

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) 00066218	2 Total pages filed: 39
3 COMMITTEE NAME Baytown Municipal Police Association Political Action Committee		OFFICE USE ONLY	
		Date Received ELECTRONICALLY FILED 07/05/2023	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address		ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 3200 N. Main St. Baytown, TX 77521	
		Date Hand-delivered or Date Postmarked	
		Receipt #	Amount
		Date Processed	
		Date Imaged	
5 CAMPAIGN TREASURER NAME		MS / MRS / MR FIRST MI Mr. Bret W.	
		NICKNAME LAST SUFFIX Rasch	
6 CAMPAIGN TREASURER STREET ADDRESS <small>(Residence or Business)</small>		STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 3200 North Main Street Baytown, TX 77521	
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address		STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 3200 North Main Street Baytown, TX 77521	
8 CAMPAIGN TREASURER PHONE		AREA CODE PHONE NUMBER EXTENSION (832) 233-1343	
9 REPORT TYPE		<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff	
10 PERIOD COVERED		Month Day Year Month Day Year 01/01/2023 THROUGH 06/30/2023	
11 ELECTION		ELECTION DATE ELECTION TYPE Month Day Year <input 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 Baytown Municipal Police Association Political Action Committee	13 Filer ID (Ethics Commission Filers) 00066218
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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
		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)	\$ 0.00
	<input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold	
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 1,125.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 3,486.49
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.

Mr. Bret W. Rasch

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 Baytown Municipal Police Association Political Action Committee		18 Filer ID (Ethics Commission Filers) 00066218
19 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 1,125.00
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 type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 143.79
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/16 Rpt: 4/39
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 02/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BREEDING, CLAYTON	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code BAYTOWN, TX 77521	
8 Principal occupation / Job title (See Instructions) POLICE OFFICER		9 Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 02/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BREEDING, CLAYTON	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code BAYTOWN, TX 77521	
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 03/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BREEDING, CLAYTON	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code BAYTOWN, TX 77521	
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 04/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BREEDING, CLAYTON	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code BAYTOWN, TX 77521	
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 05/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BREEDING, CLAYTON	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Baytown , TX 77521	
Principal occupation / Job title (See Instructions) Patrol Officer		Employer (See Instructions) City of Baytown

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/16 Rpt: 5/39
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 06/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BREEDING, CLAYTON	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Baytown , TX 77521	
8 Principal occupation / Job title (See Instructions) Patrol Officer		9 Employer (See Instructions) City of Baytown
Date 02/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COX, JEREMY	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code BAYTOWN, TX 77521	
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 03/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COX, JEREMY	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code BAYTOWN, TX 77521	
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 04/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COX, JEREMY	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code BAYTOWN, TX 77521	
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 05/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COX, JEREMY	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Baytown , TX 77521	
Principal occupation / Job title (See Instructions) Patrol Officer		Employer (See Instructions) City of Baytown

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/16 Rpt: 6/39
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 06/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COX, JEREMY	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Baytown , TX 77521	
8 Principal occupation / Job title (See Instructions) Patrol Officer		9 Employer (See Instructions) City of Baytown
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROWELL, AARON	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Baytown , TX 77521	
Principal occupation / Job title (See Instructions) Patrol Officer		Employer (See Instructions) City of Baytown
Date 02/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNLAP, KEVIN	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code BAYTOWN, TX 77521	
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSTON, DAVID	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Baytown , TX 77521	
Principal occupation / Job title (See Instructions) Patrol Officer		Employer (See Instructions) City of Baytown
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLY, JASON	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code BAYTOWN, TX 77521	
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/16 Rpt: 7/39
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 02/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KINZIE, HUNTER	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code BAYTOWN, TX 77521		
8 Principal occupation / Job title (See Instructions) POLICE OFFICER		9 Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 03/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KINZIE, HUNTER	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code BAYTOWN, TX 77521		
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KINZIE, HUNTER	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code BAYTOWN, TX 77521		
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 05/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KINZIE, HUNTER	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Baytown , TX 77521		
Principal occupation / Job title (See Instructions) Patrol Officer		Employer (See Instructions) City of Baytown
Date 06/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KINZIE, HUNTER	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Baytown , TX 77521		
Principal occupation / Job title (See Instructions) Patrol Officer		Employer (See Instructions) City of Baytown

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/16 Rpt: 8/39
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 02/16/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIN, NICHOLAS	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code BAYTOWN, TX 77521	
8 Principal occupation / Job title (See Instructions) POLICE OFFICER		9 Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 03/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIN, NICHOLAS	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code BAYTOWN, TX 77521	
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 04/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIN, NICHOLAS	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code BAYTOWN, TX 77521	
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 05/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIN, NICHOLAS	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Baytown , TX 77521	
Principal occupation / Job title (See Instructions) Patrol Officer		Employer (See Instructions) City of Baytown
Date 06/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIN, NICHOLAS	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Baytown , TX 77521	
Principal occupation / Job title (See Instructions) Patrol Officer		Employer (See Instructions) City of Baytown

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/16 Rpt: 9/39
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 03/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOVELL, AUSTIN <hr/> 6 Contributor address; City; State; Zip Code BAYTOWN, TX 77521	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) POLICE OFFICER		9 Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 02/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, IVAN <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 03/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, IVAN <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 04/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, IVAN <hr/> Contributor address; City; State; Zip Code Baytown , TX 77521	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Patrol Officer		Employer (See Instructions) City of Baytown
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, IVAN <hr/> Contributor address; City; State; Zip Code Baytown , TX 77521	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Patrol Officer		Employer (See Instructions) City of Baytown

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/16 Rpt: 10/39
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 06/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, IVAN <hr/> 6 Contributor address; City; State; Zip Code Baytown , TX 77521	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Patrol Officer		9 Employer (See Instructions) City of Baytown
Date 02/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NELSON, WILLIAM <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 03/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NELSON, WILLIAM <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 04/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NELSON, WILLIAM <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 05/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NELSON, WILLIAM <hr/> Contributor address; City; State; Zip Code Baytown , TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Patrol Officer		Employer (See Instructions) City of Baytown

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/16 Rpt: 11/39
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 06/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NELSON, WILLIAM <hr/> 6 Contributor address; City; State; Zip Code Baytown , TX 77521	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Patrol Officer		9 Employer (See Instructions) City of Baytown
Date 02/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NGUYEN, LUAN <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 03/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NGUYEN, LUAN <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NGUYEN, LUAN <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 05/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NGUYEN, LUAN <hr/> Contributor address; City; State; Zip Code Baytown , TX 77521	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Patrol Officer		Employer (See Instructions) City of Baytown

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/16 Rpt: 12/39
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 06/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NGUYEN, LUAN <hr/> 6 Contributor address; City; State; Zip Code Baytown , TX 77521	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Patrol Officer		9 Employer (See Instructions) City of Baytown
Date 02/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PIGG, MARSHALL <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 03/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PIGG, MARSHALL <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 04/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PIGG, MARSHALL <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 05/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PIGG, MARSHALL <hr/> Contributor address; City; State; Zip Code Baytown , TX 77521	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Patrol Officer		Employer (See Instructions) City of Baytown

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/16 Rpt: 13/39
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 06/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PIGG, MARSHALL <hr/> 6 Contributor address; City; State; Zip Code Baytown , TX 77521	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Patrol Officer		9 Employer (See Instructions) City of Baytown
Date 02/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RASCH, BRET <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 03/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RASCH, BRET <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 04/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RASCH, BRET <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 05/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RASCH, BRET <hr/> Contributor address; City; State; Zip Code Baytown , TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Patrol Officer		Employer (See Instructions) City of Baytown

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/16 Rpt: 14/39
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 06/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RASCH, BRET <hr/> 6 Contributor address; City; State; Zip Code Baytown , TX 77521	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Patrol Officer		9 Employer (See Instructions) City of Baytown
Date 02/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALINAS, MORGAN <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 03/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALINAS, MORGAN <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 04/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALINAS, MORGAN <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 05/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALINAS, MORGAN <hr/> Contributor address; City; State; Zip Code Baytown , TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Patrol Officer		Employer (See Instructions) City of Baytown

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/16 Rpt: 15/39
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 06/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALINAS, MORGAN <hr/> 6 Contributor address; City; State; Zip Code Baytown , TX 77521	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Patrol Officer		9 Employer (See Instructions) City of Baytown
Date 02/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SILLS, SCOTT <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 03/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SILLS, SCOTT <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 04/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SILLS, SCOTT <hr/> Contributor address; City; State; Zip Code Baytown , TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Patrol Officer		Employer (See Instructions) City of Baytown
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SILLS, SCOTT <hr/> Contributor address; City; State; Zip Code Baytown , TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Patrol Officer		Employer (See Instructions) City of Baytown

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/16 Rpt: 16/39
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 06/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SILLS, SCOTT <hr/> 6 Contributor address; City; State; Zip Code Baytown , TX 77521	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Patrol Officer		9 Employer (See Instructions) City of Baytown
Date 02/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOTO, ADRIAN <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 03/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOTO, ADRIAN <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 04/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOTO, ADRIAN <hr/> Contributor address; City; State; Zip Code Baytown , TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Patrol Officer		Employer (See Instructions) City of Baytown
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOTO, ADRIAN <hr/> Contributor address; City; State; Zip Code Baytown , TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Patrol Officer		Employer (See Instructions) City of Baytown

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/16 Rpt: 17/39
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 06/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOTO, ADRIAN	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Baytown , TX 77521		
8 Principal occupation / Job title (See Instructions) Patrol Officer		9 Employer (See Instructions) City of Baytown
Date 02/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TANKSLEY, SHANE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code BAYTOWN, TX 77521		
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 03/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TANKSLEY, SHANE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code BAYTOWN, TX 77521		
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 04/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TANKSLEY, SHANE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code BAYTOWN, TX 77521		
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 03/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURPIN, JUSTIN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code BAYTOWN, TX 77521		
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/16 Rpt: 18/39
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 04/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURPIN, JUSTIN <hr/> 6 Contributor address; City; State; Zip Code BAYTOWN, TX 77521	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) POLICE OFFICER		9 Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 05/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURPIN, JUSTIN <hr/> Contributor address; City; State; Zip Code Baytown , TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Patrol Officer		Employer (See Instructions) City of Baytown
Date 06/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURPIN, JUSTIN <hr/> Contributor address; City; State; Zip Code Baytown , TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Patrol Officer		Employer (See Instructions) City of Baytown
Date 02/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATKINS, RONNIE <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 03/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATKINS, RONNIE <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/16 Rpt: 19/39
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 04/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATKINS, RONNIE <hr/> 6 Contributor address; City; State; Zip Code BAYTOWN, TX 77521	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) POLICE OFFICER		9 Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATKINS, RONNIE <hr/> Contributor address; City; State; Zip Code Baytown , TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Patrol Officer		Employer (See Instructions) City of Baytown
Date 06/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATKINS, RONNIE <hr/> Contributor address; City; State; Zip Code Baytown , TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Patrol Officer		Employer (See Instructions) City of Baytown

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 1/20 Rpt:	2 FILER NAME Baytown Municipal Police Association Political Action	3 Filer ID (Ethics Commission Filers) 00066218
4 Date 02/07/2023	5 Payee name ANEDOT	
6 Amount (\$) 1.10 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEE
Date 02/07/2023	Payee name ANEDOT	
Amount (\$) 0.70 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEE
Date 02/13/2023	Payee name ANEDOT	
Amount (\$) 0.70 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEE
Date 02/14/2023	Payee name ANEDOT	
Amount (\$) 0.70 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEE

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 2/20 Rpt:	2 FILER NAME Baytown Municipal Police Association Political Action	3 Filer ID (Ethics Commission Filers) 00066218
4 Date 02/14/2023	5 Payee name ANEDOT	
6 Amount (\$) 0.70 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEE
Date 02/14/2023	Payee name ANEDOT	
Amount (\$) 0.70 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEE
Date 02/14/2023	Payee name ANEDOT	
Amount (\$) 0.70 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEE
Date 02/14/2023	Payee name ANEDOT	
Amount (\$) 0.50 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEE

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 3/20 Rpt:	2 FILER NAME Baytown Municipal Police Association Political Action	3 Filer ID (Ethics Commission Filers) 00066218
4 Date 02/16/2023	5 Payee name ANEDOT	
6 Amount (\$) 1.10 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEE
Date 02/16/2023	Payee name ANEDOT	
Amount (\$) 0.70 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEE
Date 02/16/2023	Payee name ANEDOT	
Amount (\$) 0.70 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEE
Date 02/16/2023	Payee name ANEDOT	
Amount (\$) 1.10 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEE

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 4/20 Rpt:	2 FILER NAME Baytown Municipal Police Association Political Action	3 Filer ID (Ethics Commission Filers) 00066218
4 Date 02/16/2023	5 Payee name ANEDOT	
6 Amount (\$) 1.10 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEE
Date 02/18/2023	Payee name ANEDOT	
Amount (\$) 1.30 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES
Date 02/24/2023	Payee name ANEDOT	
Amount (\$) 1.30 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES
Date 02/24/2023	Payee name ANEDOT	
Amount (\$) 0.90 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 5/20 Rpt:	2 FILER NAME Baytown Municipal Police Association Political Action	3 Filer ID (Ethics Commission Filers) 00066218
4 Date 03/01/2023	5 Payee name ANEDOT	
6 Amount (\$) 0.70 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES
Date 03/03/2023	Payee name ANEDOT	
Amount (\$) 0.70 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES
Date 03/14/2023	Payee name ANEDOT	
Amount (\$) 0.70 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES
Date 03/14/2023	Payee name ANEDOT	
Amount (\$) 0.70 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 6/20 Rpt:	2 FILER NAME Baytown Municipal Police Association Political Action	3 Filer ID (Ethics Commission Filers) 00066218
4 Date 03/14/2023	5 Payee name ANEDOT	
6 Amount (\$) 0.70 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES
Date 03/14/2023	Payee name ANEDOT	
Amount (\$) 0.70 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES
Date 03/15/2023	Payee name ANEDOT	
Amount (\$) 0.50 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES
Date 03/16/2023	Payee name ANEDOT	
Amount (\$) 1.10 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 7/20 Rpt:	2 FILER NAME Baytown Municipal Police Association Political Action	3 Filer ID (Ethics Commission Filers) 00066218
4 Date 03/17/2023	5 Payee name ANEDOT	
6 Amount (\$) 0.70 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES
Date 03/18/2023	Payee name ANEDOT	
Amount (\$) 1.30 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES
Date 03/25/2023	Payee name ANEDOT	
Amount (\$) 1.30 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES
Date 03/25/2023	Payee name ANEDOT	
Amount (\$) 0.90 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 8/20 Rpt:	2 FILER NAME Baytown Municipal Police Association Political Action	3 Filer ID (Ethics Commission Filers) 00066218
4 Date 03/29/2023	5 Payee name ANEDOT	
6 Amount (\$) 0.70 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES
Date 03/30/2023	Payee name ANEDOT	
Amount (\$) 0.70 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES
Date 03/30/2023	Payee name ANEDOT	
Amount (\$) 0.70 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES
Date 03/31/2023	Payee name ANEDOT	
Amount (\$) 1.10 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 9/20 Rpt:	2 FILER NAME Baytown Municipal Police Association Political Action	3 Filer ID (Ethics Commission Filers) 00066218
4 Date 04/01/2023	5 Payee name ANEDOT	
6 Amount (\$) 0.70 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES
Date 04/07/2023	Payee name ANEDOT	
Amount (\$) 4.30 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES
Date 04/14/2023	Payee name ANEDOT	
Amount (\$) 0.70 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES
Date 04/14/2023	Payee name ANEDOT	
Amount (\$) 0.70 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 10/20 Rpt:		2 FILER NAME Baytown Municipal Police Association Political Action		3 Filer ID (Ethics Commission Filers) 00066218	
4 Date 04/14/2023		5 Payee name ANEDOT			
6 Amount (\$) 0.70 <input type="checkbox"/> Expenditure from corporate funds		7 Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112			
8 PURPOSE OF EXPENDITURE		(a) Category (See instructions for examples of acceptable categories) Fees		(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES	
Date 04/15/2023		Payee name ANEDOT			
Amount (\$) 0.50 <input type="checkbox"/> Expenditure from corporate funds		Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112			
PURPOSE OF EXPENDITURE		(a) Category (See instructions for examples of acceptable categories) Fees		(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES	
Date 04/15/2023		Payee name ANEDOT			
Amount (\$) 0.70 <input type="checkbox"/> Expenditure from corporate funds		Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112			
PURPOSE OF EXPENDITURE		(a) Category (See instructions for examples of acceptable categories) Fees		(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES	
Date 04/16/2023		Payee name ANEDOT			
Amount (\$) 1.10 <input type="checkbox"/> Expenditure from corporate funds		Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112			
PURPOSE OF EXPENDITURE		(a) Category (See instructions for examples of acceptable categories) Fees		(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES	

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 11/20 Rpt:	2 FILER NAME Baytown Municipal Police Association Political Action	3 Filer ID (Ethics Commission Filers) 00066218
4 Date 04/17/2023	5 Payee name ANEDOT	
6 Amount (\$) 0.70 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES
Date 04/18/2023	Payee name ANEDOT	
Amount (\$) 1.30 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES
Date 04/25/2023	Payee name ANEDOT	
Amount (\$) 0.90 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES
Date 04/25/2023	Payee name ANEDOT	
Amount (\$) 1.30 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 12/20 Rpt:	2 FILER NAME Baytown Municipal Police Association Political Action	3 Filer ID (Ethics Commission Filers) 00066218
4 Date 04/28/2023	5 Payee name ANEDOT	
6 Amount (\$) 0.70 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES
Date 04/30/2023	Payee name ANEDOT	
Amount (\$) 0.70 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES
Date 04/30/2023	Payee name ANEDOT	
Amount (\$) 0.70 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES
Date 04/30/2023	Payee name ANEDOT	
Amount (\$) 1.10 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 13/20 Rpt:		2 FILER NAME Baytown Municipal Police Association Political Action		3 Filer ID (Ethics Commission Filers) 00066218	
4 Date 05/01/2023		5 Payee name ANEDOT			
6 Amount (\$) 0.70 <input type="checkbox"/> Expenditure from corporate funds		7 Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112			
8 PURPOSE OF EXPENDITURE		(a) Category (See instructions for examples of acceptable categories) Fees		(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES	
Date 05/14/2023		Payee name ANEDOT			
Amount (\$) 0.70 <input type="checkbox"/> Expenditure from corporate funds		Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112			
PURPOSE OF EXPENDITURE		(a) Category (See instructions for examples of acceptable categories) Fees		(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES	
Date 05/14/2023		Payee name ANEDOT			
Amount (\$) 0.70 <input type="checkbox"/> Expenditure from corporate funds		Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112			
PURPOSE OF EXPENDITURE		(a) Category (See instructions for examples of acceptable categories) Fees		(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES	
Date 05/14/2023		Payee name ANEDOT			
Amount (\$) 0.70 <input type="checkbox"/> Expenditure from corporate funds		Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112			
PURPOSE OF EXPENDITURE		(a) Category (See instructions for examples of acceptable categories) Fees		(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES	

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 14/20 Rpt:	2 FILER NAME Baytown Municipal Police Association Political Action	3 Filer ID (Ethics Commission Filers) 00066218
4 Date 05/14/2023	5 Payee name ANEDOT	
6 Amount (\$) 0.70 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES
Date 05/15/2023	Payee name ANEDOT	
Amount (\$) 0.70 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES
Date 05/15/2023	Payee name ANEDOT	
Amount (\$) 0.50 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES
Date 05/16/2023	Payee name ANEDOT	
Amount (\$) 1.10 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 15/20 Rpt:	2 FILER NAME Baytown Municipal Police Association Political Action	3 Filer ID (Ethics Commission Filers) 00066218
4 Date 05/17/2023	5 Payee name ANEDOT	
6 Amount (\$) 0.70 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES
Date 05/25/2023	Payee name ANEDOT	
Amount (\$) 0.90 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES
Date 05/25/2023	Payee name ANEDOT	
Amount (\$) 1.30 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES
Date 05/30/2023	Payee name ANEDOT	
Amount (\$) 0.70 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 16/20 Rpt:		2 FILER NAME Baytown Municipal Police Association Political Action		3 Filer ID (Ethics Commission Filers) 00066218	
4 Date 05/30/2023		5 Payee name ANEDOT			
6 Amount (\$) 0.70 <input type="checkbox"/> Expenditure from corporate funds		7 Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112			
8 PURPOSE OF EXPENDITURE		(a) Category (See instructions for examples of acceptable categories) Fees		(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES	
Date 05/30/2023		Payee name ANEDOT			
Amount (\$) 1.10 <input type="checkbox"/> Expenditure from corporate funds		Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112			
PURPOSE OF EXPENDITURE		(a) Category (See instructions for examples of acceptable categories) Fees		(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES	
Date 06/01/2023		Payee name ANEDOT			
Amount (\$) 0.70 <input type="checkbox"/> Expenditure from corporate funds		Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112			
PURPOSE OF EXPENDITURE		(a) Category (See instructions for examples of acceptable categories) Fees		(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES	
Date 06/14/2023		Payee name ANEDOT			
Amount (\$) 0.70 <input type="checkbox"/> Expenditure from corporate funds		Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112			
PURPOSE OF EXPENDITURE		(a) Category (See instructions for examples of acceptable categories) Fees		(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES	

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 17/20 Rpt:		2 FILER NAME Baytown Municipal Police Association Political Action		3 Filer ID (Ethics Commission Filers) 00066218	
4 Date 06/14/2023		5 Payee name ANEDOT			
6 Amount (\$) 0.70 <input type="checkbox"/> Expenditure from corporate funds		7 Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112			
8 PURPOSE OF EXPENDITURE		(a) Category (See instructions for examples of acceptable categories) Fees		(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES	
Date 06/14/2023		Payee name ANEDOT			
Amount (\$) 0.70 <input type="checkbox"/> Expenditure from corporate funds		Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112			
PURPOSE OF EXPENDITURE		(a) Category (See instructions for examples of acceptable categories) Fees		(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES	
Date 06/14/2023		Payee name ANEDOT			
Amount (\$) 0.70 <input type="checkbox"/> Expenditure from corporate funds		Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112			
PURPOSE OF EXPENDITURE		(a) Category (See instructions for examples of acceptable categories) Fees		(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES	
Date 06/15/2023		Payee name ANEDOT			
Amount (\$) 0.70 <input type="checkbox"/> Expenditure from corporate funds		Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112			
PURPOSE OF EXPENDITURE		(a) Category (See instructions for examples of acceptable categories) Fees		(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES	

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 18/20 Rpt:	2 FILER NAME Baytown Municipal Police Association Political Action	3 Filer ID (Ethics Commission Filers) 00066218
4 Date 06/15/2023	5 Payee name ANEDOT	
6 Amount (\$) 0.50 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES
Date 06/16/2023	Payee name ANEDOT	
Amount (\$) 1.10 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES
Date 06/17/2023	Payee name ANEDOT	
Amount (\$) 0.70 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES
Date 06/25/2023	Payee name ANEDOT	
Amount (\$) 0.90 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 19/20 Rpt:	2 FILER NAME Baytown Municipal Police Association Political Action	3 Filer ID (Ethics Commission Filers) 00066218
4 Date 06/25/2023	5 Payee name ANEDOT	
6 Amount (\$) 1.30 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES
Date 06/28/2023	Payee name ANEDOT	
Amount (\$) 1.30 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES
Date 06/28/2023	Payee name ANEDOT	
Amount (\$) 0.70 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES
Date 06/30/2023	Payee name ANEDOT	
Amount (\$) 0.70 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 20/20 Rpt:	2 FILER NAME Baytown Municipal Police Association Political Action	3 Filer ID (Ethics Commission Filers) 00066218
4 Date 06/30/2023	5 Payee name ANEDOT	
6 Amount (\$) 0.70 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES
Date 06/30/2023	Payee name ANEDOT	
Amount (\$) 1.10 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PAYMENT PROCESSING FEES
Date 06/27/2023	Payee name Nara Thai	
Amount (\$) 75.39 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 4505 GARTH ROAD BAYTOWN, TX 77521	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.) PAID FOR DINNER WHILE DISCUSSING PUBLIC SAFETY ADVISORY COMMITTEE APPOINTMENT