

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC
COVER SHEET PG 1

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|--|--|--|---|
| The GPAC Instruction Guide explains how to complete this form. | | 1 Filer ID (Ethics Commission Filers) 00015596 | 2 Total pages filed: 11 |
| 3 COMMITTEE NAME Denton Republican Women's Club P.A.C. | | | OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/15/2026 Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged |
| 4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 2624 Denton, TX 76202-2624 | | |
| 5 CAMPAIGN TREASURER NAME | MS / MRS / MR FIRST MI Ms. Lee Ann NICKNAME LAST SUFFIX Breeding | | |
| 6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business) | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1107 Audra Ln. Denton, TX 76209 | | |
| 7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address | STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE | | |
| 8 CAMPAIGN TREASURER PHONE | AREA CODE PHONE NUMBER EXTENSION (214) 202-2705 | | |
| 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 THROUGH Month Day Year 12/31/2025 | | |
| 11 ELECTION | ELECTION DATE Month Day Year 03/03/2026 | ELECTION TYPE <input checked="" 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 Denton Republican Women's Club P.A.C. | 13 Filer ID (Ethics Commission Filers) 00015596 |
|---|---|

| | | |
|---|--|--------------|
| 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 | \$ 4,211.87 |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ 5,369.36 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | \$ 166.22 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ 7,188.59 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 2,424.20 |
| 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.

Ms. Lee Ann Breathing

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 11

| | | |
|---|--|---|
| 17 COMMITTEE NAME Denton Republican Women's Club P.A.C. | | 18 Filer ID (Ethics Commission Filers) 00015596 |
| 19 SCHEDULE SUBTOTALS NAME OF SCHEDULE | | SUBTOTAL AMOUNT |
| 1. | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ 5,369.36 |
| 2. | <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ 0.00 |
| 3. | <input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS | \$ 0.00 |
| 4. | <input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 5. | <input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 6. | <input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 7. | <input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 8. | <input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 9. | <input checked="" type="checkbox"/> SCHEDULE E: LOANS | \$ 0.00 |
| 10. | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ 7,188.59 |
| 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 checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ 5.47 |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 1/2 Rpt: 4/11 |
| 2 FILER NAME Denton Republican Women's Club P.A.C. | | 3 Filer ID (Ethics Commission Filers) 00015596 |
| 4 Date 10/09/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Avellano, Deborah (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Corinth, TX 76208 | 7 Amount of Contribution (\$) \$16.21 |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) Retired |
| Date 12/10/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Avellano, Deborah (Ms.) <hr/> Contributor address; City; State; Zip Code Corinth, TX 76208 | Amount of Contribution (\$) \$233.61 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 11/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Emerick, James (Mr.) <hr/> Contributor address; City; State; Zip Code Denton, TX 76205 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Entrepreneur | | Employer (See Instructions) Self |
| Date 12/10/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Emerick, James (Mr.) <hr/> Contributor address; City; State; Zip Code Denton, TX 76205 | Amount of Contribution (\$) \$223.87 |
| Principal occupation / Job title (See Instructions) Entrepreneur | | Employer (See Instructions) Self |
| Date 12/06/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shipman, Sherry (The Honorable) <hr/> Contributor address; City; State; Zip Code Denton, TX 76205 | Amount of Contribution (\$) \$260.00 |
| Principal occupation / Job title (See Instructions) District Judge | | Employer (See Instructions) State of Texas |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 2/2 Rpt: 5/11 |
| 2 FILER NAME Denton Republican Women's Club P.A.C. | | 3 Filer ID (Ethics Commission Filers) 00015596 |
| 4 Date 11/19/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snedeker, Frances (Mrs.) <hr/> 6 Contributor address; City; State; Zip Code Pilot Point, TX 76258 | 7 Amount of Contribution (\$) \$28.83 |
| 8 Principal occupation / Job title (See Instructions) Business Development Director | | 9 Employer (See Instructions) Wells Fargo Bank |
| Date 12/10/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snedeker, Frances (Mrs.) <hr/> Contributor address; City; State; Zip Code Pilot Point, TX 76258 | Amount of Contribution (\$) \$369.97 |
| Principal occupation / Job title (See Instructions) Business Development Director | | Employer (See Instructions) Wells Fargo Bank |

PLEDGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:
Sch: 1/1 Rpt: 6/11

2 FILER NAME

Denton Republican Women's Club P.A.C.

3 Filer ID (Ethics Commission Filers)
00015596

4 TOTAL OF UNITEMIZED PLEDGES

\$ 0.00

5 Date

6 Full name of pledgor ☐ out-of-state PAC (ID#: _____)

7 Pledgor Address; City; State; Zip Code

8 Amount of
pledge (\$)

9 In-kind description
(If applicable)

☐ 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: 7/11

2 FILER NAME

Denton Republican Women's Club P.A.C.

3 Filer ID (Ethics Commission Filers)
00015596

4 TOTAL OF UNITEMIZED LOANS

\$ 0.00

5 Date of loan

7 Name of lender

☐ 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

☐ None

15 Check if personal funds were deposited into political account
(See Instructions)

☐

16 GUARANTOR
INFORMATION

17 Name of guarantor

19 Amount Guaranteed (\$)

☐ not applicable

18 Guarantor address; City; State; Zip Code

20 Principal occupation

21 Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|---|
| 1 Total pages Schedule F1: Sch: 1/3 Rpt: 8/11 | 2 FILER NAME Denton Republican Women's Club P.A.C. | 3 Filer ID (Ethics Commission Filers) 00015596 |
| 4 Date 12/18/2025 | 5 Payee name Denton Freedom House | |
| 6 Amount (\$) \$1,727.68 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 3083 Trails End Aubrey, TX 76227 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Proceeds from Christmas baskets | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation from Christmas Basket Luncheon |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 08/19/2025 | Payee name Harman, Evelyn (Ms.) | |
| Amount (\$) \$506.39 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Denton, TX 76210 | |
| 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 Reimbursement of webpage, contacts, hosting service |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 12/06/2025 | Payee name Harman, Evelyn (Ms.) | |
| Amount (\$) \$66.57 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Denton, TX 76210 | |
| 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 Reimbursement of ad and email expenses |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 2/3 Rpt: 9/11 | 2 FILER NAME Denton Republican Women's Club P.A.C. | 3 Filer ID (Ethics Commission Filers) 00015596 |
| 4 Date 12/04/2025 | 5 Payee name North Texas Print Solutions | |
| 6 Amount (\$) \$233.75 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 2077 Switzer Rd Sanger, TX 76266 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Club cards |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 09/17/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name The Chestnut Tree Bistro | | |
| Amount (\$) \$1,600.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 107 W Hickory St Denton, TX 76201-4115 | |
| PURPOSE OF EXPENDITURE | (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 September luncheon catered |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 10/17/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name The Chestnut Tree Bistro | | |
| Amount (\$) \$297.98 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 107 W Hickory St Denton, TX 76201-4115 | |
| PURPOSE OF EXPENDITURE | (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 October luncheon catered |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|---|
| 1 Total pages Schedule F1: Sch: 3/3 Rpt: 10/11 | 2 FILER NAME Denton Republican Women's Club P.A.C. | 3 Filer ID (Ethics Commission Filers) 00015596 |
| 4 Date 11/22/2025 | 5 Payee name The Chestnut Tree Bistro | |
| 6 Amount (\$) \$856.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 107 W Hickory St Denton, TX 76201-4115 | |
| 8 PURPOSE OF EXPENDITURE | (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 November luncheon catered |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 12/18/2025 | Payee name The Chestnut Tree Bistro | |
| Amount (\$) \$1,500.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 107 W Hickory St Denton, TX 76201-4115 | |
| PURPOSE OF EXPENDITURE | (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 December Christmas luncheon catered |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 08/19/2025 | Payee name U.S. Postal Service | |
| Amount (\$) \$234.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 101 E. McKinney Street Denton, TX 76201 | |
| 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 Annual post office box rental. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:
Sch: 1/1 Rpt: 11/11

2 FILER NAME

Denton Republican Women's Club P.A.C.

3 Filer ID (Ethics Commission Filers)
00015596

4 Date

07/01/2025

5 Name of person from whom amount is received

Denton Area Teacher's Credit Union

8 Amount (\$)

\$2.72

6 Address of person from whom amount is received; City; State; Zip Code

Denton, TX 76202-0827

7 Purpose for which amount is received

Dividend

☐ Check if political contribution returned to filer

Date

10/01/2025

Name of person from whom amount is received

Denton Area Teacher's Credit Union

Amount (\$)

\$2.75

Address of person from whom amount is received; City; State; Zip Code

Denton, TX 76202-0827

Purpose for which amount is received

Dividend

☐ Check if political contribution returned to filer