Olivia	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Bee Cave, TX 78738	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 2/28 Rpt: 5/38
2 FILER NAME Austin Patriot Republican Women			3 Filer ID (Ethics Commission Filers) 00089449
4 Date 11/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alessandra, Olivia	7 Amount of Contribution (\$) \$15.00	
	6 Contributor address; City; State; Zip Code Bee Cave, TX 78738		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA	
Date 11/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ariola, Robin	Amount of Contribution (\$) \$25.00	
	Contributor address; City; State; Zip Code Taylor, TX 76574		
Principal occupation / Job title (See Instructions) Administrative		Employer (See Instructions) Unknown	
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ashmore, Angela	Amount of Contribution (\$) \$45.00	
	Contributor address; City; State; Zip Code Spicewood, TX 78759		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA	
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ballard, Jean	Amount of Contribution (\$) \$45.00	
	Contributor address; City; State; Zip Code Austin, TX 78730		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA	
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnes, Jan	Amount of Contribution (\$) \$45.00	
	Contributor address; City; State; Zip Code Austin, TX 78759		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 3/28 Rpt: 6/38
2 FILER NAME Austin Patriot Republican Women			3 Filer ID (Ethics Commission Filers) 00089449
4 Date 07/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blazine, Maria	7 Amount of Contribution (\$) \$40.00	
	6 Contributor address; City; State; Zip Code Austin, TX 78731		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA	
Date 09/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blazine, Maria	Amount of Contribution (\$) \$45.00	
	Contributor address; City; State; Zip Code Austin, TX 78731		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA	
Date 09/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blazine, Maria	Amount of Contribution (\$) \$45.00	
	Contributor address; City; State; Zip Code Austin, TX 78731		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA	
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blazine, Maria	Amount of Contribution (\$) \$15.00	
	Contributor address; City; State; Zip Code Austin, TX 78731		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA	
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bueltel, Linda	Amount of Contribution (\$) \$40.00	
	Contributor address; City; State; Zip Code Austin, TX 78749		
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) NA	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 4/28 Rpt: 7/38	
2 FILER NAME Austin Patriot Republican Women			3 Filer ID (Ethics Commission Filers) 00089449	
4 Date 10/15/2025	5 Full name of contributor Bueltel, Linda	<input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of Contribution (\$) \$110.00	
	6 Contributor address; City; State; Zip Code Austin, TX 78749			
8 Principal occupation / Job title (See Instructions) Realtor		9 Employer (See Instructions) NA		
Date 07/27/2025	Full name of contributor Buhrman, Melanie		<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Austin, TX 78731			
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA		
Date 09/11/2025	Full name of contributor Buhrman, Melanie		<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Austin, TX 78731			
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA		
Date 10/15/2025	Full name of contributor Buhrman, Melanie		<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Austin, TX 78731			
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA		
Date 10/15/2025	Full name of contributor Buhrman, Melanie		<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$120.00
	Contributor address; City; State; Zip Code Austin, TX 78731			
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 5/28 Rpt: 8/38
2 FILER NAME Austin Patriot Republican Women			3 Filer ID (Ethics Commission Filers) 00089449
4 Date 11/22/2025	5 Full name of contributor Buhrman, Melanie	<input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of Contribution (\$) \$15.00
	6 Contributor address; City; State; Zip Code Austin, TX 78731		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA	
Date 09/19/2025	Full name of contributor Burden, Brenda	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Austin, TX 78738		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA	
Date 09/28/2025	Full name of contributor Burden, Brenda	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Austin, TX 78738		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA	
Date 10/15/2025	Full name of contributor Burden, Brenda	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Austin, TX 78738		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA	
Date 10/16/2025	Full name of contributor Burden, Brenda	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Austin, TX 78738		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/28 Rpt: 9/38
2 FILER NAME Austin Patriot Republican Women		3 Filer ID (Ethics Commission Filers) 00089449
4 Date 07/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burgess, Judith	7 Amount of Contribution (\$) \$40.00
	6 Contributor address; City; State; Zip Code Austin, TX 78735	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 07/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burgess, Judith	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Austin, TX 78735	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burgess, Judith	Amount of Contribution (\$) \$95.00
	Contributor address; City; State; Zip Code Austin, TX 78735	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burgess, Judith	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Austin, TX 78735	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burgess, Judith	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Austin, TX 78735	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/28 Rpt: 10/38
2 FILER NAME Austin Patriot Republican Women		3 Filer ID (Ethics Commission Filers) 00089449
4 Date 11/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burgess, Judith	7 Amount of Contribution (\$) \$15.00
	6 Contributor address; City; State; Zip Code Austin, TX 78735	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 10/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Churba, Carmalene	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Austin, TX 78738	
Principal occupation / Job title (See Instructions) Financial Advisor		Employer (See Instructions) Morgan Stanley
Date 10/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Churba, Carmalene	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Austin, TX 78738	
Principal occupation / Job title (See Instructions) Financial Advisor		Employer (See Instructions) Morgan Stanley
Date 07/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clayton, Nancy	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Lakeway, TX 78734	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 11/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clayton, Nancy	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Lakeway, TX 78734	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 8/28 Rpt: 11/38
2 FILER NAME Austin Patriot Republican Women			3 Filer ID (Ethics Commission Filers) 00089449
4 Date 11/20/2025	5 Full name of contributor Cloud, Crystle	<input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of Contribution (\$) \$15.00
	6 Contributor address; City; State; Zip Code Leander, TX 78641		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA	
Date 07/28/2025	Full name of contributor Countway, Berlyn	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Austin, TX 78732		
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Unknown	
Date 10/02/2025	Full name of contributor Davis, Michael	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Austin, TX 78701		
Principal occupation / Job title (See Instructions) Campaign Worker		Employer (See Instructions) Jim Wright for Texas	
Date 09/22/2025	Full name of contributor Davison, Cindi	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Austin, TX 78759		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA	
Date 10/14/2025	Full name of contributor Davison, Cindi	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Austin, TX 78759		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 9/28 Rpt: 12/38
2 FILER NAME Austin Patriot Republican Women			3 Filer ID (Ethics Commission Filers) 00089449
4 Date 09/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Sharon	7 Amount of Contribution (\$) \$45.00	
	6 Contributor address; City; State; Zip Code Austin, TX 78730		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA	
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Sharon	Amount of Contribution (\$) \$45.00	
	Contributor address; City; State; Zip Code Austin, TX 78730		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA	
Date 11/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Sharon	Amount of Contribution (\$) \$15.00	
	Contributor address; City; State; Zip Code Austin, TX 78730		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA	
Date 12/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Sharon	Amount of Contribution (\$) \$97.00	
	Contributor address; City; State; Zip Code Austin, TX 78730		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA	
Date 08/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elder, Winelle	Amount of Contribution (\$) \$45.00	
	Contributor address; City; State; Zip Code Austin, TX 78731		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/28 Rpt: 13/38
2 FILER NAME Austin Patriot Republican Women		3 Filer ID (Ethics Commission Filers) 00089449
4 Date 08/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frankenberg, Raquel	7 Amount of Contribution (\$) \$45.00
	6 Contributor address; City; State; Zip Code Austin, TX 78730	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frankenberg, Raquel	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Austin, TX 78730	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frankenberg, Raquel	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Austin, TX 78730	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 09/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graham, Jan	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Austin, TX 78746	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graham, Jan	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Austin, TX 78746	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/28 Rpt: 14/38
2 FILER NAME Austin Patriot Republican Women		3 Filer ID (Ethics Commission Filers) 00089449
4 Date 10/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Terry	7 Amount of Contribution (\$) \$45.00
	6 Contributor address; City; State; Zip Code Austin, TX 78750	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 10/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Terry	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Austin, TX 78750	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Terry	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Austin, TX 78750	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Terry	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Austin, TX 78750	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Terry	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Austin, TX 78750	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/28 Rpt: 15/38
2 FILER NAME Austin Patriot Republican Women		3 Filer ID (Ethics Commission Filers) 00089449
4 Date 07/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hackerman, Katy	7 Amount of Contribution (\$) \$45.00
	6 Contributor address; City; State; Zip Code Austin, TX 78759	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 08/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haeg, Dianne	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Lakeway, TX 78738	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 11/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haeg, Dianne	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Lakeway, TX 78738	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haeg, Dianne	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Lakeway, TX 78738	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harclerode, Barsa	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Leander, TX 78641	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 13/28 Rpt: 16/38
2 FILER NAME Austin Patriot Republican Women			3 Filer ID (Ethics Commission Filers) 00089449
4 Date 09/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harclerode, Barsa	7 Amount of Contribution (\$) \$45.00	
	6 Contributor address; City; State; Zip Code Leander, TX 78641		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA	
Date 09/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harclerode, Barsa	Amount of Contribution (\$) \$45.00	
	Contributor address; City; State; Zip Code Leander, TX 78641		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA	
Date 11/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harclerode, Barsa	Amount of Contribution (\$) \$15.00	
	Contributor address; City; State; Zip Code Leander, TX 78641		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA	
Date 12/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harclerode, Barsa	Amount of Contribution (\$) \$47.00	
	Contributor address; City; State; Zip Code Leander, TX 78641		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA	
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herrera, Diane	Amount of Contribution (\$) \$90.00	
	Contributor address; City; State; Zip Code Leander, TX 78641		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/28 Rpt: 17/38
2 FILER NAME Austin Patriot Republican Women		3 Filer ID (Ethics Commission Filers) 00089449
4 Date 08/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hopkins, Perla	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Leander, TX 78641	
8 Principal occupation / Job title (See Instructions) Student Advocate		9 Employer (See Instructions) Unknown
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hopkins, Perla	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Leander, TX 78641	
Principal occupation / Job title (See Instructions) Student Advocate		Employer (See Instructions) Unknown
Date 11/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Israel, Donna	Amount of Contribution (\$) \$90.00
	Contributor address; City; State; Zip Code Wimberly, TX 78676	
Principal occupation / Job title (See Instructions) Self-Employed		Employer (See Instructions) Self-Employed
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karnes, Shileen	Amount of Contribution (\$) \$95.00
	Contributor address; City; State; Zip Code Cedar Park, TX 78613	
Principal occupation / Job title (See Instructions) Travel Agency Owner		Employer (See Instructions) Self Employed
Date 11/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Key, Leslie	Amount of Contribution (\$) \$90.00
	Contributor address; City; State; Zip Code Austin, TX 78731	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/28 Rpt: 18/38
2 FILER NAME Austin Patriot Republican Women		3 Filer ID (Ethics Commission Filers) 00089449
4 Date 11/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Key, Leslie	7 Amount of Contribution (\$) \$15.00
	6 Contributor address; City; State; Zip Code Austin, TX 78731	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kilmer, Cynthia	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code The Hills, TX 78738	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 11/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kilmer, Cynthia	Amount of Contribution (\$) \$90.00
	Contributor address; City; State; Zip Code The Hills, TX 78738	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirmse, Christie	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Austin, TX 78731	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 07/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knight, Daniela	Amount of Contribution (\$) \$90.00
	Contributor address; City; State; Zip Code Austin, TX 78746	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 16/28 Rpt: 19/38
2 FILER NAME Austin Patriot Republican Women			3 Filer ID (Ethics Commission Filers) 00089449
4 Date 07/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knight, Daniela	7 Amount of Contribution (\$) \$25.00	
	6 Contributor address; City; State; Zip Code Austin, TX 78746		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA	
Date 07/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knight, Daniela	Amount of Contribution (\$) \$45.00	
	Contributor address; City; State; Zip Code Austin, TX 78746		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA	
Date 09/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knight, Daniela	Amount of Contribution (\$) \$225.00	
	Contributor address; City; State; Zip Code Austin, TX 78746		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA	
Date 09/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knight, Daniela	Amount of Contribution (\$) \$150.00	
	Contributor address; City; State; Zip Code Austin, TX 78746		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA	
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knight, Daniela	Amount of Contribution (\$) \$225.00	
	Contributor address; City; State; Zip Code Austin, TX 78746		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 17/28 Rpt: 20/38
2 FILER NAME Austin Patriot Republican Women			3 Filer ID (Ethics Commission Filers) 00089449
4 Date 10/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knight, Daniela	7 Amount of Contribution (\$) \$95.00	
	6 Contributor address; City; State; Zip Code Austin, TX 78746		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA	
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knight, Daniela	Amount of Contribution (\$) \$40.00	
	Contributor address; City; State; Zip Code Austin, TX 78746		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA	
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knight, Daniela	Amount of Contribution (\$) \$120.00	
	Contributor address; City; State; Zip Code Austin, TX 78746		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA	
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knight, Daniela	Amount of Contribution (\$) \$45.00	
	Contributor address; City; State; Zip Code Austin, TX 78746		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA	
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knight, Daniela	Amount of Contribution (\$) \$15.00	
	Contributor address; City; State; Zip Code Austin, TX 78746		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 18/28 Rpt: 21/38
2 FILER NAME Austin Patriot Republican Women			3 Filer ID (Ethics Commission Filers) 00089449
4 Date 08/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larsen, Catherine	7 Amount of Contribution (\$) \$45.00	
	6 Contributor address; City; State; Zip Code The Hills, TX 78738		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA	
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lattin, Nancy	Amount of Contribution (\$) \$47.00	
	Contributor address; City; State; Zip Code Cedar Park, TX 78613		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA	
Date 10/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leavings, Cindy	Amount of Contribution (\$) \$40.00	
	Contributor address; City; State; Zip Code Austin, TX 78732		
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) NA	
Date 07/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lightfoot, Kelley	Amount of Contribution (\$) \$25.00	
	Contributor address; City; State; Zip Code Austin, TX 78733		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA	
Date 11/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Louri, O'Leary	Amount of Contribution (\$) \$25.00	
	Contributor address; City; State; Zip Code Austin, TX 78731		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/28 Rpt: 22/38
2 FILER NAME Austin Patriot Republican Women		3 Filer ID (Ethics Commission Filers) 00089449
4 Date 07/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maxwell, Peggy	7 Amount of Contribution (\$) \$45.00
	6 Contributor address; City; State; Zip Code Austin, TX 78750	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maxwell, Peggy	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Austin, TX 78750	\$45.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maxwell, Peggy	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Austin, TX 78750	\$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 11/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maxwell, Peggy	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Austin, TX 78750	\$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 07/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelsen, Amanda	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Austin, TX 78746	\$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/28 Rpt: 23/38
2 FILER NAME Austin Patriot Republican Women		3 Filer ID (Ethics Commission Filers) 00089449
4 Date 08/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelsen, Amanda	7 Amount of Contribution (\$) \$45.00
	6 Contributor address; City; State; Zip Code Austin, TX 78746	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 12/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelsen, Amanda	Amount of Contribution (\$) \$110.00
	Contributor address; City; State; Zip Code Austin, TX 78746	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 09/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pepin, Debbie	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Austin, TX 78737	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 10/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pepin, Debbie	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Austin, TX 78737	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 10/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pepin, Debbie	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Austin, TX 78737	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/28 Rpt: 24/38
2 FILER NAME Austin Patriot Republican Women		3 Filer ID (Ethics Commission Filers) 00089449
4 Date 10/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pepin, Debbie	7 Amount of Contribution (\$) \$40.00
	6 Contributor address; City; State; Zip Code Austin, TX 78737	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 11/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pepin, Debbie	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Austin, TX 78737	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Radulovich, Kathleen	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Austin, TX 78758	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 09/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Radulovich, Kathleen	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Austin, TX 78758	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Radulovich, Kathleen	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code Austin, TX 78758	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/28 Rpt: 25/38
2 FILER NAME Austin Patriot Republican Women		3 Filer ID (Ethics Commission Filers) 00089449
4 Date 10/15/2025	5 Full name of contributor Radulovich, Kathleen	7 Amount of Contribution (\$) \$40.00
	6 Contributor address; City; State; Zip Code Austin, TX 78758	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 07/01/2025	Full name of contributor Robinson, Christine	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Austin, TX 78749	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 08/09/2025	Full name of contributor Rouse, Janis	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Lakeway, TX 78734	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 10/28/2025	Full name of contributor Rouse, Janis	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Lakeway, TX 78734	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 11/05/2025	Full name of contributor Rouse, Janis	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Lakeway, TX 78734	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/28 Rpt: 26/38
2 FILER NAME Austin Patriot Republican Women		3 Filer ID (Ethics Commission Filers) 00089449
4 Date 09/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seelig, Bonnie	7 Amount of Contribution (\$) \$45.00
	6 Contributor address; City; State; Zip Code Spicewood, TX 78669	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seelig, Bonnie	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Spicewood, TX 78669	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seelig, Bonnie	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Spicewood, TX 78669	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seelig, Bonnie	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Spicewood, TX 78669	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 11/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seelig, Bonnie	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Spicewood, TX 78669	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A1: Sch: 24/28 Rpt: 27/38
2 FILER NAME Austin Patriot Republican Women				3 Filer ID (Ethics Commission Filers) 00089449
4 Date 11/12/2025	5 Full name of contributor Sharon, Jenny	<input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of Contribution (\$) \$15.00	
	6 Contributor address; City; State; Zip Code Austin, TX 78734			
8 Principal occupation / Job title (See Instructions) Self-Employed		9 Employer (See Instructions) Self-Employed		
Date 09/30/2025	Full name of contributor Shaw, Samantha		<input type="checkbox"/> out-of-state PAC (ID#: _____) \$45.00	
	Contributor address; City; State; Zip Code Austin, TX 78731			
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA		
Date 11/03/2025	Full name of contributor Siegel, Josh		<input type="checkbox"/> out-of-state PAC (ID#: _____) \$40.00	
	Contributor address; City; State; Zip Code Bee Cave, TX 78738			
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA		
Date 07/28/2025	Full name of contributor Smith, Shelley		<input type="checkbox"/> out-of-state PAC (ID#: _____) \$45.00	
	Contributor address; City; State; Zip Code Lakeway, TX 78669			
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA		
Date 09/11/2025	Full name of contributor Smith, Shelley		<input type="checkbox"/> out-of-state PAC (ID#: _____) \$45.00	
	Contributor address; City; State; Zip Code Lakeway, TX 78669			
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/28 Rpt: 28/38
2 FILER NAME Austin Patriot Republican Women		3 Filer ID (Ethics Commission Filers) 00089449
4 Date 10/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Shelley	7 Amount of Contribution (\$) \$40.00
	6 Contributor address; City; State; Zip Code Lakeway, TX 78669	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Shelley	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Lakeway, TX 78669	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Shelley	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Lakeway, TX 78669	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Shelley	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Lakeway, TX 78669	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 11/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Shelley	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Lakeway, TX 78669	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/28 Rpt: 29/38
2 FILER NAME Austin Patriot Republican Women		3 Filer ID (Ethics Commission Filers) 00089449
4 Date 12/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Shelley 6 Contributor address; City; State; Zip Code Lakeway, TX 78669	7 Amount of Contribution (\$) \$47.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 12/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spears, Teresa Contributor address; City; State; Zip Code Austin, TX 78716	Amount of Contribution (\$) \$92.00
Principal occupation / Job title (See Instructions) Consulting		Employer (See Instructions) Self-Employed
Date 09/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stavrou, Kristi Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vezina, Linda Contributor address; City; State; Zip Code Austin, TX 78732	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Administrative		Employer (See Instructions) Unknown
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Villarreal, Toni Contributor address; City; State; Zip Code Austin, TX 78732	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Self-Employed		Employer (See Instructions) Self-Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/28 Rpt: 30/38
2 FILER NAME Austin Patriot Republican Women		3 Filer ID (Ethics Commission Filers) 00089449
4 Date 09/06/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Villarreal, Toni	7 Amount of Contribution (\$) \$45.00
	6 Contributor address; City; State; Zip Code Austin, TX 78732	
8 Principal occupation / Job title (See Instructions) Self-Employed		9 Employer (See Instructions) Self-Employed
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Alexandra	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Austin, TX 78738	
Principal occupation / Job title (See Instructions) Business owner		Employer (See Instructions) The Pretty Farmer
Date 10/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ward, Gerald	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Austin, TX 78731	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 09/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webster, Cheryl	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Taylor, TX 76574	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 11/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webster, Cheryl	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Taylor, TX 76574	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/28 Rpt: 31/38
2 FILER NAME Austin Patriot Republican Women		3 Filer ID (Ethics Commission Filers) 00089449
4 Date 10/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webster, Kathleen	7 Amount of Contribution (\$) \$45.00
	6 Contributor address; City; State; Zip Code Austin, TX 78758	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Betty	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Austin, TX 78734	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Betty	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Austin, TX 78734	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wimberley, Patricia	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Austin, TX 78735	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 12/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wimberley, Patricia	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code Austin, TX 78735	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

PLEDGED CONTRIBUTIONS**SCHEDULE B**

The Instruction Guide explains how to complete this form.			
2 FILER NAME Austin Patriot Republican Women		1 Total pages Schedule B: Sch: 1/1 Rpt: 32/38	
4 TOTAL OF UNITEMIZED PLEDGES		\$ 0.00	
5 Date 10/27/2025	6 Full name of pledgor Leander Area Republican Women	8 Amount of pledge (\$) \$23,792.00	9 In-kind description (If applicable)
	7 Pledgor Address; Leander, TX 78641	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (See Instructions)		11 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: 1/6 Rpt: 33/38	2 FILER NAME Austin Patriot Republican Women	3 Filer ID (Ethics Commission Filers) 00089449
4 Date 11/06/2025	5 Payee name Cafe Blue	
6 Amount (\$) \$825.93	7 Payee address; City; State; Zip Code 12800 Hill Country Blvd Suite G-115 Bee Cave, TX 78738	
<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 Luncheon
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/12/2025	Payee name Chez Zee	
Amount (\$) \$1,296.62	Payee address; City; State; Zip Code 5406 Balcones Dr Austin, TX 78731	
<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 Luncheon
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/10/2025	Payee name Chez Zee	
Amount (\$) \$1,329.56	Payee address; City; State; Zip Code 5406 Balcones Dr Austin, TX 78731	
<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 Luncheon
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/6 Rpt: 34/38	2 FILER NAME Austin Patriot Republican Women	3 Filer ID (Ethics Commission Filers) 00089449
4 Date 08/08/2025	5 Payee name Daniela Knight	
6 Amount (\$) \$689.85	7 Payee address; City; State; Zip Code 4501 Westlake Dr #26 Austin, TX 78746	
<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 Operations
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/14/2025	Payee name Executive Gift Shoppe	
Amount (\$) \$33.00	Payee address; City; State; Zip Code 95 New Clarkstown Rd Suite 204 Nanuet, NY 10954	
<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 Gift
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/12/2025	Payee name Melanie Buhrman	
Amount (\$) \$200.00	Payee address; City; State; Zip Code 5806 Westslope Cove Austin, TX 78731	
<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 Las Palomas Luncheon
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/6 Rpt: 35/38	2 FILER NAME Austin Patriot Republican Women	3 Filer ID (Ethics Commission Filers) 00089449
4 Date 07/30/2025	5 Payee name NameTag Wizard	
6 Amount (\$) \$134.16	7 Payee address; City; State; Zip Code 2021 St Augustine Rd E Suite 6 Jacksonville, FL 32207	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Name Tags
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/29/2025	Payee name NameTag Wizard	
Amount (\$) \$162.88	Payee address; City; State; Zip Code 2021 St Augustine Rd E Suite 6 Jacksonville, FL 32207	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Name Tags
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/13/2025	Payee name Print Runner	
Amount (\$) \$119.50	Payee address; City; State; Zip Code 10930 Santa Monica Blvd Los Angeles, CA 90025	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banner
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: 4/6 Rpt: 36/38	2 FILER NAME Austin Patriot Republican Women	3 Filer ID (Ethics Commission Filers) 00089449
4 Date 08/13/2025	5 Payee name Texas Federation or Republican Women	
6 Amount (\$) \$202.40	7 Payee address; City; State; Zip Code PO BOX 171146 Austin, TX 78717	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Memberships
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/24/2025	Payee name Texas Federation or Republican Women	
Amount (\$) \$480.70	Payee address; City; State; Zip Code PO BOX 171146 Austin, TX 78717	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Memberships
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/29/2025	Payee name Texas Federation or Republican Women	
Amount (\$) \$20.20	Payee address; City; State; Zip Code PO BOX 171146 Austin, TX 78717	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Annual 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: 5/6 Rpt: 37/38	2 FILER NAME Austin Patriot Republican Women	3 Filer ID (Ethics Commission Filers) 00089449
4 Date 11/18/2025	5 Payee name USPS	
6 Amount (\$) \$210.00	7 Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Room 4012 Washington, DC 20260-2200	
<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 PO Box
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/18/2025	Payee name Vista Print	
Amount (\$) \$32.45	Payee address; City; State; Zip Code 275 Wyman St Waltham, MA 02451	
<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 Biz Cards
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/08/2025	Payee name Vista Print	
Amount (\$) \$157.48	Payee address; City; State; Zip Code 275 Wyman St Waltham, MA 02451	
<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 Biz Cards
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: 6/6 Rpt: 38/38	2 FILER NAME Austin Patriot Republican Women	3 Filer ID (Ethics Commission Filers) 00089449
4 Date 11/26/2025	5 Payee name Wix	
6 Amount (\$) \$457.89	7 Payee address; City; State; Zip Code 500 Terry A Francois Blvd San Francisco, CA 94158	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/20/2025	Payee name myqrcom.com	
Amount (\$) \$228.00	Payee address; City; State; Zip Code 46, Akademik Stefan Mladenov Str. Office 5 Sofia 1700 Bulgaria	
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 Advertising
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held