



# MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC  
COVER SHEET PG 2

<b>12 COMMITTEE NAME</b> Red Stiletto Republican Women	<b>13 Filer ID</b> (Ethics Commission Filers) 00088607
---	---

<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

<b>15 CONTRIBUTION TOTALS</b>	<b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</b>	\$ 0.00
	<input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold	
	<b>2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)</b>	\$ 1,829.03
EXPENDITURE TOTALS	<b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>	\$ 0.00
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 391.87
CONTRIBUTION BALANCE	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 5,193.09
OUTSTANDING LOAN TOTALS	<b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 0.00

**16 AFFIDAVIT**

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Debra L. Schott  
\_\_\_\_\_  
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 - MPAC

<b>17</b> COMMITTEE NAME Red Stiletto Republican Women		<b>18</b> Filer ID (Ethics Commission Filers) 00088607
<b>19</b> SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 1,829.03
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 391.87
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/4 Rpt: 4/10
<b>2</b> FILER NAME Red Stiletto Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00088607
<b>4</b> Date 03/10/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) BROWN, GINA <hr/> <b>6</b> Contributor address; City; State; Zip Code  New Braunfels, TX 78130	<b>7</b> Amount of Contribution (\$)  \$60.62
<b>8</b> Principal occupation / Job title (See Instructions) RETIRED		<b>9</b> Employer (See Instructions)
Date 03/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) CHEVRIER, LINDA <hr/> Contributor address; City; State; Zip Code  New Braunfels, TX 78130	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Financial Services		Employer (See Instructions)
Date 02/26/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fishback, Maria <hr/> Contributor address; City; State; Zip Code  Cibolo, TX 78108	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Contracts Manager		Employer (See Instructions)
Date 03/19/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fisher, Chad <hr/> Contributor address; City; State; Zip Code  New Braunfels, TX 78130	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Construction		Employer (See Instructions)
Date 03/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) HIERL, NANCY <hr/> Contributor address; City; State; Zip Code  New Braunfels, TX 78132	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/4 Rpt: 5/10
<b>2</b> FILER NAME Red Stiletto Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00088607
<b>4</b> Date 03/10/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) HIERL, NANCY <hr/> <b>6</b> Contributor address; City; State; Zip Code  New Braunfels, TX 78132	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) SELF		<b>9</b> Employer (See Instructions)
Date 03/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hanna, Ingrid <hr/> Contributor address; City; State; Zip Code  Canyon Lake, TX 78133	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions)
Date 03/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harrell, Barbara <hr/> Contributor address; City; State; Zip Code  New Braunfels, TX 78130	Amount of Contribution (\$)  \$30.31
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/25/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lopez, Ana <hr/> Contributor address; City; State; Zip Code  Fresno, CA 93755	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Sales / Minister		Employer (See Instructions)
Date 03/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Moreno, Andrew <hr/> Contributor address; City; State; Zip Code  Helotes, TX 78023	Amount of Contribution (\$)  \$30.31
Principal occupation / Job title (See Instructions) Government Contractor		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/4 Rpt: 6/10
<b>2</b> FILER NAME Red Stiletto Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00088607
<b>4</b> Date 03/10/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Motz, Gina <hr/> <b>6</b> Contributor address; City; State; Zip Code  New Braunfels, TX 78130	<b>7</b> Amount of Contribution (\$)  \$60.62
<b>8</b> Principal occupation / Job title (See Instructions) Lawyer		<b>9</b> Employer (See Instructions)
Date 03/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ou, Amy <hr/> Contributor address; City; State; Zip Code  New Braunfels, TX 78130	Amount of Contribution (\$)  \$60.62
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pick, Teresa <hr/> Contributor address; City; State; Zip Code  Wimberley, TX 78676	Amount of Contribution (\$)  \$30.31
Principal occupation / Job title (See Instructions) District Director Representative Carrie Isaac		Employer (See Instructions)
Date 03/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) REEVES, VERA <hr/> Contributor address; City; State; Zip Code  New Braunfels, TX 78130	Amount of Contribution (\$)  \$60.62
Principal occupation / Job title (See Instructions) MORTGAGE		Employer (See Instructions)
Date 03/02/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rojas, Dahlia <hr/> Contributor address; City; State; Zip Code  Seguin, TX 78155	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Mary Kay Beauty Consultant; Nurse Coach		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/4 Rpt: 7/10
<b>2</b> FILER NAME Red Stiletto Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00088607
<b>4</b> Date 02/26/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sanchez, Esperanza <hr/> <b>6</b> Contributor address; City; State; Zip Code  Schertz, TX 78108	<b>7</b> Amount of Contribution (\$) \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Occupational Therapist/Mary Kay consultant		<b>9</b> Employer (See Instructions)
<b>Date</b> 03/10/2026	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) WILSON, WENDI <hr/> <b>Contributor address; City; State; Zip Code</b>  New Braunfels, TX 78132	<b>Amount of Contribution (\$)</b> \$60.62
<b>Principal occupation / Job title (See Instructions)</b> None		<b>Employer (See Instructions)</b>

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/3 Rpt: 8/10	<b>2</b> FILER NAME Red Stiletto Republican Women	<b>3</b> Filer ID (Ethics Commission Filers) 00088607
<b>4</b> Date 03/04/2026	<b>5</b> Payee name 8amAffiniPay	
<b>6</b> Amount (\$) \$26.54  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code Synovous Bank PO Box 120 Columbus, GA 31902	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense cc processing fees
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/19/2026	Payee name Academy	
Amount (\$) \$48.70  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2068 S Walnut  New Braunfels, TX 78130	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Supplies	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wagon for transporting equipment and supplies for meetings
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/06/2026	Payee name Coppell Republican Women	
Amount (\$) \$100.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 2151  Coppell, TX 75019	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Door Prizes
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.

<b>1</b> Total pages Schedule F1: Sch: 2/3 Rpt: 9/10	<b>2</b> FILER NAME Red Stiletto Republican Women	<b>3</b> Filer ID (Ethics Commission Filers) 00088607
<b>4</b> Date 03/18/2026	<b>5</b> Payee name FOREVER, Inc	
<b>6</b> Amount (\$) \$25.15  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code ONE PPG Place  Pittsburgh, PA 15222	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Supplies	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Business Cards for Board/Committee Chairs
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/22/2026	Payee name FOREVER, Inc	
Amount (\$) \$30.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code ONE PPG Place  Pittsburgh, PA 15222	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) office supplies	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense biz cards
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/04/2026	Payee name Hobby Lobby	
Amount (\$) \$19.44  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 360 Creekside Way  New Braunfels, TX 78130	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement made to Sarah Fouts for purchases she made at Hobby Lobby for gift basket door prizes
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.

<b>1</b> Total pages Schedule F1: Sch: 3/3 Rpt: 10/10	<b>2</b> FILER NAME Red Stiletto Republican Women	<b>3</b> Filer ID (Ethics Commission Filers) 00088607
--	--	--

<b>4</b> Date 03/25/2026	<b>5</b> Payee name WildApricot, Inc
-----------------------------	---

<b>6</b> Amount (\$) \$87.41  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 144 Front Street West Suite 725 Toronto Ontario M5J2L7 Canada
--	--

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) website	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership site
---------------------------------	--	---

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 03/20/2026	Payee name mms.com
--------------------	-----------------------

Amount (\$) \$54.63  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 110 Edison Place  Newark, NJ 07102
---	--

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies for guessing game - Crawfish Boil fundraiser event
-------------------------------	--	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

--	--