

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) 00054315	2 Total pages filed: 48
3 COMMITTEE NAME Texas Federation of Republican Women PAC		OFFICE USE ONLY	
		Date Received ELECTRONICALLY FILED 02/23/2026	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 13740 N. Hwy. 183, Ste. J4 Austin, TX 78750-1830		
	Date Hand-delivered or Date Postmarked		
	Receipt #	Amount	
	Date Processed		
		Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI
	Mrs.	Diane K.	
		NICKNAME	SUFFIX
		Herrera	
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 2204 Traditions Court Leander, TX 78641		
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2204 Traditions Court Leander, TX 78641		
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	(610)	585-7665	
9 REPORT TYPE	<input type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Dissolution (Attach PAC-DR)
	<input type="checkbox"/> July 15	<input checked="" 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	THROUGH	Month Day Year
	01/23/2026		02/21/2026
11 ELECTION	ELECTION DATE	ELECTION TYPE	
	Month Day Year 03/03/2026	<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 Texas Federation of Republican Women PAC	13 Filer ID (Ethics Commission Filers) 00054315
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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 Republican
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 51,151.70
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 62,456.56
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 625,526.72
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. 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

17 COMMITTEE NAME Texas Federation of Republican Women PAC		18 Filer ID (Ethics Commission Filers) 00054315
19 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 50,441.82
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 709.88
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	\$ 57,577.10
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 4,879.46
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	\$ 310.47

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/27 Rpt: 4/48
2 FILER NAME Texas Federation of Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00054315
4 Date 01/27/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alamo City RW <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78232-2701	7 Amount of Contribution (\$) \$475.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/03/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alamo City RW <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78232-2701	Amount of Contribution (\$) \$375.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Angleton Republican Women <hr/> Contributor address; City; State; Zip Code Alvin, TX 77511	Amount of Contribution (\$) \$75.90
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bay Area RW <hr/> Contributor address; City; State; Zip Code Webster, TX 77598-8103	Amount of Contribution (\$) \$420.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/08/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blanco County Republican Women <hr/> Contributor address; City; State; Zip Code Johnson City, TX 78636	Amount of Contribution (\$) \$50.60
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/27 Rpt: 5/48
2 FILER NAME Texas Federation of Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00054315
4 Date 02/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blanco County Republican Women <hr/> 6 Contributor address; City; State; Zip Code Johnson City, TX 78636	7 Amount of Contribution (\$) \$50.60
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brazosport RW <hr/> Contributor address; City; State; Zip Code Freeport, TX 77541	Amount of Contribution (\$) \$425.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/29/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brazosport RW <hr/> Contributor address; City; State; Zip Code Freeport, TX 77541	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brinkley, Ryan <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) Candidate for Congress		Employer (See Instructions)
Date 02/03/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown Co. RW <hr/> Contributor address; City; State; Zip Code Brownwood, TX 76804-1783	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/27 Rpt: 6/48
2 FILER NAME Texas Federation of Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00054315
4 Date 01/29/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burnet County Republican Womens Club <hr/> 6 Contributor address; City; State; Zip Code Marble Falls, TX 78654	7 Amount of Contribution (\$) \$328.90
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burnet County Republican Womens Club <hr/> Contributor address; City; State; Zip Code Marble Falls, TX 78654	Amount of Contribution (\$) \$455.40
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canyon Lake Republican Women <hr/> Contributor address; City; State; Zip Code Spring Branch, TX 78070	Amount of Contribution (\$) \$126.50
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canyon Lake Republican Women <hr/> Contributor address; City; State; Zip Code Spring Branch, TX 78070	Amount of Contribution (\$) \$227.70
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Central Texas Republican Women <hr/> Contributor address; City; State; Zip Code Belton, TX 76513	Amount of Contribution (\$) \$278.30
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/27 Rpt: 7/48
2 FILER NAME Texas Federation of Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00054315
4 Date 02/20/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Central Texas Republican Women <hr/> 6 Contributor address; City; State; Zip Code BELTON, TX 76513	7 Amount of Contribution (\$) \$354.20
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cherokee County Republican Women <hr/> Contributor address; City; State; Zip Code Jacksonville, TX 75766	Amount of Contribution (\$) \$253.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cherokee County Republican Women <hr/> Contributor address; City; State; Zip Code Jacksonville, TX 75766	Amount of Contribution (\$) \$25.30
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clear Creek RW <hr/> Contributor address; City; State; Zip Code League City, TX 77573	Amount of Contribution (\$) \$227.70
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/24/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clear Creek Republican Women <hr/> Contributor address; City; State; Zip Code League City, TX 77573	Amount of Contribution (\$) \$303.60
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/27 Rpt: 8/48
2 FILER NAME Texas Federation of Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00054315
4 Date 02/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clear Creek Republican Women	7 Amount of Contribution (\$) \$278.30
6 Contributor address; City; State; Zip Code League City, TX 77573		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conner Harrington Republican Women	Amount of Contribution (\$) \$25.30
Contributor address; City; State; Zip Code Plano, TX 75086		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/19/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conner Harrington Republican Women	Amount of Contribution (\$) \$25.30
Contributor address; City; State; Zip Code Plano, TX 75086		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/21/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conner Harrington Republican Women	Amount of Contribution (\$) \$25.30
Contributor address; City; State; Zip Code Plano, TX 75086		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/28/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooke County Republican Women	Amount of Contribution (\$) \$177.10
Contributor address; City; State; Zip Code Gainesville, TX 76240		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/27 Rpt: 9/48
2 FILER NAME Texas Federation of Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00054315
4 Date 02/11/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coryell County Republican Women <hr/> 6 Contributor address; City; State; Zip Code Copperas Cove, TX 76522-2572	7 Amount of Contribution (\$) \$151.80
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cowtown RW <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 78102	Amount of Contribution (\$) \$1,470.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/03/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cross Timbers Republican Womens Club <hr/> Contributor address; City; State; Zip Code Stephenville, TX 76401	Amount of Contribution (\$) \$227.70
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/26/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cy-Fair Republican Women <hr/> Contributor address; City; State; Zip Code Houston, TX 77095	Amount of Contribution (\$) \$50.60
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dutton, Jill <hr/> Contributor address; City; State; Zip Code Ben Wheeler, TX 75754-3260	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) HR		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/27 Rpt: 10/48
2 FILER NAME Texas Federation of Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00054315
4 Date 01/30/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ECRW 6 Contributor address; City; State; Zip Code Odessa, TX 79768	7 Amount of Contribution (\$) \$1,340.90
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/29/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) East Montgomery Co. RW Contributor address; City; State; Zip Code New Caney, TX 77357	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) East Texas Republican Women Contributor address; City; State; Zip Code Atlanta, TX 75551	Amount of Contribution (\$) \$50.60
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/29/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis Co Republican Women Contributor address; City; State; Zip Code Waxahachie, TX 75165	Amount of Contribution (\$) \$25.30
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/29/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Enriqueez, Abraham Contributor address; City; State; Zip Code Beverly, MA 01915	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Candidate for Congress, CEO of Bienvenido		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/27 Rpt: 11/48
2 FILER NAME Texas Federation of Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00054315
4 Date 02/07/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FBRWC <hr/> 6 Contributor address; City; State; Zip Code Richmond, TX 77407	7 Amount of Contribution (\$) \$379.50
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fannin Co. RW <hr/> Contributor address; City; State; Zip Code Bonham, TX 75418-0712	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fannin Co. RW <hr/> Contributor address; City; State; Zip Code Bonham, TX 75418-0712	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fayette Co. RW <hr/> Contributor address; City; State; Zip Code La Grange, TX 78945	Amount of Contribution (\$) \$225.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/03/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galveston RW <hr/> Contributor address; City; State; Zip Code Galveston, TX 77550	Amount of Contribution (\$) \$375.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/27 Rpt: 12/48
2 FILER NAME Texas Federation of Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00054315
4 Date 01/31/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Georgetown Area Republican Women PAC 6 Contributor address; City; State; Zip Code Georgetown, TX 78633	7 Amount of Contribution (\$) \$936.10
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gillespie, Melody Contributor address; City; State; Zip Code Bowie, TX 76230	Amount of Contribution (\$) \$20.20
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 01/28/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Golden Corridor Republican Women Contributor address; City; State; Zip Code Murphy, TX 75094	Amount of Contribution (\$) \$657.80
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/23/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Golden Triangle RW Contributor address; City; State; Zip Code Beaumont, TX 77726	Amount of Contribution (\$) \$20.20
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/23/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Golden Triangle RW Contributor address; City; State; Zip Code Beaumont, TX 77726	Amount of Contribution (\$) \$556.60
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/27 Rpt: 13/48
2 FILER NAME Texas Federation of Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00054315
4 Date 02/03/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Great State Rep <hr/> 6 Contributor address; City; State; Zip Code Hallettsville, TX 77964-0764	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/29/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Great State Republicans <hr/> Contributor address; City; State; Zip Code Hallettsville, TX 77964-0764	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Great State Republicans <hr/> Contributor address; City; State; Zip Code Hallettsville, TX 77964-0764	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Great State Republicans <hr/> Contributor address; City; State; Zip Code Hallettsville, TX 77964-0764	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/04/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greater El Paso Republican Women <hr/> Contributor address; City; State; Zip Code El Paso, TX 79925	Amount of Contribution (\$) \$278.30
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/27 Rpt: 14/48
2 FILER NAME Texas Federation of Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00054315
4 Date 02/04/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greater El Paso Republican Women	7 Amount of Contribution (\$) \$20.20
6 Contributor address; City; State; Zip Code El Paso, TX 79925		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guadalupe Co. RW	Amount of Contribution (\$) \$1,170.00
Contributor address; City; State; Zip Code Seguin, TX 78156		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/28/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hays County Republican Women	Amount of Contribution (\$) \$986.70
Contributor address; City; State; Zip Code Dripping Springs, TX 78620		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hutchinson Co. RW	Amount of Contribution (\$) \$295.00
Contributor address; City; State; Zip Code Borger, TX 79008-0882		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Irving Republican Women	Amount of Contribution (\$) \$126.50
Contributor address; City; State; Zip Code Irving, TX 75062-4459		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/27 Rpt: 15/48
2 FILER NAME Texas Federation of Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00054315
4 Date 02/03/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jimmerson, Dr. Melanie <hr/> 6 Contributor address; City; State; Zip Code Baytown, TX 77521	7 Amount of Contribution (\$) \$12.00
8 Principal occupation / Job title (See Instructions) Clergy		9 Employer (See Instructions)
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kendall County Republican Women <hr/> Contributor address; City; State; Zip Code Boerne, TX 78006	Amount of Contribution (\$) \$328.90
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kendall County Republican Women <hr/> Contributor address; City; State; Zip Code Boerne, TX 78006	Amount of Contribution (\$) \$303.60
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/29/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kingwood Area RW <hr/> Contributor address; City; State; Zip Code Kingwood, TX 77345-5411	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinney Co. RW <hr/> Contributor address; City; State; Zip Code Brackettville, TX 78832	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/27 Rpt: 16/48
2 FILER NAME Texas Federation of Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00054315
4 Date 02/05/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LCARW <hr/> 6 Contributor address; City; State; Zip Code montgomery, TX 77356	7 Amount of Contribution (\$) \$177.10
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/01/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leander Area Republican Women <hr/> Contributor address; City; State; Zip Code Leander, TX 78646	Amount of Contribution (\$) \$101.20
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leander Area Republican Women <hr/> Contributor address; City; State; Zip Code Leander, TX 78646	Amount of Contribution (\$) \$556.60
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/25/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Liberty Belles Republican Women <hr/> Contributor address; City; State; Zip Code Conroe, TX 77305	Amount of Contribution (\$) \$101.20
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lost Pines Republican Women <hr/> Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$303.60
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/27 Rpt: 17/48
2 FILER NAME Texas Federation of Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00054315
4 Date 01/27/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lubbock Area RW <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79493-6315	7 Amount of Contribution (\$) \$1,445.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maggio, Marie <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77706	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maggio, Pearl <hr/> Contributor address; City; State; Zip Code Conroe, TX 77384	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 01/28/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCulloch County Republican Women <hr/> Contributor address; City; State; Zip Code Brady, TX 76825	Amount of Contribution (\$) \$20.20
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDaniel, Linda <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/27 Rpt: 18/48
2 FILER NAME Texas Federation of Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00054315
4 Date 02/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McLennan County Republican Women <hr/> 6 Contributor address; City; State; Zip Code Robinson, TX 76706	7 Amount of Contribution (\$) \$885.50
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Medina County Republican Women <hr/> Contributor address; City; State; Zip Code Devine, TX 78016	Amount of Contribution (\$) \$20.20
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Medina County Republican Women <hr/> Contributor address; City; State; Zip Code Devine, TX 78016	Amount of Contribution (\$) \$379.50
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mesquite RW <hr/> Contributor address; City; State; Zip Code Mesquite, TX 75185	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mesquite RW <hr/> Contributor address; City; State; Zip Code Mesquite, TX 75185	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/27 Rpt: 19/48
2 FILER NAME Texas Federation of Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00054315
4 Date 01/29/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Metroplex Republican Womcn <hr/> 6 Contributor address; City; State; Zip Code Grapevine, TX 76051	7 Amount of Contribution (\$) \$480.70
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/26/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montgomery County Republican Women <hr/> Contributor address; City; State; Zip Code Conroe, TX 77305	Amount of Contribution (\$) \$151.80
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montgomery County Republican Women <hr/> Contributor address; City; State; Zip Code Conroe, TX 77305	Amount of Contribution (\$) \$328.90
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/19/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NWFRW <hr/> Contributor address; City; State; Zip Code Houston, TX 77019	Amount of Contribution (\$) \$531.30
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/29/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nacogdoches Co. RW <hr/> Contributor address; City; State; Zip Code Nacogdoches, TX 75961	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/27 Rpt: 20/48
2 FILER NAME Texas Federation of Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00054315
4 Date 01/31/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) North Shore Republican Women <hr/> 6 Contributor address; City; State; Zip Code Montgomery, TX 77356	7 Amount of Contribution (\$) \$885.50
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) North Shore Republican Women <hr/> Contributor address; City; State; Zip Code Montgomery, TX 77356	Amount of Contribution (\$) \$1,138.50
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pecan Valley RW <hr/> Contributor address; City; State; Zip Code Brownwood, TX 76804	Amount of Contribution (\$) \$159.92
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pikl, Joanie <hr/> Contributor address; City; State; Zip Code Prosper, TX 75078	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plano Republican Women <hr/> Contributor address; City; State; Zip Code Allen, TX 75013	Amount of Contribution (\$) \$177.10
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/27 Rpt: 21/48
2 FILER NAME Texas Federation of Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00054315
4 Date 01/29/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Preston West RW <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75230	7 Amount of Contribution (\$) \$1,020.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RW of Greater North Texas <hr/> Contributor address; City; State; Zip Code Frisco, TX 75034	Amount of Contribution (\$) \$151.80
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/29/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RW of Katy <hr/> Contributor address; City; State; Zip Code Katy, TX 77494	Amount of Contribution (\$) \$575.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RW of Kerr Co. <hr/> Contributor address; City; State; Zip Code Kerrville, TX 78029	Amount of Contribution (\$) \$525.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/29/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RW of Kimble Co. <hr/> Contributor address; City; State; Zip Code Junction, TX 76849	Amount of Contribution (\$) \$270.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/27 Rpt: 22/48
2 FILER NAME Texas Federation of Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00054315
4 Date 01/29/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RW of Milam Co. <hr/> 6 Contributor address; City; State; Zip Code Rockdale, TX 76567	7 Amount of Contribution (\$) \$545.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RW of Upshur Co. <hr/> Contributor address; City; State; Zip Code Big Sandy, TX 75755	Amount of Contribution (\$) \$320.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/29/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RW of Yoakum <hr/> Contributor address; City; State; Zip Code Yoakum, TX 77995	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/01/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Republican Women of Gregg County <hr/> Contributor address; City; State; Zip Code Longview, TX 75606	Amount of Contribution (\$) \$1,012.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Republican Women of Starr County <hr/> Contributor address; City; State; Zip Code Rio Grande City, TX 78582	Amount of Contribution (\$) \$20.20
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/27 Rpt: 23/48
2 FILER NAME Texas Federation of Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00054315
4 Date 01/27/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Republican Women of Starr County	7 Amount of Contribution (\$) \$253.00
6 Contributor address; City; State; Zip Code Rio Grande City, TX 78582		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/21/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Republican Women of Starr County	Amount of Contribution (\$) \$50.60
Contributor address; City; State; Zip Code Rio Grande City, TX 78582		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Republican Women of Trinity County	Amount of Contribution (\$) \$253.00
Contributor address; City; State; Zip Code Trinity, TX 75862		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, Daryl	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Parker, TX 75002		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 02/01/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson Republican Women	Amount of Contribution (\$) \$455.40
Contributor address; City; State; Zip Code Richardson, TX 75083		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/27 Rpt: 24/48
2 FILER NAME Texas Federation of Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00054315
4 Date 02/21/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rockwall County Republican Women <hr/> 6 Contributor address; City; State; Zip Code Rockwall, TX 75087	7 Amount of Contribution (\$) \$632.50
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/24/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salado Area Republican Women <hr/> Contributor address; City; State; Zip Code Salado, TX 76571	Amount of Contribution (\$) \$25.30
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/01/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) San Angelo Republican Women <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76906	Amount of Contribution (\$) \$75.90
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) San Angelo Republican Women <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76906	Amount of Contribution (\$) \$126.50
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/29/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) San Antonio RW <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78216	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/27 Rpt: 25/48
2 FILER NAME Texas Federation of Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00054315
4 Date 02/10/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmidt, Linda <hr/> 6 Contributor address; City; State; Zip Code FREDERICKSBURG, TX 78624	7 Amount of Contribution (\$) \$101.20
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shelby Co. RW <hr/> Contributor address; City; State; Zip Code Center, TX 75935	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simmonds, Kelley <hr/> Contributor address; City; State; Zip Code san antonio, TX 78216	Amount of Contribution (\$) \$531.30
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Thomas <hr/> Contributor address; City; State; Zip Code Addison, TX 75001	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Candidate for Court of Criminal Appeals		Employer (See Instructions)
Date 02/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Southeast Texas Republican Women <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77705	Amount of Contribution (\$) \$253.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/27 Rpt: 26/48
2 FILER NAME Texas Federation of Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00054315
4 Date 01/29/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stogner, Sarah <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 79756	7 Amount of Contribution (\$) \$8,000.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions)
Date 02/03/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TX Cactus rose RW <hr/> Contributor address; City; State; Zip Code El Paso, TX 79911	Amount of Contribution (\$) \$770.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/07/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tarrant Star Republican Women <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76112	Amount of Contribution (\$) \$455.40
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tarrant Star Republican Women <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76112	Amount of Contribution (\$) \$126.50
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor Area Republican Women PAC <hr/> Contributor address; City; State; Zip Code Taylor, TX 76574	Amount of Contribution (\$) \$75.90
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/27 Rpt: 27/48
2 FILER NAME Texas Federation of Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00054315
4 Date 02/21/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Strong Republican Woman 6 Contributor address; City; State; Zip Code Argyle, TX 76226	7 Amount of Contribution (\$) \$25.30
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Strong Republican Women Contributor address; City; State; Zip Code Argyle, TX 76226	Amount of Contribution (\$) \$25.30
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/11/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Strong Republican Women Contributor address; City; State; Zip Code Argyle, TX 76226	Amount of Contribution (\$) \$50.60
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/04/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Tea Party Republican Women Contributor address; City; State; Zip Code Houston, TX 77095	Amount of Contribution (\$) \$126.50
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Tea Party Republican Women Contributor address; City; State; Zip Code Houston, TX 77095	Amount of Contribution (\$) \$101.20
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/27 Rpt: 28/48
2 FILER NAME Texas Federation of Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00054315
4 Date 02/03/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Top O Texas RW <hr/> 6 Contributor address; City; State; Zip Code Pampa, TX 79065	7 Amount of Contribution (\$) \$925.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Travis RW <hr/> Contributor address; City; State; Zip Code Austin, TX 78746-5620	Amount of Contribution (\$) \$320.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Val Verde County Republican Women <hr/> Contributor address; City; State; Zip Code Del Rio, TX 78840	Amount of Contribution (\$) \$683.10
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/04/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Val Verde County Republican Women <hr/> Contributor address; City; State; Zip Code Del Rio, TX 78840	Amount of Contribution (\$) \$20.20
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Village Republican Women, Houston TX <hr/> Contributor address; City; State; Zip Code Houston, TX 77024	Amount of Contribution (\$) \$480.70
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/27 Rpt: 29/48
2 FILER NAME Texas Federation of Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00054315
4 Date 01/31/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WCRW	7 Amount of Contribution (\$) \$303.60
6 Contributor address; City; State; Zip Code Floresville, TX 78114		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WCRW	Amount of Contribution (\$) \$101.20
Contributor address; City; State; Zip Code Floresville, TX 78114		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker County Republican Women	Amount of Contribution (\$) \$227.70
Contributor address; City; State; Zip Code Huntsville, TX 77340		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/11/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker County Republicq	Amount of Contribution (\$) \$328.90
Contributor address; City; State; Zip Code Huntsville, TX 77340		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waller County Republican Women, PAC	Amount of Contribution (\$) \$50.60
Contributor address; City; State; Zip Code Waller, TX 77484		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/27 Rpt: 30/48
2 FILER NAME Texas Federation of Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00054315
4 Date 02/17/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Washington County Republican Women <hr/> 6 Contributor address; City; State; Zip Code BRENHAM, TX 77833	7 Amount of Contribution (\$) \$177.10
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 31/48	
2 FILER NAME Texas Federation of Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00054315	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 01/27/2026	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLeary, Louri	8 Amount of contribution (\$) \$709.88	9 In-kind contribution description laptop
	7 Contributor address; City; State; Zip Code Austin, TX 78731	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) retired		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

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: 1/9 Rpt: 32/48	2 FILER NAME Texas Federation of Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00054315
4 Date 01/30/2026	5 Payee name American Airlines	
6 Amount (\$) \$459.20 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 4333 Amon Carter Blvd. Fort Worth, TX 76155	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense airline ticket
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/23/2026	Payee name Authorize.net	
Amount (\$) \$84.10 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 8999 San Francisco, CA 94128	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payment processing fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/03/2026	Payee name Authorize.net	
Amount (\$) \$80.20 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 8999 San Francisco, CA 94128	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payment processing 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 - | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/9 Rpt: 33/48	2 FILER NAME Texas Federation of Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00054315
4 Date 01/30/2026	5 Payee name Boldway, Jillian	
6 Amount (\$) \$565.64 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1219 Ace Trail New Braunfels, TX 78132	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wages
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2026	Payee name City of Austin Utilities	
Amount (\$) \$135.14 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 2267 Austin, TX 78783-2267	
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 Utilities
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/29/2026	Payee name Commerce Bank	
Amount (\$) \$7,953.14 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 414084 Kansas City, MO 64141-4084	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Payment
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
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: 3/9 Rpt: 34/48	2 FILER NAME Texas Federation of Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00054315
4 Date 01/23/2026	5 Payee name Merchant Bankcard	
6 Amount (\$) \$3,118.84 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 8500 Governors Hill Dr Symmes Township, OH 45249	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense payment processing fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/23/2026	Payee name Merchant Bankcard	
Amount (\$) \$253.75 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 8500 Governors Hill Dr Symmes Township, OH 45249	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense refund duplicate payment
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/05/2026	Payee name Merchant Bankcard	
Amount (\$) \$2,216.70 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 8500 Governors Hill Dr Symmes Township, OH 45249	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense payment processing 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
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: 4/9 Rpt: 35/48	2 FILER NAME Texas Federation of Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00054315
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4 Date 01/30/2026	5 Payee name National Federation of Republican Women
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6 Amount (\$) \$4,730.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 124 North Alfred St Alexandria, VA 22314
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8 PURPOSE OF EXPENDITURE	(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 Dues
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/30/2026	Payee name National Federation of Republican Women
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Amount (\$) \$1,220.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 124 North Alfred St Alexandria, VA 22314
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PURPOSE OF EXPENDITURE	(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 Dues
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/30/2026	Payee name National Federation of Republican Women
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Amount (\$) \$370.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 124 North Alfred St Alexandria, VA 22314
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense convention
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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: 5/9 Rpt: 36/48	2 FILER NAME Texas Federation of Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00054315
4 Date 01/30/2026	5 Payee name National Federation of Republican Women	
6 Amount (\$) \$5,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 124 North Alfred St Alexandria, VA 22314	
8 PURPOSE OF EXPENDITURE	(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 Dues
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/02/2026	Payee name National Federation of Republican Women	
Amount (\$) \$5,020.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 124 North Alfred St Alexandria, VA 22314	
PURPOSE OF EXPENDITURE	(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 Dues
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/09/2026	Payee name National Federation of Republican Women	
Amount (\$) \$5,710.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 124 North Alfred St Alexandria, VA 22314	
PURPOSE OF EXPENDITURE	(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 Dues
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
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: 6/9 Rpt: 37/48	2 FILER NAME Texas Federation of Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00054315
4 Date 02/11/2026	5 Payee name National Federation of Republican Women	
6 Amount (\$) \$5,095.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 124 North Alfred St Alexandria, VA 22314	
8 PURPOSE OF EXPENDITURE	(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 Dues
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/11/2026	Candidate/Officeholder name National Federation of Republican Women	
Amount (\$) \$920.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought 124 North Alfred St Alexandria, VA 22314	
PURPOSE OF EXPENDITURE	(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 Dues
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/17/2026	Candidate/Officeholder name National Federation of Republican Women	
Amount (\$) \$1,460.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought 124 North Alfred St Alexandria, VA 22314	
PURPOSE OF EXPENDITURE	(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 Dues
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/17/2026	Candidate/Officeholder name National Federation of Republican Women	
Amount (\$) \$1,460.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought 124 North Alfred St Alexandria, VA 22314	
PURPOSE OF EXPENDITURE	(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 Dues
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: 7/9 Rpt: 38/48	2 FILER NAME Texas Federation of Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00054315
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4 Date 02/17/2026	5 Payee name National Federation of Republican Women
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6 Amount (\$) \$420.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 124 North Alfred St Alexandria, VA 22314
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8 PURPOSE OF EXPENDITURE	(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 Dues
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/09/2026	Payee name National Federation of Republican Women
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Amount (\$) \$1,440.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 124 North Alfred St Alexandria, VA 22314
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PURPOSE OF EXPENDITURE	(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 Dues
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/30/2026	Payee name Neff, Cheryl
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Amount (\$) \$1,452.44 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 9500 Eagle Knoll Dr Austin, TX 78717
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wages
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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: 8/9 Rpt: 39/48	2	FILER NAME Texas Federation of Republican Women PAC	3	Filer ID (Ethics Commission Filers) 00054315
4	Date 01/30/2026	5	Payee name O'Leary, Louri		
6	Amount (\$) \$2,901.60 <input type="checkbox"/> Expenditure from corporate funds	7	Payee address; City; State; Zip Code 6001 Mountainclimb Dr Austin, TX 78731		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wages		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sought	Office held	
4	Date 01/23/2026	5	Payee name Sharp Business Systems		
6	Amount (\$) \$218.72 <input type="checkbox"/> Expenditure from corporate funds	7	Payee address; City; State; Zip Code PO Box 121238 Dallas, TX 75312-1238		
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 Equipment Rental		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sought	Office held	
4	Date 01/30/2026	5	Payee name United States Treasury		
6	Amount (\$) \$2,007.80 <input type="checkbox"/> Expenditure from corporate funds	7	Payee address; City; State; Zip Code PO Box 93200 Louisville, KY 40293-2000		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense payroll tax		
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 | 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 - | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/9 Rpt: 40/48	2 FILER NAME Texas Federation of Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00054315
4 Date 01/30/2026	5 Payee name Whatley, Erica	
6 Amount (\$) \$4,744.83 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1370 Scarboro Hills Ln Heath, TX 75087	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wages
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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 F4: Sch: 1/5 Rpt: 41/48		2 FILER NAME Texas Federation of Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00054315
4 CREDIT CARD ISSUER	Name of financial institution Commerce Bank		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$4,314.61	(b) Date of Charge 01/26/2026	(c) Date(s) Credit Card Issuer Paid	
7 PAYEE	(a) Payee name HILTON FORT WORTH		(b) Payee address; City, State, Zip Code 815 Main St Fort Worth, TX 76102	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel In District		(b) Description HILTON	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$8.85	(b) Date of Charge 01/26/2026	(c) Date(s) Credit Card Issuer Paid	
PAYEE	(a) Payee name USPS.COM CLICKNSHIP		(b) Payee address; City, State, Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description POSTAGE STAMPS	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$22.72	(b) Date of Charge 01/28/2026	(c) Date(s) Credit Card Issuer Paid	
PAYEE	(a) Payee name Office Depot		(b) Payee address; City, State, Zip Code 6600 North Military Trail Boca Raton, FL 33496	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description supplies	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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 F4: Sch: 2/5 Rpt: 42/48	2 FILER NAME Texas Federation of Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00054315
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$93.63	(b) Date of Charge 01/28/2026	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Office Depot		(b) Payee address; City, State, Zip Code 6600 North Military Trail Boca Raton, FL 33496
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description supplies
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$39.91	(b) Date of Charge 01/30/2026	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Shippo		(b) Payee address; City, State, Zip Code 2261 Market Street Suite 5603 San Francisco, CA 94114
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description BUSINESS SERVICES NOT ELSEWHERE CLASSIFIED
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$5.95	(b) Date of Charge 02/02/2026	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name WWW BCTROPHIES COM		(b) Payee address; City, State, Zip Code 9410 Anderson Mill Rd Austin, TX 78729
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description MISCELLANEOUS AND RETAIL STORES
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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 -	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Candidate/Officeholder/Political Committee	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 F4: Sch: 3/5 Rpt: 43/48	2 FILER NAME Texas Federation of Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00054315
4 CREDIT CARD ISSUER	Name of financial institution see previous	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$155.00	(b) Date of Charge 02/02/2026
7 PAYEE	(a) Payee name TMOBILE*AUTO PAY	(c) Date(s) Credit Card Issuer Paid
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description TELECOMMUNICATION SERV.INCLUD. LOCAL/L.DIST. CALLS,CR CARDCALLS
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$62.68	(b) Date of Charge 02/02/2026
PAYEE	(a) Payee name Google Workspace_tfrw.org	(c) Date(s) Credit Card Issuer Paid
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Payee address; City, State, Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$9.56	(b) Date of Charge 02/09/2026
PAYEE	(a) Payee name Shippo	(c) Date(s) Credit Card Issuer Paid
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Payee address; City, State, Zip Code 2261 Market Street Suite 5603 San Francisco, CA 94114
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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 F4: Sch: 4/5 Rpt: 44/48		2 FILER NAME Texas Federation of Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00054315	
4 CREDIT CARD ISSUER		Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$	
6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds		(a) Amount Charged \$110.58	(b) Date of Charge 02/10/2026	(c) Date(s) Credit Card Issuer Paid	
7 PAYEE		(a) Payee name Spectrum		(b) Payee address; City, State, Zip Code 12405 Powerscourt Drive St. Louis, MO 63131	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description CABLE, SATELLITE & OTHER PAY TV/RADIO SE	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	Office held
PAYMENT <input type="checkbox"/> Expenditure from corporate funds		(a) Amount Charged \$5.95	(b) Date of Charge 02/13/2026	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name WWW BCTROPHIES COM		(b) Payee address; City, State, Zip Code 9410 Anderson Mill Rd Austin, TX 78729	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description MISCELLANEOUS AND RETAIL STORES	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	Office held
PAYMENT <input type="checkbox"/> Expenditure from corporate funds		(a) Amount Charged \$19.71	(b) Date of Charge 02/16/2026	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Shippo		(b) Payee address; City, State, Zip Code 2261 Market Street Suite 5603 San Francisco, CA 94114	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description BUSINESS SERVICES NOT ELSEWHERE CLASSIFIED	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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
	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 F4: Sch: 5/5 Rpt: 45/48	2 FILER NAME Texas Federation of Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00054315
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$30.31	(b) Date of Charge 02/16/2026	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name INTUIT	(b) Payee address; City, State, Zip Code 7535 Torrey Santa Fe Road San Diego, CA 92129	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description COMPUTER SOFTWARE STORES
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

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: 1/2 Rpt: 46/48
2 FILER NAME Texas Federation of Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00054315
4 Date 01/29/2026	5 Name of person from whom amount is received Amazon.com <hr/> 6 Address of person from whom amount is received; City; State; Zip Code Seattle, WA 98109	8 Amount (\$) \$24.60
	7 Purpose for which amount is received book royalties <input type="checkbox"/> Check if political contribution returned to filer	
Date 01/26/2026	Name of person from whom amount is received Amazon.com <hr/> Address of person from whom amount is received; City; State; Zip Code Seattle, WA 98109	Amount (\$) \$46.78
	Purpose for which amount is received refund <input type="checkbox"/> Check if political contribution returned to filer	
Date 01/31/2026	Name of person from whom amount is received Frost Bank <hr/> Address of person from whom amount is received; City; State; Zip Code Austin, TX 78767	Amount (\$) \$4.74
	Purpose for which amount is received interest <input type="checkbox"/> Check if political contribution returned to filer	
Date 01/31/2026	Name of person from whom amount is received Frost Bank <hr/> Address of person from whom amount is received; City; State; Zip Code Austin, TX 78767	Amount (\$) \$142.40
	Purpose for which amount is received interest <input type="checkbox"/> Check if political contribution returned to filer	
Date 01/31/2026	Name of person from whom amount is received Plains Capital Bank <hr/> Address of person from whom amount is received; City; State; Zip Code Lubbock, TX 79408	Amount (\$) \$84.36
	Purpose for which amount is received interest <input type="checkbox"/> Check if political contribution returned to filer	

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: 2/2 Rpt: 47/48
2 FILER NAME Texas Federation of Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00054315
4 Date 01/23/2026	5 Name of person from whom amount is received USPS	8 Amount (\$) \$7.59
	6 Address of person from whom amount is received; City; State; Zip Code Washington, DC 20260-2200	
	7 Purpose for which amount is received refund	<input type="checkbox"/> Check if political contribution returned to filer

IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

The Instruction Guide explains how to complete this form.

1 Total pages Schedule T:
Sch: 1/1 Rpt: 48/48

2 FILER NAME
Texas Federation of Republican Women PAC

3 Filer ID (Ethics Commission Filers)
00054315

4 Name of Contributor / Corporation or Labor Organization / Pledgor /Payee
American Airlines

5 Contribution / Expenditure reported on:

Schedule A2 Schedule B Schedule B(J) Schedule C2 Schedule D Schedule F1
 Schedule F2 Schedule F4 Schedule G Schedule H Schedule COH-UC

6 Dates of Travel

7 Name of person(s) traveling

Tate, Jill

03/11/2026

8 Departure city or name of departure location

Dallas/Ft.Worth

03/15/2026

9 Destination city or name of destination location

Washington DC

10 Means of transportation
Commercial Airplane

11 Purpose of travel (including name of conference, seminar, or other event)
convention