

# 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<br>(Ethics Commission Filers)<br>00085167 | 2 Total pages filed:<br>21   |  |
| 3 COMMITTEE NAME<br>Leander Area Republican Women                                      |  |  | <b>OFFICE USE ONLY</b><br>Date Received<br>ELECTRONICALLY FILED<br>02/01/2026<br>Date Hand-delivered or Date Postmarked<br>Receipt # Amount<br>Date Processed<br>Date Imaged |  |
| 4 COMMITTEE ADDRESS<br><br><input type="checkbox"/> Change of Address                  | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE<br>PO Box 551<br>Leander, TX 78641  |  |  |  |
| 5 CAMPAIGN TREASURER NAME  | MS / MRS / MR FIRST MI<br>Mrs. Diane K.<br>NICKNAME LAST SUFFIX<br>Herrera   |  |  |  |
| 6 CAMPAIGN TREASURER STREET ADDRESS<br>(Residence or Business)                         | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE<br>2204 Traditions Court<br>Leander, TX 78641  |  |  |  |
| 7 CAMPAIGN TREASURER MAILING ADDRESS<br><br><input type="checkbox"/> Change of Address | STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE<br>2204 Traditions Court<br>Leander, TX 78641   |  |  |  |
| 8 CAMPAIGN TREASURER PHONE   | AREA CODE PHONE NUMBER EXTENSION<br>(610) 585-7665   |  |  |  |
| 9 REPORT TYPE  | <input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR)<br><input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination<br><input type="checkbox"/> Runoff |  |  |  |
| 10 PERIOD COVERED  | Month Day Year Month Day Year<br>01/01/2026 THROUGH 01/22/2026   |  |  |  |
| 11 ELECTION  | ELECTION DATE ELECTION TYPE<br>Month Day Year <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other<br>03/03/2026 <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

|   |  |   |
|---|--|---|
| <b>12 COMMITTEE NAME</b><br>Leander Area Republican Women   |  | <b>13 Filer ID</b> (Ethics Commission Filers)<br>00085167   |
| <b>14 COMMITTEE ACTIVITY</b><br><br>(Attach lists on plain paper to complete this report if necessary.) | <b>1. Candidates</b><br>(Identify by name or, if applicable, classify by party.)                     | A. Supported Republican   |
|   |  | B. Opposed  |
|   | <b>2. Measures</b><br>(Describe by date and location of election and nature of issue.)               | A. Supported  |
|   |  | B. Opposed  |
|   | <b>3. Officeholders Assisted</b><br>(Identify by name or, if applicable, classify by party.)         |   |
|   | <b>15 CONTRIBUTION TOTALS</b>  | <b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</b><br><input type="checkbox"/> check here if this report qualifies for the higher itemization threshold |
|   | <b>2. TOTAL POLITICAL CONTRIBUTIONS</b><br>(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)       | \$ 2,675.05   |
| EXPENDITURE TOTALS  | <b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>  | \$ 0.00   |
|   | <b>4. TOTAL POLITICAL EXPENDITURES</b>   | \$ 8,638.54   |
| CONTRIBUTION BALANCE  | <b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>        | \$ 36,557.91  |
| OUTSTANDING LOAN TOTALS   | <b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b> | \$ 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. Diane K. Herrera

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 21

|   |   |   |
|---|---|---|
| <b>17 COMMITTEE NAME</b><br>Leander Area Republican Women |   | <b>18 Filer ID</b> (Ethics Commission Filers)<br>00085167 |
| <b>19 SCHEDULE SUBTOTALS</b><br>NAME OF SCHEDULE          |   | SUBTOTAL AMOUNT   |
| 1.  | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                                 | \$ 2,675.05   |
| 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 checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS              | \$ 8,638.54   |
| 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

|   |  |  |
|---|--|--|
| <b>The Instruction Guide explains how to complete this form.</b>                  |  | <b>1</b> Total pages Schedule A1:<br>Sch: 1/11 Rpt: 4/21 |
| <b>2</b> FILER NAME<br>Leander Area Republican Women                              |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00085167 |
| <b>4</b> Date<br>01/15/2026   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Anderson, Jeff<br><b>6</b> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641 | <b>7</b> Amount of Contribution (\$)<br><br>\$393.75     |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Constable         |  | <b>9</b> Employer (See Instructions)                     |
| Date<br>01/08/2026  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Bodwin, Terry<br>Contributor address; City; State; Zip Code<br><br>Leander, TX 78641                    | Amount of Contribution (\$)<br><br>\$25.00               |
| Principal occupation / Job title (See Instructions)<br>HR Consultant              |  | Employer (See Instructions)                              |
| Date<br>01/08/2026  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Bodwin, Terry<br>Contributor address; City; State; Zip Code<br><br>Leander, TX 78641                    | Amount of Contribution (\$)<br><br>\$89.25               |
| Principal occupation / Job title (See Instructions)<br>HR Consultant              |  | Employer (See Instructions)                              |
| Date<br>01/15/2026  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Bownds, Ryan<br>Contributor address; City; State; Zip Code<br><br>Leander, TX 78641                     | Amount of Contribution (\$)<br><br>\$10.50               |
| Principal occupation / Job title (See Instructions)<br>Assistant Distric Attorney |  | Employer (See Instructions)                              |
| Date<br>01/22/2026  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Brown, Janet<br>Contributor address; City; State; Zip Code<br><br>Belton, TX 76513                      | Amount of Contribution (\$)<br><br>\$26.25               |
| Principal occupation / Job title (See Instructions)<br>Retired                    |  | Employer (See Instructions)                              |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |   |  |
|---|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>                          |   | <b>1</b> Total pages Schedule A1:<br>Sch: 2/11 Rpt: 5/21 |
| <b>2</b> FILER NAME<br>Leander Area Republican Women                                      |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00085167 |
| <b>4</b> Date<br>01/22/2026   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Chaudhari, Rupal<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Cedar Park, TX 78613 | <b>7</b> Amount of Contribution (\$)<br><br>\$21.00      |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Attorney                  |   | <b>9</b> Employer (See Instructions)                     |
| Date<br>01/22/2026  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Davis, Laura<br><hr/> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641                          | Amount of Contribution (\$)<br><br>\$26.25               |
| Principal occupation / Job title (See Instructions)<br>PAC Leader/mom/sales and marketing |   | Employer (See Instructions)                              |
| Date<br>01/22/2026  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Davis, Vicki<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78759                           | Amount of Contribution (\$)<br><br>\$26.25               |
| Principal occupation / Job title (See Instructions)<br>Retired                            |   | Employer (See Instructions)                              |
| Date<br>01/15/2026  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>DeSimone, Christine<br><hr/> Contributor address; City; State; Zip Code<br><br>Cedar Park, TX 78613                | Amount of Contribution (\$)<br><br>\$26.25               |
| Principal occupation / Job title (See Instructions)<br>Attorney/ Accountant               |   | Employer (See Instructions)                              |
| Date<br>01/08/2026  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Dunning-Bostelman, Kay<br><hr/> Contributor address; City; State; Zip Code<br><br>Cedar Park, TX 78613             | Amount of Contribution (\$)<br><br>\$99.75               |
| Principal occupation / Job title (See Instructions)<br>business owner                     |   | Employer (See Instructions)                              |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

|   |   |  |
|---|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>                          |   | <b>1</b> Total pages Schedule A1:<br>Sch: 3/11 Rpt: 6/21 |
| <b>2</b> FILER NAME<br>Leander Area Republican Women                                      |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00085167 |
| <b>4</b> Date<br>01/06/2026   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Eis, Andy<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641 | <b>7</b> Amount of Contribution (\$)<br><br>\$30.00      |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Oil & Gas Engineer & Exec |   | <b>9</b> Employer (See Instructions)                     |
| Date<br>01/06/2026  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Eis, Sarah<br><hr/> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641                  | Amount of Contribution (\$)<br><br>\$40.00               |
| Principal occupation / Job title (See Instructions)<br>School Psychiatrist                |   | Employer (See Instructions)                              |
| Date<br>01/22/2026  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Estill, Beckye<br><hr/> Contributor address; City; State; Zip Code<br><br>Liberty Hill, TX 78642         | Amount of Contribution (\$)<br><br>\$26.25               |
| Principal occupation / Job title (See Instructions)<br>court clerk                        |   | Employer (See Instructions)                              |
| Date<br>01/22/2026  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Gouldie, Teresa<br><hr/> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641             | Amount of Contribution (\$)<br><br>\$26.25               |
| Principal occupation / Job title (See Instructions)<br>Real Estate Broker                 |   | Employer (See Instructions)                              |
| Date<br>01/15/2026  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Hampton, Gary<br><hr/> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641               | Amount of Contribution (\$)<br><br>\$10.50               |
| Principal occupation / Job title (See Instructions)<br>Interim Director, HUB/SB Program   |   | Employer (See Instructions)                              |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |   |  |
|--|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>                               |   | <b>1</b> Total pages Schedule A1:<br>Sch: 4/11 Rpt: 7/21 |
| <b>2</b> FILER NAME<br>Leander Area Republican Women   |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00085167 |
| <b>4</b> Date<br>01/08/2026  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Harclerode, Barsa<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641 | <b>7</b> Amount of Contribution (\$)<br><br>\$50.00      |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Retired                        |   | <b>9</b> Employer (See Instructions)                     |
| Date<br>01/15/2026   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Hart, Robin<br><hr/> Contributor address; City; State; Zip Code<br><br>Georgetown, TX 78626                      | Amount of Contribution (\$)<br><br>\$36.75               |
| Principal occupation / Job title (See Instructions)<br>employment coordinator                  |   | Employer (See Instructions)                              |
| Date<br>01/15/2026   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Heffelfinger, Terri<br><hr/> Contributor address; City; State; Zip Code<br><br>Leander, TX 78646                 | Amount of Contribution (\$)<br><br>\$26.25               |
| Principal occupation / Job title (See Instructions)<br>insurance broker                        |   | Employer (See Instructions)                              |
| Date<br>01/15/2026   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Herrera, Diane<br><hr/> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641                      | Amount of Contribution (\$)<br><br>\$26.25               |
| Principal occupation / Job title (See Instructions)<br>business owner, financial software firm |   | Employer (See Instructions)                              |
| Date<br>01/15/2026   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Hutchinson, Bobbi<br><hr/> Contributor address; City; State; Zip Code<br><br>Cedar Park, TX 78613                | Amount of Contribution (\$)<br><br>\$10.50               |
| Principal occupation / Job title (See Instructions)<br>Realtor                                 |   | Employer (See Instructions)                              |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |   |  |
|--|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>                   |   | <b>1</b> Total pages Schedule A1:<br>Sch: 5/11 Rpt: 8/21 |
| <b>2</b> FILER NAME<br>Leander Area Republican Women                               |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00085167 |
| <b>4</b> Date<br>01/22/2026  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Ihnen, Kathy<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Cedar Park, TX 78613 | <b>7</b> Amount of Contribution (\$)<br><br>\$99.75      |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Retired Teacher    |   | <b>9</b> Employer (See Instructions)                     |
| Date<br>01/22/2026   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Ihnen, Kathy<br><hr/> Contributor address; City; State; Zip Code<br><br>Cedar Park, TX 78613                   | Amount of Contribution (\$)<br><br>\$26.25               |
| Principal occupation / Job title (See Instructions)<br>Retired Teacher             |   | Employer (See Instructions)                              |
| Date<br>01/15/2026   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Keith, Allison<br><hr/> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641                    | Amount of Contribution (\$)<br><br>\$26.25               |
| Principal occupation / Job title (See Instructions)<br>retired                     |   | Employer (See Instructions)                              |
| Date<br>01/15/2026   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Kincaid, Laura<br><hr/> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641                    | Amount of Contribution (\$)<br><br>\$10.50               |
| Principal occupation / Job title (See Instructions)<br>Retired operations manager  |   | Employer (See Instructions)                              |
| Date<br>01/08/2026   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>McDonald, David<br><hr/> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641                   | Amount of Contribution (\$)<br><br>\$31.50               |
| Principal occupation / Job title (See Instructions)<br>Traffic Incident Operations |   | Employer (See Instructions)                              |



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

|   |   |  |
|---|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>                        |   | <b>1</b> Total pages Schedule A1:<br>Sch: 6/11 Rpt: 9/21 |
| <b>2</b> FILER NAME<br>Leander Area Republican Women                                    |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00085167 |
| <b>4</b> Date<br>01/08/2026   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>McDonald, Katharine<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641 | <b>7</b> Amount of Contribution (\$)<br><br>\$89.25      |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>business operations     |   | <b>9</b> Employer (See Instructions)                     |
| Date<br>01/15/2026  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>McDonald, Stacy<br><hr/> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641                       | Amount of Contribution (\$)<br><br>\$10.50               |
| Principal occupation / Job title (See Instructions)<br>Contract Programmer/Data Analyst |   | Employer (See Instructions)                              |
| Date<br>01/15/2026  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>McGee, Victoria<br><hr/> Contributor address; City; State; Zip Code<br><br>Cedar Park, TX 78613                    | Amount of Contribution (\$)<br><br>\$10.50               |
| Principal occupation / Job title (See Instructions)<br>Retired Ministry                 |   | Employer (See Instructions)                              |
| Date<br>01/08/2026  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Militello, Colleen<br><hr/> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641                    | Amount of Contribution (\$)<br><br>\$42.00               |
| Principal occupation / Job title (See Instructions)<br>Retired Realtor                  |   | Employer (See Instructions)                              |
| Date<br>01/08/2026  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Molina, Claire<br><hr/> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641                        | Amount of Contribution (\$)<br><br>\$42.00               |
| Principal occupation / Job title (See Instructions)<br>Solutions Consultant             |   | Employer (See Instructions)                              |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |   |   |
|--|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>         |   | <b>1</b> Total pages Schedule A1:<br>Sch: 7/11 Rpt: 10/21 |
| <b>2</b> FILER NAME<br>Leander Area Republican Women                     |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00085167  |
| <b>4</b> Date<br>01/22/2026  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Moore, Sarah<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Liberty Hill, TX 78642 | <b>7</b> Amount of Contribution (\$)<br><br>\$26.25       |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Attorney |   | <b>9</b> Employer (See Instructions)                      |
| Date<br>01/22/2026   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Naylor, Nancy<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78731                        | Amount of Contribution (\$)<br><br>\$26.25                |
| Principal occupation / Job title (See Instructions)<br>Retired           |   | Employer (See Instructions)                               |
| Date<br>01/08/2026   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Naylor, Nancy<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78731                        | Amount of Contribution (\$)<br><br>\$42.00                |
| Principal occupation / Job title (See Instructions)<br>Retired           |   | Employer (See Instructions)                               |
| Date<br>01/15/2026   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Neipert, Leslie<br><hr/> Contributor address; City; State; Zip Code<br><br>Round Rock, TX 78681                  | Amount of Contribution (\$)<br><br>\$26.25                |
| Principal occupation / Job title (See Instructions)<br>sales             |   | Employer (See Instructions)                               |
| Date<br>01/08/2026   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>PULVER, MARIE<br><hr/> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641                       | Amount of Contribution (\$)<br><br>\$10.00                |
| Principal occupation / Job title (See Instructions)<br>retired           |   | Employer (See Instructions)                               |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |   |   |
|--|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>                   |   | <b>1</b> Total pages Schedule A1:<br>Sch: 8/11 Rpt: 11/21 |
| <b>2</b> FILER NAME<br>Leander Area Republican Women                               |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00085167  |
| <b>4</b> Date<br>01/06/2026  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Pantalion, Debra<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Cedar Park, TX 78613 | <b>7</b> Amount of Contribution (\$)<br><br>\$335.00      |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Retired Accounting |   | <b>9</b> Employer (See Instructions)                      |
| Date<br>01/02/2026   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Pantalion-Parker, Kathryn<br><hr/> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641             | Amount of Contribution (\$)<br><br>\$31.50                |
| Principal occupation / Job title (See Instructions)<br>fashion consultant          |   | Employer (See Instructions)                               |
| Date<br>01/02/2026   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Pantalion-Parker, Kathryn<br><hr/> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641             | Amount of Contribution (\$)<br><br>\$351.75               |
| Principal occupation / Job title (See Instructions)<br>fashion consultant          |   | Employer (See Instructions)                               |
| Date<br>01/15/2026   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Pompa, Paula<br><hr/> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641-1954                     | Amount of Contribution (\$)<br><br>\$27.30                |
| Principal occupation / Job title (See Instructions)<br>Health and Human Svcs       |   | Employer (See Instructions)                               |
| Date<br>01/22/2026   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Raya, Stefanie<br><hr/> Contributor address; City; State; Zip Code<br><br>Cedar Park, TX 78613                     | Amount of Contribution (\$)<br><br>\$10.50                |
| Principal occupation / Job title (See Instructions)<br>Self-employed consultant    |   | Employer (See Instructions)                               |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

|  |  |   |
|--|--|---|
| <b>The Instruction Guide explains how to complete this form.</b>                                       |  | <b>1</b> Total pages Schedule A1:<br>Sch: 9/11 Rpt: 12/21 |
| <b>2</b> FILER NAME<br>Leander Area Republican Women   |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00085167  |
| <b>4</b> Date<br>01/15/2026  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Rivers, Lisa<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641 | <b>7</b> Amount of Contribution (\$)<br><br>\$26.25       |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Retired Therapeutice Riding Instructor |  | <b>9</b> Employer (See Instructions)                      |
| Date<br>01/15/2026   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Robertson, Dr. Evelyn<br><hr/> Contributor address; City; State; Zip Code<br><br>Liberty Hill, TX 78642     | Amount of Contribution (\$)<br><br>\$10.50                |
| Principal occupation / Job title (See Instructions)<br>Executive Consultant                            |  | Employer (See Instructions)                               |
| Date<br>01/22/2026   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Scheuplein, Lisa<br><hr/> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641               | Amount of Contribution (\$)<br><br>\$26.25                |
| Principal occupation / Job title (See Instructions)<br>technical writer                                |  | Employer (See Instructions)                               |
| Date<br>01/22/2026   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Schwertner, Charles<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78711             | Amount of Contribution (\$)<br><br>\$26.25                |
| Principal occupation / Job title (See Instructions)<br>TX Senator                                      |  | Employer (See Instructions)                               |
| Date<br>01/15/2026   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Staudt, Edna<br><hr/> Contributor address; City; State; Zip Code<br><br>Leander, TX 78646                   | Amount of Contribution (\$)<br><br>\$10.50                |
| Principal occupation / Job title (See Instructions)<br>Retired Judge                                   |  | Employer (See Instructions)                               |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |  |  |
|---|--|--|
| <b>The Instruction Guide explains how to complete this form.</b>                          |  | <b>1</b> Total pages Schedule A1:<br>Sch: 10/11 Rpt: 13/21 |
| <b>2</b> FILER NAME<br>Leander Area Republican Women                                      |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00085167   |
| <b>4</b> Date<br>01/08/2026   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Staudt, Edna<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Leander, TX 78646 | <b>7</b> Amount of Contribution (\$)<br><br>\$42.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Retired Judge             |  | <b>9</b> Employer (See Instructions)                       |
| Date<br>01/15/2026  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Turner, Jennifer<br><hr/> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641               | Amount of Contribution (\$)<br><br>\$10.50                 |
| Principal occupation / Job title (See Instructions)<br>Retired Teacher                    |  | Employer (See Instructions)                                |
| Date<br>01/08/2026  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Ulbricht, Ashley<br><hr/> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641               | Amount of Contribution (\$)<br><br>\$131.25                |
| Principal occupation / Job title (See Instructions)<br>fighting patriot, homemaker        |  | Employer (See Instructions)                                |
| Date<br>01/15/2026  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Van Arnam, Catherine<br><hr/> Contributor address; City; State; Zip Code<br><br>Cedar Park, TX 78613        | Amount of Contribution (\$)<br><br>\$26.25                 |
| Principal occupation / Job title (See Instructions)<br>Communications Director            |  | Employer (See Instructions)                                |
| Date<br>01/15/2026  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Warrick, Amy<br><hr/> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641                   | Amount of Contribution (\$)<br><br>\$10.50                 |
| Principal occupation / Job title (See Instructions)<br>real estate broker/ business owner |  | Employer (See Instructions)                                |

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

|   |  |  |
|---|--|--|
| <b>The Instruction Guide explains how to complete this form.</b>                |  | <b>1</b> Total pages Schedule A1:<br>Sch: 11/11 Rpt: 14/21 |
| <b>2</b> FILER NAME<br>Leander Area Republican Women                            |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00085167   |
| <b>4</b> Date<br>01/15/2026   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Wilkie, Kevin<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Georgetown, TX 78633 | <b>7</b> Amount of Contribution (\$)<br><br>\$10.50        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Law Enforcement |  | <b>9</b> Employer (See Instructions)                       |
| Date<br>01/08/2026  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Yelaun, Alexander<br><hr/> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641                  | Amount of Contribution (\$)<br><br>\$42.00                 |
| Principal occupation / Job title (See Instructions)<br>Film Producer            |  | 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.

|   |   |  |
|---|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 1/7 Rpt: 15/21  | <b>2</b> FILER NAME<br>Leander Area Republican Women                                      | <b>3</b> Filer ID (Ethics Commission Filers)<br>00085167   |
| <b>4</b> Date<br>01/12/2026   | <b>5</b> Payee name<br>Amazon.com   |  |
| <b>6</b> Amount (\$)<br>\$115.56<br><br><input type="checkbox"/> Expenditure from corporate funds | <b>7</b> Payee address; City; State; Zip Code<br>410 Terry Ave N<br><br>Seattle, WA 98109 |  |
| <b>8</b> PURPOSE OF EXPENDITURE   | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Event Expense  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>event supplies |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH                               |   |  |
| Date<br>01/05/2026  | Candidate/Officeholder name<br>Office sought<br>Office held                               |  |
| Payee name<br>Amazon.com  |   |  |
| Amount (\$)<br>\$7.45<br><br><input type="checkbox"/> Expenditure from corporate funds            | Payee address; City; State; Zip Code<br>410 Terry Ave N<br><br>Seattle, WA 98109          |  |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense         | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>event supplies        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH  |   |  |
| Date<br>01/22/2026  | Candidate/Officeholder name<br>Office sought<br>Office held                               |  |
| Payee name<br>Greater Giving  |   |  |
| Amount (\$)<br>\$20.49<br><br><input type="checkbox"/> Expenditure from corporate funds           | Payee address; City; State; Zip Code<br>PO Box 935886<br><br>Atlanta, GA 31193            |  |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Fees                  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>banking fees          |
| 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.

|  |   |  |
|--|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 2/7 Rpt: 16/21   | <b>2</b> FILER NAME<br>Leander Area Republican Women                                    | <b>3</b> Filer ID (Ethics Commission Filers)<br>00085167   |
| <b>4</b> Date<br>01/15/2026  | <b>5</b> Payee name<br>Greater Giving   |  |
| <b>6</b> Amount (\$)<br>\$38.00<br><br><input type="checkbox"/> Expenditure from corporate funds | <b>7</b> Payee address; City; State; Zip Code<br>PO Box 935886<br><br>Atlanta, GA 31193 |  |
| <b>8</b> PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Fees         | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>banking fees |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH                              |   |  |
| Date<br>01/08/2026   | Candidate/Officeholder name<br>Office sought<br>Office held                             |  |
| Payee name<br>Greater Giving   |   |  |
| Amount (\$)<br>\$34.37<br><br><input type="checkbox"/> Expenditure from corporate funds          | Payee address; City; State; Zip Code<br>PO Box 935886<br><br>Atlanta, GA 31193          |  |
| PURPOSE OF EXPENDITURE   | (a) Category (See Categories listed at the top of this schedule)<br>Fees                | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>banking fees        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                       |   |  |
| Date<br>01/02/2026   | Candidate/Officeholder name<br>Office sought<br>Office held                             |  |
| Payee name<br>Greater Giving   |   |  |
| Amount (\$)<br>\$16.22<br><br><input type="checkbox"/> Expenditure from corporate funds          | Payee address; City; State; Zip Code<br>PO Box 935886<br><br>Atlanta, GA 31193          |  |
| PURPOSE OF EXPENDITURE   | (a) Category (See Categories listed at the top of this schedule)<br>Fees                | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>banking fees        |
| 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.

|   |  |  |
|---|--|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 3/7 Rpt: 17/21  | <b>2</b> FILER NAME<br>Leander Area Republican Women   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00085167   |
| <b>4</b> Date<br>01/07/2026   | <b>5</b> Payee name<br>Hill Country Community Ministries   |  |
| <b>6</b> Amount (\$)<br>\$1,381.25<br><br><input type="checkbox"/> Expenditure from corporate funds | <b>7</b> Payee address; City; State; Zip Code<br>P.O. Box 1064<br><br>Leander, TX 78646  |  |
| <b>8</b> PURPOSE OF EXPENDITURE   | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>table sponsor  |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                 |  |  |
| Date<br>01/12/2026  | Candidate/Officeholder name<br>Hobby Lobby   |  |
| Amount (\$)<br>\$41.14<br><br><input type="checkbox"/> Expenditure from corporate funds             | Office sought<br>1501 E. Whitestone Bldg D<br><br>Cedar Park, TX 78613   |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Event Expense   | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>event supplies |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH  |  |  |
| Date<br>01/15/2026  | Candidate/Officeholder name<br>Intuit  |  |
| Amount (\$)<br>\$40.51<br><br><input type="checkbox"/> Expenditure from corporate funds             | Office sought<br>2800 E. Commerce Center Place<br><br>Tucson, AZ 85706   |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Accounting/Banking  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>software       |
| 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.

|   |  |  |
|---|--|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 4/7 Rpt: 18/21  | <b>2</b> FILER NAME<br>Leander Area Republican Women   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00085167   |
| <b>4</b> Date<br>01/12/2026   | <b>5</b> Payee name<br>Leander Party Rentals   |  |
| <b>6</b> Amount (\$)<br>\$158.98<br><br><input type="checkbox"/> Expenditure from corporate funds | <b>7</b> Payee address; City; State; Zip Code<br>1113 Cotton Patch Trail<br><br>Leander, TX 78641    |  |
| <b>8</b> PURPOSE OF EXPENDITURE   | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Event Expense             | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>event supplies |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH                               |  |  |
| Date<br>01/07/2026  | Candidate/Officeholder name<br>Payee name<br>Lowe's  |  |
| Amount (\$)<br>\$194.81<br><br><input type="checkbox"/> Expenditure from corporate funds          | Payee address; City; State; Zip Code<br>1495 A. Highway 183<br><br>Leander, TX 78641                 |  |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense                    | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>event supplies        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH  |  |  |
| Date<br>01/05/2026  | Candidate/Officeholder name<br>Payee name<br>Mailchimp   |  |
| Amount (\$)<br>\$20.79<br><br><input type="checkbox"/> Expenditure from corporate funds           | Payee address; City; State; Zip Code<br>675 Ponce de Leon Ave NE Suite 5000<br><br>Atlanta, GA 30308 |  |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Advertising Expense              | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>website               |
| 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.

|   |  |  |
|---|--|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 5/7 Rpt: 19/21  | <b>2</b> FILER NAME<br>Leander Area Republican Women   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00085167   |
| <b>4</b> Date<br>01/12/2026   | <b>5</b> Payee name<br>Randalls  |  |
| <b>6</b> Amount (\$)<br>\$108.51<br><br><input type="checkbox"/> Expenditure from corporate funds | <b>7</b> Payee address; City; State; Zip Code<br>3441 Lakeline Blvd<br><br>Leander, TX 78641 |  |
| <b>8</b> PURPOSE OF EXPENDITURE   | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Event Expense     | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>event supplies |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH                               | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>01/07/2026  | Payee name<br>Roaring Fork   |  |
| Amount (\$)<br>\$580.33<br><br><input type="checkbox"/> Expenditure from corporate funds          | Payee address; City; State; Zip Code<br>701 Congress Ave.<br><br>Austin, TX 78701            |  |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense            | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Catering              |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>01/02/2026  | Payee name<br>TFRW   |  |
| Amount (\$)<br>\$632.50<br><br><input type="checkbox"/> Expenditure from corporate funds          | Payee address; City; State; Zip Code<br>PO Box 171146<br><br>Austin, TX 78717-0041           |  |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Fees                     | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>membership dues       |
| 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.

|   |   |  |
|---|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 6/7 Rpt: 20/21  | <b>2</b> FILER NAME<br>Leander Area Republican Women  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00085167   |
| <b>4</b> Date<br>01/07/2026   | <b>5</b> Payee name<br>TX Alliance for Life   |  |
| <b>6</b> Amount (\$)<br>\$200.00<br><br><input type="checkbox"/> Expenditure from corporate funds | <b>7</b> Payee address; City; State; Zip Code<br>8000 Centre Park Dr. Ste. 380<br><br>Austin, TX 78754  |  |
| <b>8</b> PURPOSE OF EXPENDITURE   | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By Candidate/Officeholder/Political Committee | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>table sponsor  |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH                               | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>01/06/2026  | Payee name<br>Texas Comptroller of Public Accounts  |  |
| Amount (\$)<br>\$4,650.82<br><br><input type="checkbox"/> Expenditure from corporate funds        | Payee address; City; State; Zip Code<br>P.O. Box 13528<br><br>Austin, TX 78711-3528   |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Fees   | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>tax            |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>01/07/2026  | Payee name<br>Walgreens   |  |
| Amount (\$)<br>\$365.90<br><br><input type="checkbox"/> Expenditure from corporate funds          | Payee address; City; State; Zip Code<br>905 Crystal Falls Pkwy<br><br>Leander, TX 78641   |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Event Expense  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>event supplies |
| 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:<br>Sch: 7/7 Rpt: 21/21   | 2 FILER NAME<br>Leander Area Republican Women   | 3 Filer ID (Ethics Commission Filers)<br>00085167  |
| 4 Date<br>01/07/2026  | 5 Payee name<br>Weebly/Square   |  |
| 6 Amount (\$)<br>\$30.91<br><br><input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code<br>1455 Market Street Suite 600<br><br>San Francisco, CA 94103 |  |
| 8 PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Advertising Expense               | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>website |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH                              | Candidate/Officeholder name   | Office sought Office held  |