

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Arlington Professional Firefighters Assn. PAC	13 Filer ID (Ethics Commission Filers) 00016561
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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.)	Jim Ross Arlington City Council- Position Mayor	

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)	\$ 17,230.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 55,585.63
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 93,869.62
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.

Kevin J. Leverette

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

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**
ADDENDUM

Page 3 of 229

12 COMMITTEE NAME Arlington Professional Firefighters Assn. PAC	13 Filer ID (Ethics Commission Filers) 00016561
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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.)	Nikki Hunter City of Arlington Council Member- Position Council district 3.	

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.)	Barbara Odem-Wesley City of Arlington Council Member- Position Council district 8 "At-Large"	

SUBTOTALS - GPAC

17 COMMITTEE NAME Arlington Professional Firefighters Assn. PAC		18 Filer ID (Ethics Commission Filers) 00016561
19 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 17,230.00
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 checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 55,585.63
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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/211 Rpt: 5/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Jason (Mr.)	7 Amount of Contribution (\$) \$6.00
6 Contributor address; City; State; Zip Code Arlington, TX 76013		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Jason (Mr.)	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code Arlington, TX 76013		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Jason (Mr.)	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code Arlington, TX 76013		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Jason (Mr.)	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code Arlington, TX 76013		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Dale (Mr.)	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Granbury, TX 76049		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/211 Rpt: 6/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Dale (Mr.)	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Granbury, TX 76049	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Dale (Mr.)	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Granbury, TX 76049	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Dale (Mr.)	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Granbury, TX 76049	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Korrey (Mr.)	Amount of Contribution (\$) \$14.00
	Contributor address; City; State; Zip Code Arlington, TX 76002	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Korrey (Mr.)	Amount of Contribution (\$) \$14.00
	Contributor address; City; State; Zip Code Arlington, TX 76002	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/211 Rpt: 7/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Korrey (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Arlington, TX 76002	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Korrey (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76002	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allison, Cody (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Azle, TX 76020	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allison, Cody (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Azle, TX 76020	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allison, Cody (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Azle, TX 76020	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/211 Rpt: 8/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allison, Cody (Mr.)	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Azle, TX 76020	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Joshua (Mr.)	Amount of Contribution (\$) \$9.00
	Contributor address; City; State; Zip Code Burleson, TX 76028	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Joshua (Mr.)	Amount of Contribution (\$) \$9.00
	Contributor address; City; State; Zip Code Burleson, TX 76028	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Joshua (Mr.)	Amount of Contribution (\$) \$9.00
	Contributor address; City; State; Zip Code Burleson, TX 76028	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Joshua (Mr.)	Amount of Contribution (\$) \$9.00
	Contributor address; City; State; Zip Code Burleson, TX 76028	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/211 Rpt: 9/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arrington, Johnny (Mr.)	7 Amount of Contribution (\$) \$16.00
6 Contributor address; City; State; Zip Code Talty, TX 75160		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arrington, Johnny (Mr.)	Amount of Contribution (\$) \$16.00
Contributor address; City; State; Zip Code Talty, TX 75160		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arrington, Johnny (Mr.)	Amount of Contribution (\$) \$16.00
Contributor address; City; State; Zip Code Talty, TX 75160		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arrington, Johnny (Mr.)	Amount of Contribution (\$) \$16.00
Contributor address; City; State; Zip Code Talty, TX 75160		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayerdis, Ariel (Mr.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Arlington, TX 76002		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/211 Rpt: 10/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayerdis, Ariel (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Arlington, TX 76002	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayerdis, Ariel (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76002	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayerdis, Ariel (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76002	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baeder, Garrett (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Forney, TX 75126	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baeder, Garrett (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Forney, TX 75126	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/211 Rpt: 11/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baeder, Garrett (Mr.)	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Forney, TX 75126	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baeder, Garrett (Mr.)	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Forney, TX 75126	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ball, Michael (Mr.)	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Rockwall, TX 75087	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ball, Michael (Mr.)	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Rockwall, TX 75087	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ball, Michael (Mr.)	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Rockwall, TX 75087	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/211 Rpt: 12/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ball, Michael (Mr.)	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Rockwall, TX 75087	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Balmer, Chad (Mr.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Saginaw, TX 76179	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Balmer, Chad (Mr.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Saginaw, TX 76179	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Balmer, Chad (Mr.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Saginaw, TX 76179	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Balmer, Chad (Mr.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Saginaw, TX 76179	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/211 Rpt: 13/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Banz, Christopher (Mr.)	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code Waxahachie, TX 75167		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Banz, Christopher (Mr.)	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Waxahachie, TX 75167		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Banz, Christopher (Mr.)	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Waxahachie, TX 75167		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Banz, Christopher (Mr.)	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Waxahachie, TX 75167		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barber, Bryan (Mr.)	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Perrin, TX 76486		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/211 Rpt: 14/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barber, Bryan (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Perrin, TX 76486	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barber, Bryan (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Perrin, TX 76486	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barber, Bryan (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Perrin, TX 76486	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bauman, Clint (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Fort Worth, TX 76244	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bauman, Clint (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Fort Worth, TX 76244	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/211 Rpt: 15/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bauman, Clint (Mr.)	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code Fort Worth, TX 76244		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bauman, Clint (Mr.)	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Fort Worth, TX 76244		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benitez, Javier (Mr.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Arlington, TX 76013		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benitez, Javier (Mr.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Arlington, TX 76013		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benitez, Javier (Mr.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Arlington, TX 76013		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/211 Rpt: 16/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benitez, Javier (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Arlington, TX 76013	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benton, Blake (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Plano, TX 75024	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benton, Blake (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Plano, TX 75024	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benton, Blake (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Plano, TX 75024	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benton, Blake (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Plano, TX 75024	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/211 Rpt: 17/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berber, Frank (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Haslet, TX 76052	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berber, Frank (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Haslet, TX 76052	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berber, Frank (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Haslet, TX 76052	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berber, Frank (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Haslet, TX 76052	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berumen, Felipe (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76010	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/211 Rpt: 18/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berumen, Felipe (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Arlington, TX 76010	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berumen, Felipe (Mr.) <hr/> Contributor address; City; State; Zip Code Arlington, TX 76010	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berumen, Felipe (Mr.) <hr/> Contributor address; City; State; Zip Code Arlington, TX 76010	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blair, Patrick (Mr.) <hr/> Contributor address; City; State; Zip Code Arlington, TX 76016	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blair, Patrick (Mr.) <hr/> Contributor address; City; State; Zip Code Arlington, TX 76016	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/211 Rpt: 19/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blair, Patrick (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Arlington, TX 76016	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blair, Patrick (Mr.) <hr/> Contributor address; City; State; Zip Code Arlington, TX 76016	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blake, Garrett (Mr.) <hr/> Contributor address; City; State; Zip Code Burleson, TX 76028	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blake, Garrett (Mr.) <hr/> Contributor address; City; State; Zip Code Burleson, TX 76028	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blake, Garrett (Mr.) <hr/> Contributor address; City; State; Zip Code Burleson, TX 76028	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/211 Rpt: 20/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blake, Garrett (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Burleson, TX 76028	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Borski, Josh (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Glen Rose, TX 76043	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Borski, Josh (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Glen Rose, TX 76043	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Borski, Josh (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Glen Rose, TX 76043	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Borski, Josh (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Glen Rose, TX 76043	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/211 Rpt: 21/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyle, Craig (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Burleson, TX 76028	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyle, Craig (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Burleson, TX 76028	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyle, Craig (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Burleson, TX 76028	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyle, Craig (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Burleson, TX 76028	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brinegar, Samuel (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76016	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/211 Rpt: 22/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brinegar, Samuel (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Arlington, TX 76016	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brinegar, Samuel (Mr.) <hr/> Contributor address; City; State; Zip Code Arlington, TX 76016	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brinegar, Samuel (Mr.) <hr/> Contributor address; City; State; Zip Code Arlington, TX 76016	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooks, Troy (Mr.) <hr/> Contributor address; City; State; Zip Code HURST, TX 76053	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooks, Troy (Mr.) <hr/> Contributor address; City; State; Zip Code HURST, TX 76053	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/211 Rpt: 23/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooks, Troy (Mr.)	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code HURST, TX 76053		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooks, Troy (Mr.)	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code HURST, TX 76053		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooks, Wyatt (Mr.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Euless, TX 76039		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooks, Wyatt (Mr.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Euless, TX 76039		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooks, Wyatt (Mr.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Euless, TX 76039		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/211 Rpt: 24/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooks, Wyatt (Mr.)	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Euless, TX 76039		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Dylan (Mr.)	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Arlington, TX 76002		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Dylan (Mr.)	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Arlington, TX 76002		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Dylan (Mr.)	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Arlington, TX 76002		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Dylan (Mr.)	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Arlington, TX 76002		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/211 Rpt: 25/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buchanan, Stephen (Mr.)	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code Waxahachie, TX 75165		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buchanan, Stephen (Mr.)	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Waxahachie, TX 75165		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buchanan, Stephen (Mr.)	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Waxahachie, TX 75165		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buchanan, Stephen (Mr.)	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Waxahachie, TX 75165		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burgdorf, Luke (Mr.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Joshua, TX 76058		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/211 Rpt: 26/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burgdorf, Luke (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Joshua, TX 76058	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burgdorf, Luke (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Joshua, TX 76058	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burgdorf, Luke (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Joshua, TX 76058	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burt, Riley (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Irving, TX 75063	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burt, Riley (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Irving, TX 75063	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/211 Rpt: 27/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burt, Riley (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Irving, TX 75063	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burt, Riley (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Irving, TX 75063	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burton, Kevin (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Stephenville, TX 76401	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burton, Kevin (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Stephenville, TX 76401	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burton, Kevin (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Stephenville, TX 76401	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/211 Rpt: 28/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burton, Kevin (Mr.)	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code Stephenville, TX 76401		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caballero, Caleb (Mr.)	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Arlington, TX 76001		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caballero, Caleb (Mr.)	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Arlington, TX 76001		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caballero, Caleb (Mr.)	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Arlington, TX 76001		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caballero, Caleb (Mr.)	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Arlington, TX 76001		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/211 Rpt: 29/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Joshua (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Roanoke, TX 76262	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Joshua (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Roanoke, TX 76262	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Joshua (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Roanoke, TX 76262	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Joshua (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Roanoke, TX 76262	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carpenter, Bobby (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Springtown, TX 76082	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/211 Rpt: 30/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carpenter, Bobby (Mr.)	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Springtown, TX 76082		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carpenter, Bobby (Mr.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Springtown, TX 76082		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carpenter, Bobby (Mr.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Springtown, TX 76082		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carrillo, Jonathan (Mr.)	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Foirt Worth, TX 76110		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carrillo, Jonathan (Mr.)	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Foirt Worth, TX 76110		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/211 Rpt: 31/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carrillo, Jonathan (Mr.)	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Foirt Worth, TX 76110		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carrillo, Jonathan (Mr.)	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Foirt Worth, TX 76110		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carrillo, Manuel (Mr.)	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code Arlington, TX 76016		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carrillo, Manuel (Mr.)	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code Arlington, TX 76016		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carrillo, Manuel (Mr.)	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code Arlington, TX 76016		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/211 Rpt: 32/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carrillo, Manuel (Mr.)	7 Amount of Contribution (\$) \$6.00
6 Contributor address; City; State; Zip Code Arlington, TX 76016		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casburn, Tyler (Mr.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Arlington, TX 76017		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casburn, Tyler (Mr.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Arlington, TX 76017		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casburn, Tyler (Mr.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Arlington, TX 76017		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casburn, Tyler (Mr.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Arlington, TX 76017		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/211 Rpt: 33/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castle, Shawn (Mr.)	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Denton, TX 76210		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castle, Shawn (Mr.)	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Denton, TX 76210		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castle, Shawn (Mr.)	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Denton, TX 76210		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castle, Shawn (Mr.)	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Denton, TX 76210		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cepeda, Sergio (Mr.)	Amount of Contribution (\$) \$14.00
Contributor address; City; State; Zip Code Burleson, TX 76028		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/211 Rpt: 34/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cepeda, Sergio (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Burleson, TX 76028	7 Amount of Contribution (\$) \$14.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cepeda, Sergio (Mr.) <hr/> Contributor address; City; State; Zip Code Burleson, TX 76028	Amount of Contribution (\$) \$14.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cepeda, Sergio (Mr.) <hr/> Contributor address; City; State; Zip Code Burleson, TX 76028	Amount of Contribution (\$) \$14.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chinchilla, Eric (Mr.) <hr/> Contributor address; City; State; Zip Code Alvarado, TX 76009	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chinchilla, Eric (Mr.) <hr/> Contributor address; City; State; Zip Code Alvarado, TX 76009	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/211 Rpt: 35/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chinchilla, Eric (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Alvarado, TX 76009	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chinchilla, Eric (Mr.) <hr/> Contributor address; City; State; Zip Code Alvarado, TX 76009	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Commons, Sean (Mr.) <hr/> Contributor address; City; State; Zip Code Weatherford, TX 76087	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Commons, Sean (Mr.) <hr/> Contributor address; City; State; Zip Code Weatherford, TX 76087	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Commons, Sean (Mr.) <hr/> Contributor address; City; State; Zip Code Weatherford, TX 76087	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/211 Rpt: 36/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Commons, Sean (Mr.)	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Weatherford, TX 76087		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coomes, Grant (Mr.)	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ARLINGTON, TX 76001		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coomes, Grant (Mr.)	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ARLINGTON, TX 76001		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coomes, Grant (Mr.)	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ARLINGTON, TX 76001		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coomes, Grant (Mr.)	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ARLINGTON, TX 76001		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/211 Rpt: 37/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corder, Shawn (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Scurry, TX 75158	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corder, Shawn (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Scurry, TX 75158	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corder, Shawn (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Scurry, TX 75158	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corder, Shawn (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Scurry, TX 75158	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corley, Kevin (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76012	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/211 Rpt: 38/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corley, Kevin (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Arlington, TX 76012	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corley, Kevin (Mr.) <hr/> Contributor address; City; State; Zip Code Arlington, TX 76012	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corley, Kevin (Mr.) <hr/> Contributor address; City; State; Zip Code Arlington, TX 76012	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cornelius, Jacob (Mr.) <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76131	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cornelius, Jacob (Mr.) <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76131	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/211 Rpt: 39/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cornelius, Jacob (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Fort Worth, TX 76131	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cornelius, Jacob (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Fort Worth, TX 76131	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coulston, Shane (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Cleburne, TX 76033	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coulston, Shane (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Cleburne, TX 76033	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coulston, Shane (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Cleburne, TX 76033	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/211 Rpt: 40/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coulston, Shane (Mr.)	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Cleburne, TX 76033		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cramer, Alex (Mr.)	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Arlington, TX 76017		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cramer, Alex (Mr.)	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Arlington, TX 76017		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cramer, Alex (Mr.)	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Arlington, TX 76017		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cramer, Alex (Mr.)	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Arlington, TX 76017		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/211 Rpt: 41/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cruz, Juan (Mr.)	7 Amount of Contribution (\$) \$26.00
	6 Contributor address; City; State; Zip Code Arlington, TX 76013	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cruz, Juan (Mr.)	Amount of Contribution (\$) \$26.00
	Contributor address; City; State; Zip Code Arlington, TX 76013	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cruz, Juan (Mr.)	Amount of Contribution (\$) \$26.00
	Contributor address; City; State; Zip Code Arlington, TX 76013	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cruz, Juan (Mr.)	Amount of Contribution (\$) \$26.00
	Contributor address; City; State; Zip Code Arlington, TX 76013	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniel, Reece (Mr.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Springtown, TX 76082	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/211 Rpt: 42/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniel, Reece (Mr.)	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Springtown, TX 76082		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniel, Reece (Mr.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Springtown, TX 76082		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniel, Reece (Mr.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Springtown, TX 76082		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeSkeere, Jordan (Mr.)	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Dallas, TX 75201		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeSkeere, Jordan (Mr.)	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Dallas, TX 75201		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/211 Rpt: 43/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeSkeere, Jordan (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75201	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeSkeere, Jordan (Mr.) <hr/> Contributor address; City; State; Zip Code Dallas, TX 75201	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dellasega, Austin (Mr.) <hr/> Contributor address; City; State; Zip Code Arlington, TX 76013	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dellasega, Austin (Mr.) <hr/> Contributor address; City; State; Zip Code Arlington, TX 76013	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dellasega, Austin (Mr.) <hr/> Contributor address; City; State; Zip Code Arlington, TX 76013	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/211 Rpt: 44/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dellasega, Austin (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Arlington, TX 76013	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dickey, Colton (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76016	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dickey, Colton (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76016	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dickey, Colton (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76016	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dickey, Colton (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76016	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/211 Rpt: 45/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Durand, Jeff (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Willow Park, TX 76087	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Durand, Jeff (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Willow Park, TX 76087	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Durand, Jeff (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Willow Park, TX 76087	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Durand, Jeff (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Willow Park, TX 76087	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Easter, Brad (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76016	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/211 Rpt: 46/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Easter, Brad (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Arlington, TX 76016	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Easter, Brad (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76016	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Easter, Brad (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76016	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eaves, Robert (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Decatur, TX 76234	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eaves, Robert (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Decatur, TX 76234	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/211 Rpt: 47/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eaves, Robert (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Decatur, TX 76234	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eaves, Robert (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Decatur, TX 76234	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eck, Stephen (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code fort worth, TX 76179	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eck, Stephen (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code fort worth, TX 76179	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eck, Stephen (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code fort worth, TX 76179	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 44/211 Rpt: 48/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eck, Stephen (Mr.) <hr/> 6 Contributor address; City; State; Zip Code fort worth, TX 76179	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) English, Alex (Mr.) <hr/> Contributor address; City; State; Zip Code Waxahachie, TX 75165	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) English, Alex (Mr.) <hr/> Contributor address; City; State; Zip Code Waxahachie, TX 75165	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) English, Alex (Mr.) <hr/> Contributor address; City; State; Zip Code Waxahachie, TX 75165	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) English, Alex (Mr.) <hr/> Contributor address; City; State; Zip Code Waxahachie, TX 75165	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 45/211 Rpt: 49/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Epple, Cameron (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76132	7 Amount of Contribution (\$) \$8.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Epple, Cameron (Mr.) <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76132	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Epple, Cameron (Mr.) <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76132	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Epple, Cameron (Mr.) <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76132	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eschbach, Austin (Mr.) <hr/> Contributor address; City; State; Zip Code Cleburne, TX 76031	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 46/211 Rpt: 50/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eschbach, Austin (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Cleburne, TX 76031	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eschbach, Austin (Mr.) <hr/> Contributor address; City; State; Zip Code Cleburne, TX 76031	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eschbach, Austin (Mr.) <hr/> Contributor address; City; State; Zip Code Cleburne, TX 76031	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, James (Mr.) <hr/> Contributor address; City; State; Zip Code Arlington, TX 76016	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, James (Mr.) <hr/> Contributor address; City; State; Zip Code Arlington, TX 76016	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 47/211 Rpt: 51/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, James (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Arlington, TX 76016	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, James (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76016	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farrar, John (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Corinth, TX 76201	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farrar, John (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Corinth, TX 76201	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farrar, John (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Corinth, TX 76201	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 48/211 Rpt: 52/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farrar, John (Mr.)	7 Amount of Contribution (\$) \$15.00
	6 Contributor address; City; State; Zip Code Corinth, TX 76201	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fegan, Richard (Mr.)	Amount of Contribution (\$) \$6.00
	Contributor address; City; State; Zip Code Arlington, TX 76017	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fegan, Richard (Mr.)	Amount of Contribution (\$) \$6.00
	Contributor address; City; State; Zip Code Arlington, TX 76017	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fegan, Richard (Mr.)	Amount of Contribution (\$) \$6.00
	Contributor address; City; State; Zip Code Arlington, TX 76017	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fegan, Richard (Mr.)	Amount of Contribution (\$) \$6.00
	Contributor address; City; State; Zip Code Arlington, TX 76017	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 49/211 Rpt: 53/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferreira, Dustin (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Keller, TX 76244	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferreira, Dustin (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Keller, TX 76244	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferreira, Dustin (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Keller, TX 76244	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferreira, Dustin (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Keller, TX 76244	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fetzer, Grant (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Cleburne, TX 76031	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 50/211 Rpt: 54/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fetzer, Grant (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Cleburne, TX 76031	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fetzer, Grant (Mr.) <hr/> Contributor address; City; State; Zip Code Cleburne, TX 76031	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fetzer, Grant (Mr.) <hr/> Contributor address; City; State; Zip Code Cleburne, TX 76031	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flaherty, Michael (Mr.) <hr/> Contributor address; City; State; Zip Code Grand Prairie, TX 75052	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flaherty, Michael (Mr.) <hr/> Contributor address; City; State; Zip Code Grand Prairie, TX 75052	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 51/211 Rpt: 55/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flaherty, Michael (Mr.)	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Grand Prairie, TX 75052		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flaherty, Michael (Mr.)	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Grand Prairie, TX 75052		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flores, Xavier (Mr.)	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code F Worth, TX 76052		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flores, Xavier (Mr.)	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Ft Worth,, TX 76052		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flores, Xavier (Mr.)	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Ft Worth,, TX 76052		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 52/211 Rpt: 56/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flores, Xavier (Mr.)	7 Amount of Contribution (\$) \$15.00
	6 Contributor address; City; State; Zip Code Ft Worth,, TX 76052	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank, Robert (Mr.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76017	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank, Robert (Mr.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76017	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank, Robert (Mr.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76017	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank, Robert (Mr.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76017	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 53/211 Rpt: 57/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Franklin, Tyler (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Arlington, TX 76001	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Franklin, Tyler (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76001	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Franklin, Tyler (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76001	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Franklin, Tyler (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76001	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freeman, Edgar (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Desoto, TX 75115	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 54/211 Rpt: 58/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freeman, Edgar (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Desoto, TX 75115	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freeman, Edgar (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Desoto, TX 75115	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freeman, Edgar (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Desoto, TX 75115	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frey, Brandon (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76016	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frey, Brandon (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76016	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 55/211 Rpt: 59/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frey, Brandon (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Arlington, TX 76016	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frey, Brandon (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76016	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friend, Bryan (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Maypearl, TX 76064	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friend, Bryan (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Maypearl, TX 76064	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friend, Bryan (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Maypearl, TX 76064	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 56/211 Rpt: 60/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friend, Bryan (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Maypearl, TX 76064	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Brandon (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Grapevine, TX 76051	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Brandon (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Grapevine, TX 76051	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Brandon (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Grapevine, TX 76051	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Brandon (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Grapevine, TX 76051	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 57/211 Rpt: 61/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fussner, James (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Cleburne, TX 76033	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fussner, James (Mr.) <hr/> Contributor address; City; State; Zip Code Cleburne, TX 76033	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fussner, James (Mr.) <hr/> Contributor address; City; State; Zip Code Cleburne, TX 76033	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fussner, James (Mr.) <hr/> Contributor address; City; State; Zip Code Cleburne, TX 76033	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaddie, Peter (Mr.) <hr/> Contributor address; City; State; Zip Code Mansfield, TX 76063	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 58/211 Rpt: 62/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaddie, Peter (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Mansfield, TX 76063	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaddie, Peter (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Mansfield, TX 76063	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaddie, Peter (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Mansfield, TX 76063	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Rudy (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Azle, TX 76020	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Rudy (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Azle, TX 76020	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 59/211 Rpt: 63/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Rudy (Mr.)	7 Amount of Contribution (\$) \$6.00
6 Contributor address; City; State; Zip Code Azle, TX 76020		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Rudy (Mr.)	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code Azle, TX 76020		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gates, Nikolaus (Mr.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Rhome, TX 76078		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gates, Nikolaus (Mr.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Rhome, TX 76078		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gates, Nikolaus (Mr.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Rhome, TX 76078		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 60/211 Rpt: 64/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gates, Nikolaus (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Rhome, TX 76078	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gay, Barton (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Ft. Worth, TX 76179	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gay, Barton (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Ft. Worth, TX 76179	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gay, Barton (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Ft. Worth, TX 76179	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gay, Barton (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Ft. Worth, TX 76179	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 61/211 Rpt: 65/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gittings, Todd (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Fort Worth, TX 76041	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gittings, Todd (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Fort Worth, TX 76041	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gittings, Todd (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Fort Worth, TX 76041	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gittings, Todd (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Fort Worth, TX 76041	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Golden, Justin (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Grapevine, TX 76051	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 62/211 Rpt: 66/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Golden, Justin (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Grapevine, TX 76051	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Golden, Justin (Mr.) <hr/> Contributor address; City; State; Zip Code Grapevine, TX 76051	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Golden, Justin (Mr.) <hr/> Contributor address; City; State; Zip Code Grapevine, TX 76051	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gomez, Roberto (Mr.) <hr/> Contributor address; City; State; Zip Code Arlington, TX 76018	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gomez, Roberto (Mr.) <hr/> Contributor address; City; State; Zip Code Arlington, TX 76018	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 63/211 Rpt: 67/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gomez, Roberto (Mr.)	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Arlington, TX 76018		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gomez, Roberto (Mr.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Arlington, TX 76018		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Fernando (Mr.)	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Dallas, TX 75211		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Fernando (Mr.)	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Dallas, TX 75211		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Fernando (Mr.)	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Dallas, TX 75211		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 64/211 Rpt: 68/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Fernando (Mr.)	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75211	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gosselin, Kevin (Mr.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Shady Shores, TX 76208	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gosselin, Kevin (Mr.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Shady Shores, TX 76208	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gosselin, Kevin (Mr.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Shady Shores, TX 76208	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gosselin, Kevin (Mr.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Shady Shores, TX 76208	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 65/211 Rpt: 69/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grace, Graham (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76110	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grace, Graham (Mr.) <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76110	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grace, Graham (Mr.) <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76110	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grace, Graham (Mr.) <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76110	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graham, Shawn (Mr.) <hr/> Contributor address; City; State; Zip Code Weatherford, TX 76086	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 66/211 Rpt: 70/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graham, Shawn (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Weatherford, TX 76086	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graham, Shawn (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Weatherford, TX 76086	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graham, Shawn (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Weatherford, TX 76086	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gray, Eric (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code arlington, TX 76012	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gray, Eric (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code arlington, TX 76012	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 67/211 Rpt: 71/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gray, Eric (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code arlington, TX 76012	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gray, Eric (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code arlington, TX 76012	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gromacki, Chris (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Ennis, TX 75119	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gromacki, Chris (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Ennis, TX 75119	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gromacki, Chris (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Ennis, TX 75119	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 68/211 Rpt: 72/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gromacki, Chris (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Ennis, TX 75119	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grossman, Joe (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Burleson, TX 76028	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grossman, Joe (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Burleson, TX 76028	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grossman, Joe (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Burleson, TX 76028	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grossman, Joe (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Burleson, TX 76028	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 69/211 Rpt: 73/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guia, Luis (Mr.)	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Arlington, TX 76010	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guia, Luis (Mr.)	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Arlington, TX 76010	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guia, Luis (Mr.)	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Arlington, TX 76010	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guia, Luis (Mr.)	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Arlington, TX 76010	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gurrola, Nickolas (Mr.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76244	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 70/211 Rpt: 74/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gurrola, Nickolas (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76244	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gurrola, Nickolas (Mr.) <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76244	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gurrola, Nickolas (Mr.) <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76244	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hadley, Brady (Mr.) <hr/> Contributor address; City; State; Zip Code Dallas, TX 75287	Amount of Contribution (\$) \$16.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hadley, Brady (Mr.) <hr/> Contributor address; City; State; Zip Code Dallas, TX 75287	Amount of Contribution (\$) \$16.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 71/211 Rpt: 75/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hadley, Brady (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Dallas, TX 75287	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hadley, Brady (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Dallas, TX 75287	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Cade (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Mansfield, TX 76063	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Cade (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Mansfield, TX 76063	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Cade (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Mansfield, TX 76063	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 72/211 Rpt: 76/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Cade (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Mansfield, TX 76063	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Casy (Mr.) <hr/> Contributor address; City; State; Zip Code Kennedale, TX 76060	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Casy (Mr.) <hr/> Contributor address; City; State; Zip Code Kennedale, TX 76060	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Casy (Mr.) <hr/> Contributor address; City; State; Zip Code Kennedale, TX 76060	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Casy (Mr.) <hr/> Contributor address; City; State; Zip Code Kennedale, TX 76060	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 73/211 Rpt: 77/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hansen, Drew (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Arlington, TX 76012	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hansen, Drew (Mr.) <hr/> Contributor address; City; State; Zip Code Arlington, TX 76012	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hansen, Drew (Mr.) <hr/> Contributor address; City; State; Zip Code Arlington, TX 76012	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hansen, Drew (Mr.) <hr/> Contributor address; City; State; Zip Code Arlington, TX 76012	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Andrew (Mr.) <hr/> Contributor address; City; State; Zip Code Weatherford, TX 76088	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 74/211 Rpt: 78/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Andrew (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Weatherford, TX 76088	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Andrew (Mr.) <hr/> Contributor address; City; State; Zip Code Weatherford, TX 76088	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Andrew (Mr.) <hr/> Contributor address; City; State; Zip Code Weatherford, TX 76088	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartz, Mikle (Mr.) <hr/> Contributor address; City; State; Zip Code Cleburne, TX 76033	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartz, Mikle (Mr.) <hr/> Contributor address; City; State; Zip Code Cleburne, TX 76033	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 75/211 Rpt: 79/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartz, Mikle (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Cleburne, TX 76033	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartz, Mikle (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Cleburne, TX 76033	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hauglie, Anton (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Dallas, TX 75252	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hauglie, Anton (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Dallas, TX 75252	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hauglie, Anton (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Dallas, TX 75252	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 76/211 Rpt: 80/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hauglie, Anton (Mr.)	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75252	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hawk, Carter (Mr.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Flower Mound, TX 75022	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hawk, Carter (Mr.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Flower Mound, TX 75022	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hawk, Carter (Mr.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Flower Mound, TX 75022	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hawk, Carter (Mr.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Flower Mound, TX 75022	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 77/211 Rpt: 81/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henken, Darren (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Burleson, TX 76028	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henken, Darren (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Burleson, TX 76028	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henken, Darren (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Burleson, TX 76028	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henken, Darren (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Burleson, TX 76028	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herrera, Juan (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Burleson, TX 76028	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 78/211 Rpt: 82/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herrera, Juan (Mr.)	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Burleson, TX 76028		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herrera, Juan (Mr.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Burleson, TX 76028		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herrera, Juan (Mr.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Burleson, TX 76028		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hettinger, Jordan (Mr.)	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Arlington, TX 76006		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hettinger, Jordan (Mr.)	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Arlington, TX 76006		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 79/211 Rpt: 83/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hettinger, Jordan (Mr.)	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Arlington, TX 76006	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hettinger, Jordan (Mr.)	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Arlington, TX 76006	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hickey, Laura (Mr.)	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Arlington, TX 76017	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hickey, Laura (Mr.)	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Arlington, TX 76017	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hickey, Laura (Mr.)	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Arlington, TX 76017	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 80/211 Rpt: 84/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hickey, Laura (Mr.)	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Arlington, TX 76017		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Cody (Mr.)	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code KENNEDALE, TX 76060		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Cody (Mr.)	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code KENNEDALE, TX 76060		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Cody (Mr.)	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code KENNEDALE, TX 76060		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Cody (Mr.)	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code KENNEDALE, TX 76060		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 81/211 Rpt: 85/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Dylan (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Arlington, TX 76018	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Dylan (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76018	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Dylan (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76018	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Dylan (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76018	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Johnny (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Fort Worth, TX 76133	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 82/211 Rpt: 86/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Johnny (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Fort Worth, TX 76133	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Johnny (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Fort Worth, TX 76133	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Johnny (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Fort Worth, TX 76133	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hodges, Caleb (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Fort Worth, TX 76179	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hodges, Caleb (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Fort Worth, TX 76179	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 83/211 Rpt: 87/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hodges, Caleb (Mr.)	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Fort Worth, TX 76179		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hodges, Caleb (Mr.)	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Fort Worth, TX 76179		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hofstrom, Scott (Mr.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Trophy Club, TX 76262		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hofstrom, Scott (Mr.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Trophy Club, TX 76262		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hofstrom, Scott (Mr.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Trophy Club, TX 76262		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 84/211 Rpt: 88/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hofstrom, Scott (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Trophy Club, TX 76262	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hogg, Dylan (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Waxahachie, TX 75167	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hogg, Dylan (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Waxahachie, TX 75167	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hogg, Dylan (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Waxahachie, TX 75167	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hogg, Dylan (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Waxahachie, TX 75167	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 85/211 Rpt: 89/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holland, Chris (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Keller, TX 76248	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holland, Chris (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Keller, TX 76248	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holland, Chris (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Keller, TX 76248	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holland, Chris (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Keller, TX 76248	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Honea, Chad (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code AZLE, TX 76020	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 86/211 Rpt: 90/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Honea, Chad (Mr.) <hr/> 6 Contributor address; City; State; Zip Code AZLE, TX 76020	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Honea, Chad (Mr.) <hr/> Contributor address; City; State; Zip Code AZLE, TX 76020	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Honea, Chad (Mr.) <hr/> Contributor address; City; State; Zip Code AZLE, TX 76020	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hood, Wade (Mr.) <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76107	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hood, Wade (Mr.) <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76107	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 87/211 Rpt: 91/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hood, Wade (Mr.)	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code FORT WORTH, TX 76107		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hood, Wade (Mr.)	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76107		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horne, Jason (Mr.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Arlington, TX 76012		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horne, Jason (Mr.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Arlington, TX 76012		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horne, Jason (Mr.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Arlington, TX 76012		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 88/211 Rpt: 92/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horne, Jason (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Arlington, TX 76012	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horowitz, Preston (Mr.) <hr/> Contributor address; City; State; Zip Code Whitesboro, TX 76273	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horowitz, Preston (Mr.) <hr/> Contributor address; City; State; Zip Code Whitesboro, TX 76273	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horowitz, Preston (Mr.) <hr/> Contributor address; City; State; Zip Code Whitesboro, TX 76273	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horowitz, Preston (Mr.) <hr/> Contributor address; City; State; Zip Code Whitesboro, TX 76273	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 89/211 Rpt: 93/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Humphreys, David (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Arlington, TX 76001	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Humphreys, David (Mr.) <hr/> Contributor address; City; State; Zip Code Arlington, TX 76001	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Humphreys, David (Mr.) <hr/> Contributor address; City; State; Zip Code Arlington, TX 76001	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Humphreys, David (Mr.) <hr/> Contributor address; City; State; Zip Code Arlington, TX 76001	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huynh, Steven (Mr.) <hr/> Contributor address; City; State; Zip Code Grand Prairie, TX 75054	Amount of Contribution (\$) \$14.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 90/211 Rpt: 94/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huynh, Steven (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Grand Prairie, TX 75054	7 Amount of Contribution (\$) \$14.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huynh, Steven (Mr.) <hr/> Contributor address; City; State; Zip Code Grand Prairie, TX 75054	Amount of Contribution (\$) \$14.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huynh, Steven (Mr.) <hr/> Contributor address; City; State; Zip Code Grand Prairie, TX 75054	Amount of Contribution (\$) \$14.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ivie, Chris (Mr.) <hr/> Contributor address; City; State; Zip Code Arlington, TX 76013	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ivie, Chris (Mr.) <hr/> Contributor address; City; State; Zip Code Arlington, TX 76013	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 91/211 Rpt: 95/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ivie, Chris (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Arlington, TX 76013	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ivie, Chris (Mr.) <hr/> Contributor address; City; State; Zip Code Arlington, TX 76013	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Paul (Mr.) <hr/> Contributor address; City; State; Zip Code Arlington, TX 76013	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Paul (Mr.) <hr/> Contributor address; City; State; Zip Code Arlington, TX 76013	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Paul (Mr.) <hr/> Contributor address; City; State; Zip Code Arlington, TX 76013	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 92/211 Rpt: 96/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Paul (Mr.)	7 Amount of Contribution (\$) \$1.00
6 Contributor address; City; State; Zip Code Arlington, TX 76013		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jenkins, Victor (Mr.)	Amount of Contribution (\$) \$14.00
Contributor address; City; State; Zip Code Burleson, TX 76028		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jenkins, Victor (Mr.)	Amount of Contribution (\$) \$14.00
Contributor address; City; State; Zip Code Burleson, TX 76028		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jenkins, Victor (Mr.)	Amount of Contribution (\$) \$14.00
Contributor address; City; State; Zip Code Burleson, TX 76028		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jenkins, Victor (Mr.)	Amount of Contribution (\$) \$14.00
Contributor address; City; State; Zip Code Burleson, TX 76028		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 93/211 Rpt: 97/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jennings, Evan (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Burleson, TX 76028	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jennings, Evan (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Burleson, TX 76028	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jennings, Evan (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Burleson, TX 76028	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jennings, Evan (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Burleson, TX 76028	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Jerry (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code FORT WORTH, TX 76179	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 94/211 Rpt: 98/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Jerry (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code FORT WORTH, TX 76179	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Jerry (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code FORT WORTH, TX 76179	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Jerry (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code FORT WORTH, TX 76179	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Kristina (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Pantego, TX 76013	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Kristina (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Pantego, TX 76013	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 95/211 Rpt: 99/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Kristina (Mr.)	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Pantego, TX 76013		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Kristina (Mr.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Pantego, TX 76013		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joiner, Mike (Mr.)	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Aledo, TX 76008		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joiner, Mike (Mr.)	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Aledo, TX 76008		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joiner, Mike (Mr.)	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Aledo, TX 76008		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 96/211 Rpt: 100/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joiner, Mike (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Aledo, TX 76008	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Joshua (Mr.) <hr/> Contributor address; City; State; Zip Code Crowley, TX 76036-1373	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Joshua (Mr.) <hr/> Contributor address; City; State; Zip Code Crowley, TX 76036-1373	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Joshua (Mr.) <hr/> Contributor address; City; State; Zip Code Crowley, TX 76036-1373	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Joshua (Mr.) <hr/> Contributor address; City; State; Zip Code Crowley, TX 76036-1373	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 97/211 Rpt: 101/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joseph, Brad (Mr.)	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code Fort Worth, TX 76102		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joseph, Brad (Mr.)	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Fort Worth, TX 76102		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joseph, Brad (Mr.)	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Fort Worth, TX 76102		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joseph, Brad (Mr.)	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Fort Worth, TX 76102		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kazen, Sam (Mr.)	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Haslet, TX 76052		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 98/211 Rpt: 102/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kazen, Sam (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Haslet, TX 76052	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kazen, Sam (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Haslet, TX 76052	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kazen, Sam (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Haslet, TX 76052	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keck, Kaden (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Nocona, TX 76255	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keck, Kaden (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Nocona, TX 76255	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 99/211 Rpt: 103/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keck, Kaden (Mr.)	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Nocona, TX 76255		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keck, Kaden (Mr.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Nocona, TX 76255		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keeler, Jody (Mr.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Newark, TX 76071		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keeler, Jody (Mr.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Newark, TX 76071		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keeler, Jody (Mr.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Newark, TX 76071		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 100/211 Rpt: 104/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keeler, Jody (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Newark, TX 76071	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, Ethan (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Scurry, TX 75158	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, Ethan (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Scurry, TX 75158	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, Ethan (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Scurry, TX 75158	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, Ethan (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Scurry, TX 75158	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 101/211 Rpt: 105/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kembel, Grayson (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code The Colony, TX 75056	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kembel, Grayson (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code The Colony, TX 75056	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kembel, Grayson (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code The Colony, TX 75056	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kembel, Grayson (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code The Colony, TX 75056	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kendel, Erik (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Fort Worth, TX 76137	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 102/211 Rpt: 106/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kendel, Erik (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Fort Worth, TX 76137	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kendel, Erik (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Fort Worth, TX 76137	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kendel, Erik (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Fort Worth, TX 76137	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Bruce (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code ARLINGTON, TX 76003	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Bruce (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code ARLINGTON, TX 76003	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 103/211 Rpt: 107/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Bruce (Mr.) <hr/> 6 Contributor address; City; State; Zip Code ARLINGTON, TX 76003	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Bruce (Mr.) <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76003	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Konicki, Austin (Mr.) <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76131	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Konicki, Austin (Mr.) <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76131	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Konicki, Austin (Mr.) <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76131	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 104/211 Rpt: 108/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Konicki, Austin (Mr.)	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Fort Worth, TX 76131		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kornegay, Robert (Mr.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Burleson, TX 76028		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kornegay, Robert (Mr.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Burleson, TX 76028		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kornegay, Robert (Mr.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Burleson, TX 76028		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kornegay, Robert (Mr.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Burleson, TX 76028		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 105/211 Rpt: 109/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lambert, Tanner (Mr.)	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code Burleson, TX 76028		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lambert, Tanner (Mr.)	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Burleson, TX 76028		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lambert, Tanner (Mr.)	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Burleson, TX 76028		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lambert, Tanner (Mr.)	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Burleson, TX 76028		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lance, Collin (Mr.)	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Midlothian, TX 76065		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 106/211 Rpt: 110/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lance, Collin (Mr.)	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Midlothian, TX 76065		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lance, Collin (Mr.)	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Midlothian, TX 76065		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lance, Collin (Mr.)	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Midlothian, TX 76065		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Land, Kelcey (Mr.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Colleyville, TX 76034		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Land, Kelcey (Mr.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Colleyville, TX 76034		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 107/211 Rpt: 111/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Land, Kelcey (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Colleyville, TX 76034	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Land, Kelcey (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Colleyville, TX 76034	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landers, Davon (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Weatherford, TX 76087	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landers, Davon (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Weatherford, TX 76087	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landers, Davon (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Weatherford, TX 76087	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 108/211 Rpt: 112/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landers, Davon (Ms.)	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Weatherford, TX 76087		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larison, Casey (Mr.)	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code Weatherford, TX 76086		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larison, Casey (Mr.)	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code Weatherford, TX 76086		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larison, Casey (Mr.)	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code Weatherford, TX 76086		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larison, Casey (Mr.)	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code Weatherford, TX 76086		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 109/211 Rpt: 113/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lavender, Landon (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Arlington, TX 76012	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lavender, Landon (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76012	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lavender, Landon (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76012	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lavender, Landon (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76012	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leverette, Kevin (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Eustace, TX 75124	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 110/211 Rpt: 114/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leverette, Kevin (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Eustace, TX 75124	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leverette, Kevin (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Eustace, TX 75124	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leverette, Kevin (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Eustace, TX 75124	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Livingston, Hunter (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Fort Worth, TX 76108	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Livingston, Hunter (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Fort Worth, TX 76108	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 111/211 Rpt: 115/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Livingston, Hunter (Mr.)	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Fort Worth, TX 76108		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Livingston, Hunter (Mr.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Fort Worth, TX 76108		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lockwood, Brandon (Mr.)	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Burleson, TX 76028		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lockwood, Brandon (Mr.)	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Burleson, TX 76028		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lockwood, Brandon (Mr.)	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Burleson, TX 76028		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 112/211 Rpt: 116/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lockwood, Brandon (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Burleson, TX 76028	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loya, Samuel (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Fort Worth, TX 76108	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loya, Samuel (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Fort Worth, TX 76108	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loya, Samuel (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Fort Worth, TX 76108	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loya, Samuel (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Fort Worth, TX 76108	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 113/211 Rpt: 117/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Macias, Chris (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Highland Village, TX 75077	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Macias, Chris (Mr.) <hr/> Contributor address; City; State; Zip Code Highland Village, TX 75077	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Macias, Chris (Mr.) <hr/> Contributor address; City; State; Zip Code Highland Village, TX 75077	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Macias, Chris (Mr.) <hr/> Contributor address; City; State; Zip Code Highland Village, TX 75077	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manning, Samuel (Mr.) <hr/> Contributor address; City; State; Zip Code Alvarado, TX 76009	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 114/211 Rpt: 118/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manning, Samuel (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Alvarado, TX 76009	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manning, Samuel (Mr.) <hr/> Contributor address; City; State; Zip Code Alvarado, TX 76009	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manning, Samuel (Mr.) <hr/> Contributor address; City; State; Zip Code Alvarado, TX 76009	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Markham, Joseph (Mr.) <hr/> Contributor address; City; State; Zip Code keller, TX 76248	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Markham, Joseph (Mr.) <hr/> Contributor address; City; State; Zip Code keller, TX 76248	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 115/211 Rpt: 119/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Markham, Joseph (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code keller, TX 76248	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Markham, Joseph (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code keller, TX 76248	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Edwin (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Weatherford, TX 76086	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Edwin (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Weatherford, TX 76086	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Edwin (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Weatherford, TX 76086	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 116/211 Rpt: 120/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Edwin (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Weatherford, TX 76086	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Eric (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Burleson, TX 76028	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Eric (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Burleson, TX 76028	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Eric (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Burleson, TX 76028	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Eric (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Burleson, TX 76028	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 117/211 Rpt: 121/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Lee (Mr.)	7 Amount of Contribution (\$) \$6.00
6 Contributor address; City; State; Zip Code Mansfield, TX 76063		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Lee (Mr.)	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code Mansfield, TX 76063		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Lee (Mr.)	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code Mansfield, TX 76063		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Lee (Mr.)	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code Mansfield, TX 76063		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Pete (Mr.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Hurst, TX 76053		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 118/211 Rpt: 122/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Pete (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Hurst, TX 76053	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Pete (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Hurst, TX 76053	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mask, Eric (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Mansfield, TX 76063	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mask, Eric (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Mansfield, TX 76063	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mask, Eric (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Mansfield, TX 76063	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 119/211 Rpt: 123/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mask, Eric (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Mansfield, TX 76063	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mason, Erik (Mr.) <hr/> Contributor address; City; State; Zip Code Grand Prairie, TX 75052	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mason, Erik (Mr.) <hr/> Contributor address; City; State; Zip Code Grand Prairie, TX 75052	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mason, Erik (Mr.) <hr/> Contributor address; City; State; Zip Code Grand Prairie, TX 75052	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mason, Erik (Mr.) <hr/> Contributor address; City; State; Zip Code Grand Prairie, TX 75052	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 120/211 Rpt: 124/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mata, Juan (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Fort Worth, TX 76177	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mata, Juan (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Fort Worth, TX 76177	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mata, Juan (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Fort Worth, TX 76177	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mata, Juan (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Fort Worth, TX 76177	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonough, Joseph (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Crowley, TX 76036	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 121/211 Rpt: 125/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonough, Joseph (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Crowley, TX 76036	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonough, Joseph (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Crowley, TX 76036	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonough, Joseph (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Crowley, TX 76036	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meiners, Travis (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76017	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meiners, Travis (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76017	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 122/211 Rpt: 126/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meiners, Travis (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Arlington, TX 76017	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meiners, Travis (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76017	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melendez, Pedro (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Kennedale, TX 76060	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melendez, Pedro (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Kennedale, TX 76060	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melendez, Pedro (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Kennedale, TX 76060	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 123/211 Rpt: 127/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melendez, Pedro (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Kennedale, TX 76060	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mercer, Nicholas (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Argyle, TX 76226	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mercer, Nicholas (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Argyle, TX 76226	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mercer, Nicholas (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Argyle, TX 76226	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mercer, Nicholas (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Argyle, TX 76226	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 124/211 Rpt: 128/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Bradley (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Crandall, TX 75114	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Bradley (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Crandall, TX 75114	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Bradley (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Crandall, TX 75114	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Bradley (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Crandall, TX 75114	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Jonathan (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Midlothian, TX, TX 76065	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 125/211 Rpt: 129/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Jonathan (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Midlothian, TX, TX 76065	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Jonathan (Mr.) <hr/> Contributor address; City; State; Zip Code Midlothian, TX, TX 76065	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Jonathan (Mr.) <hr/> Contributor address; City; State; Zip Code Midlothian, TX, TX 76065	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Ty (Mr.) <hr/> Contributor address; City; State; Zip Code Richardson, TX 75082	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Ty (Mr.) <hr/> Contributor address; City; State; Zip Code Richardson, TX 75082	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 126/211 Rpt: 130/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Ty (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Richardson, TX 75082	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Ty (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Richardson, TX 75082	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minder, Mike (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Fort Worth, TX 76179	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minder, Mike (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Fort Worth, TX 76179	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minder, Mike (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Fort Worth, TX 76179	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 127/211 Rpt: 131/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minder, Mike (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Fort Worth, TX 76179	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minyard, Layn (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Saginaw, TX 76179	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minyard, Layn (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Saginaw, TX 76179	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minyard, Layn (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Saginaw, TX 76179	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minyard, Layn (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Saginaw, TX 76179	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 128/211 Rpt: 132/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montague, Edward (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Fort Worth, TX 76132	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montague, Edward (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Fort Worth, TX 76132	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montague, Edward (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Fort Worth, TX 76132	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montague, Edward (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Fort Worth, TX 76132	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Victor (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Denton, TX 76209	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 129/211 Rpt: 133/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Victor (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Denton, TX 76209	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Victor (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Denton, TX 76209	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Victor (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Denton, TX 76209	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morales, Keven (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Plano, TX 75074	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morales, Keven (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Plano, TX 75074	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 130/211 Rpt: 134/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morales, Keven (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Plano, TX 75074	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morales, Keven (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Plano, TX 75074	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moreno, Jose (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Dr, TX 76227	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moreno, Jose (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Dr, TX 76227	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moreno, Jose (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Dr, TX 76227	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 131/211 Rpt: 135/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moreno, Jose (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Dr, TX 76227	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morton, William (Mr.) <hr/> Contributor address; City; State; Zip Code Forth Worth, TX 76179	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morton, William (Mr.) <hr/> Contributor address; City; State; Zip Code Forth Worth, TX 76179	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morton, William (Mr.) <hr/> Contributor address; City; State; Zip Code Forth Worth, TX 76179	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morton, William (Mr.) <hr/> Contributor address; City; State; Zip Code Forth Worth, TX 76179	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 132/211 Rpt: 136/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mosqueda, Salvador (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Burleson, TX 76028	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mosqueda, Salvador (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Burleson, TX 76028	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mosqueda, Salvador (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Burleson, TX 76028	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mosqueda, Salvador (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Burleson, TX 76028	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mullins, James (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76017	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 133/211 Rpt: 137/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mullins, James (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Arlington, TX 76017	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mullins, James (Mr.) <hr/> Contributor address; City; State; Zip Code Arlington, TX 76017	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mullins, James (Mr.) <hr/> Contributor address; City; State; Zip Code Arlington, TX 76017	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nash, Barney (Mr.) <hr/> Contributor address; City; State; Zip Code Burleson, TX 76028	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nash, Barney (Mr.) <hr/> Contributor address; City; State; Zip Code Burleson, TX 76028	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 134/211 Rpt: 138/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nash, Barney (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Burleson, TX 76028	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nash, Barney (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Burleson, TX 76028	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neylon, Andy (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code flower mound, TX 75022	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nguyen, Minh (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76002	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nguyen, Minh (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76002	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 135/211 Rpt: 139/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nguyen, Minh (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Arlington, TX 76002	7 Amount of Contribution (\$) \$9.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nguyen, Minh (Mr.) <hr/> Contributor address; City; State; Zip Code Arlington, TX 76002	Amount of Contribution (\$) \$9.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nichols, Michael (Mr.) <hr/> Contributor address; City; State; Zip Code Grandview, TX 76050	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nichols, Michael (Mr.) <hr/> Contributor address; City; State; Zip Code Grandview, TX 76050	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nichols, Michael (Mr.) <hr/> Contributor address; City; State; Zip Code Grandview, TX 76050	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 136/211 Rpt: 140/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nichols, Michael (Mr.)	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code Grandview, TX 76050		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nicolas, Christian (Mr.)	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Arlington Tx, TX 76001		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nicolas, Christian (Mr.)	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Arlington Tx, TX 76001		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nicolas, Christian (Mr.)	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Arlington Tx, TX 76001		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nicolas, Christian (Mr.)	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Arlington Tx, TX 76001		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 137/211 Rpt: 141/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neill, Derek (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Arlington, TX 76015	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neill, Derek (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76015	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neill, Derek (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76015	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neill, Derek (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76015	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ogletree, Ben (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Grand Prairie, TX 75052	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 138/211 Rpt: 142/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ogletree, Ben (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Grand Prairie, TX 75052	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ogletree, Ben (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Grand Prairie, TX 75052	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ogletree, Ben (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Grand Prairie, TX 75052	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oliver, David (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Walnut Springs, TX 76690	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oliver, David (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Walnut Springs, TX 76690	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 139/211 Rpt: 143/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oliver, David (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Walnut Springs, TX 76690	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oliver, David (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Walnut Springs, TX 76690	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Osicka, Adam (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Burleson, TX 76028	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Osicka, Adam (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Burleson, TX 76028	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Osicka, Adam (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Burleson, TX 76028	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 140/211 Rpt: 144/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Osicka, Adam (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Burleson, TX 76028	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oviedo, Carlos (Mr.)	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Arlington, TX 76012	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oviedo, Carlos (Mr.)	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Arlington, Tx, TX 76012	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oviedo, Carlos (Mr.)	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Arlington, Tx, TX 76012	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oviedo, Carlos (Mr.)	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Arlington, Tx, TX 76012	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 141/211 Rpt: 145/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Owens, Brock (Mr.)	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Midlothian, TX 76065		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Owens, Brock (Mr.)	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Midlothian, TX 76065		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Owens, Brock (Mr.)	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Midlothian, TX 76065		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Owens, Brock (Mr.)	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Midlothian, TX 76065		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Padron, Ricardo (Mr.)	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Frisco, TX 75036		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 142/211 Rpt: 146/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Padron, Ricardo (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Frisco, TX 75036	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Padron, Ricardo (Mr.) <hr/> Contributor address; City; State; Zip Code Frisco, TX 75036	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Padron, Ricardo (Mr.) <hr/> Contributor address; City; State; Zip Code Frisco, TX 75036	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paine, Adam (Mr.) <hr/> Contributor address; City; State; Zip Code Arlington, TX 76017	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paine, Adam (Mr.) <hr/> Contributor address; City; State; Zip Code Arlington, TX 76017	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 143/211 Rpt: 147/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paine, Adam (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Arlington, TX 76017	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paine, Adam (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76017	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parnell, Jacob (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Burleson, TX 76028	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parnell, Jacob (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Burleson, TX 76028	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parnell, Jacob (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Burleson, TX 76028	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 144/211 Rpt: 148/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parnell, Jacob (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Burleson, TX 76028	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patten, Jonathan (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Springtown, TX 76082	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patten, Jonathan (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Springtown, TX 76082	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patten, Jonathan (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Springtown, TX 76082	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patten, Jonathan (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Springtown, TX 76082	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 145/211 Rpt: 149/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paz, Saul (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Springtown, TX 76082	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paz, Saul (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Springtown, TX 76082	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paz, Saul (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Springtown, TX 76082	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paz, Saul (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Springtown, TX 76082	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Emmanuel (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Dallas, TX 75246	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 146/211 Rpt: 150/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Emmanuel (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Dallas, TX 75246	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Emmanuel (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Dallas, TX 75246	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Emmanuel (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Dallas, TX 75246	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pittmon, Kevin (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Lewisville, TX 75067	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pittmon, Kevin (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Lewisville, TX 75067	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 147/211 Rpt: 151/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pittmon, Kevin (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Lewisville, TX 75067	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pittmon, Kevin (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Lewisville, TX 75067	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Platt, Jason (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Cleburne, Tx, TX 76031	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Platt, Jason (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Cleburne, Tx, TX 76031	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Platt, Jason (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Cleburne, Tx, TX 76031	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 148/211 Rpt: 152/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Platt, Jason (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Cleburne, Tx, TX 76031	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pool, Cameron (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Grandview, TX 76050	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pool, Cameron (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Grandview, TX 76050	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pool, Cameron (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Grandview, TX 76050	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pool, Cameron (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Grandview, TX 76050	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 149/211 Rpt: 153/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pool, Nathan (Mr.)	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Weatherford, TX 76087	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pool, Nathan (Mr.)	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Weatherford, TX 76087	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pool, Nathan (Mr.)	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Weatherford, TX 76087	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pool, Nathan (Mr.)	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Weatherford, TX 76087	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powell, Brad (Mr.)	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Forney, TX 75126	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 150/211 Rpt: 154/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powell, Brad (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Forney, TX 75126	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powell, Brad (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Forney, TX 75126	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powell, Brad (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Forney, TX 75126	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prendergast, Christopher (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76016	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prendergast, Christopher (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76016	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 151/211 Rpt: 155/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prendergast, Christopher (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Arlington, TX 76016	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prendergast, Christopher (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76016	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pugh, Ryan (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76001	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pugh, Ryan (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76001	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pugh, Ryan (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76001	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 152/211 Rpt: 156/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pugh, Ryan (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Arlington, TX 76001	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pulfer, Russell (Mr.) <hr/> Contributor address; City; State; Zip Code Maypearl, TX 76064	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pulfer, Russell (Mr.) <hr/> Contributor address; City; State; Zip Code Maypearl, TX 76064	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pulfer, Russell (Mr.) <hr/> Contributor address; City; State; Zip Code Maypearl, TX 76064	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pulfer, Russell (Mr.) <hr/> Contributor address; City; State; Zip Code Maypearl, TX 76064	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 153/211 Rpt: 157/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pullar-Knight, Cameron (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Terrell, TX 75161	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pullar-Knight, Cameron (Mr.) <hr/> Contributor address; City; State; Zip Code Terrell, TX 75161	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pullar-Knight, Cameron (Mr.) <hr/> Contributor address; City; State; Zip Code Terrell, TX 75161	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pullar-Knight, Cameron (Mr.) <hr/> Contributor address; City; State; Zip Code Terrell, TX 75161	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rajah, Nelesh (Mr.) <hr/> Contributor address; City; State; Zip Code Rockwall, TX 75087	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 154/211 Rpt: 158/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rajah, Nelesh (Mr.)	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Rockwall, TX 75087		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rajah, Nelesh (Mr.)	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Rockwall, TX 75087		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rajah, Nelesh (Mr.)	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Rockwall, TX 75087		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramirez, Romeo (Mr.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Fort Worth, TX 76126		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramirez, Romeo (Mr.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Fort Worth, TX 76126		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 155/211 Rpt: 159/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramirez, Romeo (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Fort Worth, TX 76126	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramirez, Romeo (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Fort Worth, TX 76126	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramsey, Justin (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Fort Worth, TX 76177	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramsey, Justin (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Fort Worth, TX 76177	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramsey, Justin (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Fort Worth, TX 76177	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 156/211 Rpt: 160/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramsey, Justin (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76177	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, Brandon (Mr.) <hr/> Contributor address; City; State; Zip Code Celina, TX 75009	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, Brandon (Mr.) <hr/> Contributor address; City; State; Zip Code Celina, TX 75009	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, Brandon (Mr.) <hr/> Contributor address; City; State; Zip Code Celina, TX 75009	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, Brandon (Mr.) <hr/> Contributor address; City; State; Zip Code Celina, TX 75009	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 157/211 Rpt: 161/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, Michael (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Frisco, TX 75035	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, Michael (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Frisco, TX 75035	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, Michael (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Frisco, TX 75035	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, Michael (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Frisco, TX 75035	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rivas, Sergio (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Fort worth, TX 76164	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 158/211 Rpt: 162/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rivas, Sergio (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Fort worth, TX 76164	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rivas, Sergio (Mr.) <hr/> Contributor address; City; State; Zip Code Fort worth, TX 76164	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rivas, Sergio (Mr.) <hr/> Contributor address; City; State; Zip Code Fort worth, TX 76164	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rochin, Samuel (Mr.) <hr/> Contributor address; City; State; Zip Code Arlington, TX 76010	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rochin, Samuel (Mr.) <hr/> Contributor address; City; State; Zip Code Arlington, TX 76010	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 159/211 Rpt: 163/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rochin, Samuel (Mr.)	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Arlington, TX 76010	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rochin, Samuel (Mr.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Arlington, TX 76010	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, James (Mr.)	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Kemp, TX 75143	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, James (Mr.)	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Kemp, TX 75143	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, James (Mr.)	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Kemp, TX 75143	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 160/211 Rpt: 164/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, James (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Kemp, TX 75143	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rojas, Adrian (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Burleson, TX 76028	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rojas, Adrian (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Burleson, TX 76028	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rojas, Adrian (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Burleson, TX 76028	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rojas, Adrian (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Burleson, TX 76028	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 161/211 Rpt: 165/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ross, Matt (Mr.)	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code Rockwall, TX 75087		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ross, Matt (Mr.)	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Rockwall, TX 75087		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ross, Matt (Mr.)	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Rockwall, TX 75087		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ross, Matt (Mr.)	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Rockwall, TX 75087		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Royce-Bemis, Ryan (Mr.)	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Fort worth, TX 76137		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 162/211 Rpt: 166/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Royce-Bemis, Ryan (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Fort worth, TX 76137	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Royce-Bemis, Ryan (Mr.) <hr/> Contributor address; City; State; Zip Code Fort worth, TX 76137	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Royce-Bemis, Ryan (Mr.) <hr/> Contributor address; City; State; Zip Code Fort worth, TX 76137	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rush, Douglas Cannon (Mr.) <hr/> Contributor address; City; State; Zip Code Midlothian, TX 76065	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rush, Douglas Cannon (Mr.) <hr/> Contributor address; City; State; Zip Code Midlothian, TX 76065	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 163/211 Rpt: 167/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rush, Douglas Cannon (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Midlothian, TX 76065	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rush, Douglas Cannon (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Midlothian, TX 76065	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russ, Brandon (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76006	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russ, Brandon (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76006	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russ, Brandon (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76006	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 164/211 Rpt: 168/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russ, Brandon (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Arlington, TX 76006	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sahagun, Jorge (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Grand Prairie, TX 75052	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sahagun, Jorge (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Grand Prairie, TX 75052	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sahagun, Jorge (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Grand Prairie, TX 75052	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sahagun, Jorge (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Grand Prairie, TX 75052	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 165/211 Rpt: 169/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salas, Bonny (Ms.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Haslet, TX 76052	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salas, Bonny (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Haslet, TX 76052	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salas, Bonny (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Haslet, TX 76052	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salas, Bonny (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Haslet, TX 76052	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salcido, Gustavo (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Mansfield, TX 76063	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 166/211 Rpt: 170/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salcido, Gustavo (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Mansfield, TX 76063	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salcido, Gustavo (Mr.) <hr/> Contributor address; City; State; Zip Code Mansfield, TX 76063	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salcido, Gustavo (Mr.) <hr/> Contributor address; City; State; Zip Code Mansfield, TX 76063	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sassar, Tyler (Mr.) <hr/> Contributor address; City; State; Zip Code Arlington, TX 76001	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sassar, Tyler (Mr.) <hr/> Contributor address; City; State; Zip Code Arlington, TX 76001	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 167/211 Rpt: 171/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sassar, Tyler (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Arlington, TX 76001	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sassar, Tyler (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76001	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Randall (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Forney, TX 75126	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Randall (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Forney, TX 75126	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Randall (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Forney, TX 75126	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 168/211 Rpt: 172/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Randall (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Forney, TX 75126	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sells, Travis (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76011	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shanklin, Brent (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Brock, TX 76087	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shanklin, Brent (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Brock, TX 76087	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shanklin, Brent (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Brock, TX 76087	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 169/211 Rpt: 173/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shanklin, Brent (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Brock, TX 76087	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shepard, Ryan (Mr.) <hr/> Contributor address; City; State; Zip Code Arlington, Texas, TX 76013	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shepard, Ryan (Mr.) <hr/> Contributor address; City; State; Zip Code Arlington, Texas, TX 76013	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shepard, Ryan (Mr.) <hr/> Contributor address; City; State; Zip Code Arlington, Texas, TX 76013	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shepard, Ryan (Mr.) <hr/> Contributor address; City; State; Zip Code Arlington, Texas, TX 76013	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 170/211 Rpt: 174/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sieve, Kevin (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Granbury, TX 76049	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sieve, Kevin (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Granbury, TX 76049	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sieve, Kevin (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Granbury, TX 76049	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sieve, Kevin (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Granbury, TX 76049	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sipriano, Lorenzo (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Mansfield, TX 76063	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 171/211 Rpt: 175/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sipriano, Lorenzo (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Mansfield, TX 76063	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sipriano, Lorenzo (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Mansfield, TX 76063	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sipriano, Lorenzo (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Mansfield, TX 76063	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Riley (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code McKinney, TX 75072	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Riley (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code McKinney, TX 75072	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 172/211 Rpt: 176/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Riley (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code McKinney, TX 75072	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Riley (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code McKinney, TX 75072	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Robby (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Benbrook, TX 76126	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Robby (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Benbrook, TX 76126	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Robby (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Benbrook, TX 76126	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 173/211 Rpt: 177/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Robby (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Benbrook, TX 76126	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Samuel (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Dallas, TX 75238	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Samuel (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Dallas, TX 75238	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Samuel (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Dallas, TX 75238	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Samuel (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Dallas, TX 75238	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 174/211 Rpt: 178/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Tyler (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code ARLINGTON, TX 76014	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Tyler (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code ARLINGTON, TX 76014	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Tyler (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code ARLINGTON, TX 76014	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Tyler (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code ARLINGTON, TX 76014	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snow, Jeremy (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Willow Park, TX 76008	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 175/211 Rpt: 179/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snow, Jeremy (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Willow Park, TX 76008	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snow, Jeremy (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Willow Park, TX 76008	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snow, Jeremy (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Willow Park, TX 76008	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spencer, Kendall (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Irving, TX 75039	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spencer, Kendall (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Irving, TX 75039	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 176/211 Rpt: 180/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spencer, Kendall (Mr.)	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Irving, TX 75039	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spencer, Kendall (Mr.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Irving, TX 75039	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stayner, Monty (Mr.)	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Burleson, TX 76028	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stayner, Monty (Mr.)	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Burleson, TX 76028	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stayner, Monty (Mr.)	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Burleson, TX 76028	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 177/211 Rpt: 181/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stayner, Monty (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Burleson, TX 76028	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephens, Chad (Mr.) <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76108	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephens, Chad (Mr.) <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76108	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephens, Chad (Mr.) <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76108	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephens, Chad (Mr.) <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76108	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 178/211 Rpt: 182/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sternberg, Jeremy (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Glen Rose, TX 76043	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sternberg, Jeremy (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Glen Rose, TX 76043	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sternberg, Jeremy (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Glen Rose, TX 76043	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sternberg, Jeremy (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Glen Rose, TX 76043	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stone, Jordan (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Josephine, TX 75189	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 179/211 Rpt: 183/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stone, Jordan (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Josephine, TX 75189	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stone, Jordan (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Josephine, TX 75189	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stone, Jordan (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Josephine, TX 75189	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Studer, Jimmy (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Fort Worth, TX 76107	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Studer, Jimmy (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Fort Worth, TX 76107	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 180/211 Rpt: 184/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Studer, Jimmy (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Fort Worth, TX 76107	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Studer, Jimmy (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Fort Worth, TX 76107	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Surprenant, Travis (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Midlothian, TX 76065	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Surprenant, Travis (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Midlothian, TX 76065	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Surprenant, Travis (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Midlothian, TX 76065	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 181/211 Rpt: 185/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Surprenant, Travis (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Midlothian, TX 76065	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Surratt, Deryl (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76018	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Surratt, Deryl (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76018	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Surratt, Deryl (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76018	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Surratt, Deryl (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76018	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 182/211 Rpt: 186/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tai, Walker (Mr.)	7 Amount of Contribution (\$) \$1.00
	6 Contributor address; City; State; Zip Code Fort Worth, TX 76116	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tai, Walker (Mr.)	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76116	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tai, Walker (Mr.)	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76116	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tai, Walker (Mr.)	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76116	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Brandon (Mr.)	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Burleson, TX 76028	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 183/211 Rpt: 187/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Brandon (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Burleson, TX 76028	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Brandon (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Burleson, TX 76028	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Brandon (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Burleson, TX 76028	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Thomas (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Fort Worth, TX 76179	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Thomas (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Fort Worth, TX 76179	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 184/211 Rpt: 188/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Thomas (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Fort Worth, TX 76179	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Thomas (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Fort Worth, TX 76179	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teaff, Brady (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Burleson, TX 76028	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teaff, Brady (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Burleson, TX 76028	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teaff, Brady (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Burleson, TX 76028	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 185/211 Rpt: 189/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teaff, Brady (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Burleson, TX 76028	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tentler, Albert (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Dallas, TX 75207	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tentler, Albert (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Dallas, TX 75207	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tentler, Albert (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Dallas, TX 75207	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tentler, Albert (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Dallas, TX 75207	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 186/211 Rpt: 190/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, James (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Denton, TX 76207	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, James (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Denton, TX 76207	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, James (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Denton, TX 76207	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, James (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Denton, TX 76207	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Throne, Matthew (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Fort Worth, TX 76131	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 187/211 Rpt: 191/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Throne, Matthew (Mr.)	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Fort Worth, TX 76131		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Throne, Matthew (Mr.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Fort Worth, TX 76131		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Throne, Matthew (Mr.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Fort Worth, TX 76131		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Toland, Nathan (Mr.)	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Arlington, TX 76001		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Toland, Nathan (Mr.)	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Arlington, TX 76001		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 188/211 Rpt: 192/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Toland, Nathan (Mr.)	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Arlington, TX 76001	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Toland, Nathan (Mr.)	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Arlington, TX 76001	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ton, Daniel (Mr.)	Amount of Contribution (\$) \$6.00
	Contributor address; City; State; Zip Code Carrollton, TX 75007	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ton, Daniel (Mr.)	Amount of Contribution (\$) \$6.00
	Contributor address; City; State; Zip Code Carrollton, TX 75007	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ton, Daniel (Mr.)	Amount of Contribution (\$) \$6.00
	Contributor address; City; State; Zip Code Carrollton, TX 75007	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 189/211 Rpt: 193/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ton, Daniel (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Carrollton, TX 75007	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trammell, Jace (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76015	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trammell, Jace (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76015	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trammell, Jace (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76015	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trammell, Jace (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76015	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 190/211 Rpt: 194/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trujillo, Anthony (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Burleson, TX 76028	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trujillo, Anthony (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Burleson, TX 76028	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trujillo, Anthony (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Burleson, TX 76028	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trujillo, Anthony (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Burleson, TX 76028	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tucker, Philip (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code McKinney, TX 75069	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 191/211 Rpt: 195/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tucker, Philip (Mr.)	7 Amount of Contribution (\$) \$22.00
6 Contributor address; City; State; Zip Code McKinney, TX 75069		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tucker, Philip (Mr.)	Amount of Contribution (\$) \$22.00
Contributor address; City; State; Zip Code McKinney, TX 75069		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tucker, Philip (Mr.)	Amount of Contribution (\$) \$22.00
Contributor address; City; State; Zip Code McKinney, TX 75069		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tupper, Aaron (Mr.)	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Midlothian, TX 76065		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tupper, Aaron (Mr.)	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Midlothian, TX 76065		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 192/211 Rpt: 196/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tupper, Aaron (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Midlothian, TX 76065	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tupper, Aaron (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Midlothian, TX 76065	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Underhill, Joshua (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Fort Worth, TX 76036	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Underhill, Joshua (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Fort Worth, TX 76036	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Underhill, Joshua (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Fort Worth, TX 76036	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 193/211 Rpt: 197/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Underhill, Joshua (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Fort Worth, TX 76036	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Updegraff, John (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76013	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Updegraff, John (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76013	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Updegraff, John (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76013	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Updegraff, John (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76013	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 194/211 Rpt: 198/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vaquera, Rowdy (Mr.)	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code The Colony, TX 75056		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vaquera, Rowdy (Mr.)	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code The Colony, TX 75056		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vaquera, Rowdy (Mr.)	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code The Colony, TX 75056		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vaquera, Rowdy (Mr.)	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code The Colony, TX 75056		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Velasquez, Adrian (Mr.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Midlothian, TX 76065		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 195/211 Rpt: 199/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Velasquez, Adrian (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Midlothian, TX 76065	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Velasquez, Adrian (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Midlothian, TX 76065	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Velasquez, Adrian (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Midlothian, TX 76065	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Villasana, Josue (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Cleburne, TX 76033	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Villasana, Josue (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Cleburne, TX 76033	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 196/211 Rpt: 200/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Villasana, Josue (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Cleburne, TX 76033	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Villasana, Josue (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Cleburne, TX 76033	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Voss, Tyler (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Forney, TX 75126	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Voss, Tyler (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Forney, TX 75126	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Voss, Tyler (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Forney, TX 75126	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 197/211 Rpt: 201/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Voss, Tyler (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Forney, TX 75126	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Henry (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76001	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Henry (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76001	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Henry (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76001	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Henry (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76001	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 198/211 Rpt: 202/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warden, Kyle (Mr.)	7 Amount of Contribution (\$) \$6.00
6 Contributor address; City; State; Zip Code North Richland Hills, TX 76180		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warden, Kyle (Mr.)	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code North Richland Hills, TX 76180		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warden, Kyle (Mr.)	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code North Richland Hills, TX 76180		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warden, Kyle (Mr.)	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code North Richland Hills, TX 76180		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warren, Sonny (Mr.)	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code CORSICANA, TX 75110		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 199/211 Rpt: 203/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warren, Sonny (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code CORSICANA, TX 75110	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warren, Sonny (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code CORSICANA, TX 75110	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warren, Sonny (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code CORSICANA, TX 75110	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waters, Zach (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76001	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waters, Zach (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76001	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 200/211 Rpt: 204/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waters, Zach (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Arlington, TX 76001	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waters, Zach (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76001	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weaver, Brady (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Weatherford, TX 76086	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weaver, Brady (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Weatherford, TX 76086	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weaver, Brady (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Weatherford, TX 76086	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 201/211 Rpt: 205/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weaver, Brady (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Weatherford, TX 76086	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wells, Bradley (Mr.) <hr/> Contributor address; City; State; Zip Code Kennedale, TX 76060	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wells, Bradley (Mr.) <hr/> Contributor address; City; State; Zip Code Kennedale, TX 76060	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wells, Bradley (Mr.) <hr/> Contributor address; City; State; Zip Code Kennedale, TX 76060	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wells, Bradley (Mr.) <hr/> Contributor address; City; State; Zip Code Kennedale, TX 76060	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 202/211 Rpt: 206/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wesloh, Timothy (Mr.)	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Grand Prairie, TX 75054		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wesloh, Timothy (Mr.)	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Grand Prairie, TX 75054		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wesloh, Timothy (Mr.)	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Grand Prairie, TX 75054		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wesloh, Timothy (Mr.)	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Grand Prairie, TX 75054		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Caden (Mr.)	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Arlington, TX 76017		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 203/211 Rpt: 207/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Caden (Mr.)	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Arlington, TX 76017		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Caden (Mr.)	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Arlington, TX 76017		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Caden (Mr.)	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Arlington, TX 76017		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Colton (Mr.)	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Gatesville, TX 76528		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Colton (Mr.)	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Gatesville, TX 76528		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 204/211 Rpt: 208/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Colton (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Gatesville, TX 76528	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Colton (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Gatesville, TX 76528	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Trent (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Dallas, TX 75201	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Trent (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Dallas, TX 75201	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Trent (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Dallas, TX 75201	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 205/211 Rpt: 209/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Trent (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Dallas, TX 75201	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilmarth, Gage (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Cleburne, TX 76033	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilmarth, Gage (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Cleburne, TX 76033	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilmarth, Gage (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Cleburne, TX 76033	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilmarth, Gage (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Cleburne, TX 76033	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 206/211 Rpt: 210/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wittmayer, Jayson (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Arlington, TX 76001	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wittmayer, Jayson (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76001	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wittmayer, Jayson (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76001	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wittmayer, Jayson (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76001	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wooten, Cole (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Aledo, TX 76008	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 207/211 Rpt: 211/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wooten, Cole (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Aledo, TX 76008	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wooten, Cole (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Aledo, TX 76008	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wooten, Cole (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Aledo, TX 76008	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Ronnie (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76001	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Ronnie (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76001	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 208/211 Rpt: 212/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Ronnie (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Arlington, TX 76001	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Ronnie (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76001	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yeager, Jace (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Dallas,, TX 75229	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yeager, Jace (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Dallas,, TX 75229	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yeager, Jace (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Dallas,, TX 75229	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 209/211 Rpt: 213/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yeager, Jace (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Dallas,, TX 75229	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yovanovitch, John (Mr.)	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Alvord, TX 76225	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yovanovitch, John (Mr.)	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Alvord, TX 76225	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yovanovitch, John (Mr.)	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Alvord, TX 76225	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yovanovitch, John (Mr.)	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Alvord, TX 76225	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 210/211 Rpt: 214/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zaragoza, Raul (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Arlington, TX 76014	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zaragoza, Raul (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76014	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zaragoza, Raul (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76014	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zaragoza, Raul (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Arlington, TX 76014	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zelinski, Nick (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Euless, TX 76039	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 211/211 Rpt: 215/229
2 FILER NAME Arlington Professional Firefighters Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zelinski, Nick (Mr.) 6 Contributor address; City; State; Zip Code Euless, TX 76039	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Arlington
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zelinski, Nick (Mr.) Contributor address; City; State; Zip Code Euless, TX 76039	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zelinski, Nick (Mr.) Contributor address; City; State; Zip Code Euless, TX 76039	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Arlington

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: 1/14 Rpt:	2 FILER NAME Arlington Professional Firefighters Assn. PAC	3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/03/2023	5 Payee name Arlington Professional Fire Fighters	
6 Amount (\$) \$9,900.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 208 S Fielder Rd Arlington, TX 76013	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Rent to APFF Local 1329 entity for 1st and 2nd quarter.	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rent to APFF Local 1329 entity for 1st and 2nd quarter.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/09/2023	Payee name Arrington, Johnny	
Amount (\$) \$600.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 208 South Fielder Arlington, TX 76013	
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 Working the polls and block walking.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/09/2023	Payee name Benetiz, Javier	
Amount (\$) \$1,550.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 208 S. Fielder Arlington, TX 76013	
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 Help with polls and block walking.
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: 2/14 Rpt:	2 FILER NAME Arlington Professional Firefighters Assn. PAC	3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/09/2023	5 Payee name Benton, Blake	
6 Amount (\$) \$3,100.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 5765 Bozeman Dr. #2127 Plano, TX 75024	
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 Workings polls and block walking.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/15/2023	Payee name Berber, Frank	
Amount (\$) \$2,236.90 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 208 S. Fielder Rd. Arlington, TX 76013	
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 Salary, Milage, and travel reimbursement.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/09/2023	Payee name Borski, Josh	
Amount (\$) \$250.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 208 S Fielder Rd Arlington , TX 76013	
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 Working the polls and block walking.
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: 3/14 Rpt:	2 FILER NAME Arlington Professional Firefighters Assn. PAC	3 Filer ID (Ethics Commission Filers) 00016561
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4 Date 05/02/2023	5 Payee name CLUB WYNDHAM RESORT
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6 Amount (\$) \$120.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 516 W 8th STREET AUSTIN, TX 78701
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related 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 Parking
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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 05/02/2023	Payee name Cornelius, Jacob (Mr.)
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Amount (\$) \$54.10 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 417 BRAEWICK DRIVE FORT WORTH, TX 76131
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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 Political campaign manpower.
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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 05/09/2023	Payee name Cornelius, Jacob (Mr.)
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Amount (\$) \$341.92 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 417 BRAEWICK DRIVE FORT WORTH, TX 76131
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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 Campaign signs distribution and milage.
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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: 4/14 Rpt:	2 FILER NAME Arlington Professional Firefighters Assn. PAC	3 Filer ID (Ethics Commission Filers) 00016561
4 Date 04/28/2023	5 Payee name Echols, Reilly	
6 Amount (\$) \$844.35 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code TX	
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 Political fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/09/2023	Payee name Eck, Steve	
Amount (\$) \$950.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 208 South Fielder Arlington, TX 76013	
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 Help with polls, block walking.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/27/2023	Payee name Edgerton Strategies	
Amount (\$) \$10,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1540 Keller Parkway #108-402 Keller, TX 76248	
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 Political strategies group
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: 5/14 Rpt:	2 FILER NAME Arlington Professional Firefighters Assn. PAC	3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/04/2023	5 Payee name HOOD, SONYA	
6 Amount (\$) \$3,250.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1615 Pleasant Run Keller, TX 76248	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for lodging on political trips.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/06/2023	Payee name HURTADOS BARBECUE	
Amount (\$) \$738.67 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 205 E FRONT STREET ARLINGTON, TX 76011	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food for may 6th election party at the APFF local union hall.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/09/2023	Payee name Herrod, Kaelen	
Amount (\$) \$600.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 208 S Fielder Rd Arlington , TX 76013	
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 Working the polls and block walking.
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: 6/14 Rpt:	2 FILER NAME Arlington Professional Firefighters Assn. PAC	3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/02/2023	5 Payee name Home Depot	
6 Amount (\$) \$515.38 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 5280 S TX-360 HWY GRAND PRAIRIE, TX 75052	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) T-Posts for campaign signs.	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense T-Posts for campaign signs.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/09/2023	Payee name Horowitz, Preston	
Amount (\$) \$600.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 208 S Fielder Rd Arlington , TX 76013	
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 Working the polls and block walking.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/24/2023	Payee name INTUIT QUICKBOOKS	
Amount (\$) \$31.98 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043	
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 Accounting 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: 7/14 Rpt:	2 FILER NAME Arlington Professional Firefighters Assn. PAC	3 Filer ID (Ethics Commission Filers) 00016561
4 Date 06/24/2023	5 Payee name INTUIT QUICKBOOKS	
6 Amount (\$) \$31.98 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043	
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 Accounting Fee.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/09/2023	Payee name Leverette, Kevin	
Amount (\$) \$375.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 208 S. Fielder Arlington, TX 76013	
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 Help with polls and block walking.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/09/2023	Payee name McDonough, Joey	
Amount (\$) \$600.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 208 S Fielder Rd Arlington , TX 76013	
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 Working the polls and block walking.
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: 8/14 Rpt:	2 FILER NAME Arlington Professional Firefighters Assn. PAC	3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/09/2023	5 Payee name Mosqueda, Sal	
6 Amount (\$) \$275.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 208 S. Fielder Arlington, TX 76013	
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 Working the polls and block walking.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/09/2023	Payee name O'neill, Derek	
Amount (\$) \$1,700.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 208 S Fielder Rd Arlington, TX 76013	
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 Help with polls and block walking.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/09/2023	Payee name Perez, Emmanuel	
Amount (\$) \$850.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 208 S Fielder Rd Arlington , TX 76013	
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 Working the polls and block walking.
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: 9/14 Rpt:	2 FILER NAME Arlington Professional Firefighters Assn. PAC	3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/12/2023	5 Payee name Politexts	
6 Amount (\$) \$561.45 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 4428 Wedgewood Dr Columbia, SC 29206	
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 Political Text messages.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/09/2023	Payee name Pool, Cameron	
Amount (\$) \$475.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 208 S. Fielder Rd Arlington, TX 76013	
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 Help with polls and block walking.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/09/2023	Payee name Rochin, Samuel	
Amount (\$) \$1,400.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 208 S Fielder Rd Arlington, TX 76013	
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 Help with polls and block walking.
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: 10/14 Rpt:	2 FILER NAME Arlington Professional Firefighters Assn. PAC	3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/09/2023	5 Payee name Rogers, James	
6 Amount (\$) \$325.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 208 S Fielder Rd Arlington , TX 76013	
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 Working polls and block walking.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/02/2023	Payee name STARBOARD STRATEGY GROUP	
Amount (\$) \$4,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 501 SAMUELS AVE., STE 610 FORT WORTH, TX 76102	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Political Consultant.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/09/2023	Payee name Salas, Bonny	
Amount (\$) \$675.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 208 S Fielder Rd Arlington , TX 76013	
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 Working the polls and block walking.
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: 11/14 Rpt:	2 FILER NAME Arlington Professional Firefighters Assn. PAC	3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/09/2023	5 Payee name Salcido, Gus	
6 Amount (\$) \$150.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1601 Towne Crossing Blvd, #712 Mansfield, TX 76063	
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 Help with political campaigns.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/09/2023	Payee name Saldivar, Eddy	
Amount (\$) \$300.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 208 S Fielder Rd Arlington , TX 76013	
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 Working the polls and block walking.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/09/2023	Payee name Sasser, Tyler	
Amount (\$) \$650.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 208 S Fielder Rd Arlington , TX 76013	
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 Help with polls and block walking.
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: 12/14 Rpt:	2 FILER NAME Arlington Professional Firefighters Assn. PAC	3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/09/2023	5 Payee name Serna, Ricardo	
6 Amount (\$) \$600.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 208 S Fielder Rd Arlington , TX 76013	
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 Working the polls and block walking.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/09/2023	Payee name Smith, Riley	
Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 208 S Fielder Rd Arlington , TX 76013	
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 Working polls and block walking.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/15/2023	Payee name Studer, Jimmy (Mr.)	
Amount (\$) \$2,658.90 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 208 S. Fielder Arlington, TX 76013	
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 Salary, milage, expense reimbursement.
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: 13/14 Rpt:	2 FILER NAME Arlington Professional Firefighters Assn. PAC	3 Filer ID (Ethics Commission Filers) 00016561
4 Date 05/12/2023	5 Payee name Texas Decision Intelligence	
6 Amount (\$) \$2,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 3 Duskview In Fort Worth , TX 76134	
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 Fees for political analytics.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/09/2023	Payee name Velasquez, Adrian	
Amount (\$) \$300.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 208 S Fielder Rd Arlington , TX 76013	
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 Working the polls and block walking.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/09/2023	Payee name Wittmayer, Jason (Mr.)	
Amount (\$) \$800.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 208 S Fielder St Arlington, TX 76013	
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 Help with polls.
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: 14/14 Rpt:	2 FILER NAME Arlington Professional Firefighters Assn. PAC	3 Filer ID (Ethics Commission Filers) 00016561	
4 Date 05/09/2023	5 Payee name Wright , Ronnie		
6 Amount (\$) \$175.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 208 S. Fielder Arlington, TX 76013		
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 Working the polls and block walking.	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held