### GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

# FORM GPAC COVER SHEET PG 1

Th	e GPAC Instruction	Guide explains how to complete this form.	1	Filer ID (Ethics Commission Filers) 00087022		2 Total pages filed: 121
3	COMMITTEE NAME		•			OFFICE USE ONLY
	Cy-Fair Profession	al Firefighters Political Action Committee				Date Received
						ELECTRONICALLY FILED
						07/16/2023
	COMMITTEE	ADDRESS / PO BOX; APT / SUITE #; CIT	γ·	STATE; ZIP COI	)E	
ľ	ADDRESS	10710 Telge Rd	• ,			
	—					Date Hand-delivered or Date Postmarked
	Change of Address	Houston, TX 77095				Receipt # Amount
						Date Processed
						Date Imaged
5	CAMPAIGN	MS/MRS/MR FIRST				MI
ľ	TREASURER	Mr. Nicholas				
	NAME					
		NICKNAME LAST				SUFFIX
		Rand				
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #; C	CITY;	STATE; ZIP CODE
	TREASURER STREET	11030 Foxbriar Ln				
	ADDRESS					
	(Residence or Business)	Beaumont, TX 77705				
7	CAMPAIGN	STREET OR PO BOX;		APT / SUITE #;	CITY;	STATE; ZIP CODE
	TREASURER MAILING	10710 Telge Rd				
	ADDRESS					
	Change of Address	Houston, TX 77095				
8	CAMPAIGN	AREA CODE PHONE NUMBER	EXT	ENSION		
	TREASURER PHONE	(713) 305-7665				
9	REPORT TYPE	January 15 30	)th c	lay before election		Dissolution (Attach PAC-DR)
		8t	h da	y before election		10th day after campaign treasurer
		X July 15	unof	f		termination
10	PERIOD COVERED	Month Day Year			Day	Year
		01/01/2023 Tł		DUGH 06/30	//2023	
11	ELECTION	ELECTION DATE		ELECTION TYP	ΡĒ	
			rim			Other
			Sene	eral Special		_
		I				
		GO 1	ГО	PAGE 2		
Foi	rms provided by Tex	as Ethics Commission www.et	hic	s.state.tx.us		Version V3.5.1.a18ea2ca

### GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Cy-Fair Professional Fi	refighters Political Actio	n Committee	00087022	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Measures	A. Supported		
	(Describe by date and location of election and nature of issue.)			
		B. Opposed		
	3. Officeholders Assisted (Identify by name or, if			
	applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA		\$	5,531.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL C OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	5,531.00
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT	•		•	
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.		
		Mr. Nich Signature of Ca	iolas Rand	rer
		Signature of Ca	impaign neasu	
AFFIX NOTARY	STAMP / SEAL ABOVE			
		, t	his the	day
of	_, 20, to certify v	which, witness my hand and seal of office.		
Signature of officer ad	Iministering oath	Printed name of officer administering oath	Title of offic	cer administering oath
Forms provided by Texas E	Ethics Commission	www.ethics.state.tx.us		Version V3.5.1.a18ea2ca

# FORM GPAC COVER SHEET PG 3

3 of 121

17 COMMITTE	EE NAME	18 Filer ID	(Ethics Commission Filers)
Cy-Fair Pi	ofessional Firefighters Political Action Committee	00087022	
			SUBTOTAL AMOUNT
NAME OF	SCHEDULE		
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		<b>\$</b> 5,531.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	R	\$
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA LABOR ORGANIZATION	TION OR	\$
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGA	ANIZATION	\$
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR O	RGANIZATION	\$
9.	SCHEDULE E: LOANS		\$
10.	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	DNS	\$
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$

**SUBTOTALS - GPAC** 

The Instruc	tion Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 1/118 Rpt: 4/121	
2 FILER NAME			3 Filer ID (Ethics Commission Fi	ilers)
	essional Firefighters Political Action Committee		00087022	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)	
06/28/2023	Abodeeb, Ahmad			\$10.00
ľ	6 Contributor address; City; State; Zip Code		1	
	ТХ			
	pation / Job title (See Instructions)	9 Employer (See Instructions		
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
06/14/2023	Abodeeb, Ahmad			\$10.00
Ī	Contributor address; City; State; Zip Code		1	
	TX	<u> </u>		
	pation / Job title (See Instructions)	Employer (See Instructions	,	
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	_
05/31/2023	Abodeeb, Ahmad			\$10.00
	Contributor address; City; State; Zip Code			
	тх			
Dringing occur	IX pation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department I		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	¢10.00
05/17/2023	Abodeeb, Ahmad			\$10.00
	Contributor address; City; State; Zip Code			
	ТХ			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
Firefigher	· · · · ·	Cyfair Fire Department I		
Date	Full name of contributor Out-of-state PAC (ID#:_		Amount of Contribution (\$)	
05/03/2023	Abodeeb, Ahmad	)		\$10.00
	Contributor address; City; State; Zip Code			<b>\$10.00</b>
	Contributor address, City, State, Zip Code			
	ТХ			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> ۶)	
Firefigher		Cyfair Fire Department I	HCESD9	

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 2/118 Rpt: 5/121	
2 FILER NAME			3 Filer ID (Ethics Commission File	ers)
	essional Firefighters Political Action Committee		00087022	- ,
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)	
04/19/2023	Abodeeb, Ahmad			\$10.00
ľ	6 Contributor address; City; State; Zip Code			
	ТХ			
8 Principal occup	pation / Job title (See Instructions)	9 Employer (See Instructions	s)	
Firefigher		Cyfair Fire Department	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
04/05/2023	Abodeeb, Ahmad			\$10.00
· · · ·	Contributor address; City; State; Zip Code		1	
	······································			
	ТХ			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	s)	
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	<u> </u> )	Amount of Contribution (\$)	
03/22/2023	Abodeeb, Ahmad			\$10.00
	Contributor address; City; State; Zip Code		•	•
	тх			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	Σ)	
Firefigher		Cyfair Fire Department	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
06/28/2023	Albright, Andrew			\$5.00
ŀ	Contributor address; City; State; Zip Code		1	
	ТХ			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	δ)	
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:_	<u> </u> )	Amount of Contribution (\$)	
06/14/2023	Albright, Andrew			\$5.00
ŀ	Contributor address; City; State; Zip Code		•	
	тх			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	1 S)	
Firefigher	· · · ·	Cyfair Fire Department I		

The Instruction Guide explains how to complete this form.       1 Total rages Schedule A1: Sch 3118 Rpt 6/221         2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee       3 Filer ID (Ethics Commission Filers) 00087022         4 Date 05/31/203       5 Fill name of contributor ox of state PAC (Dot)       7 Amount of Contribution (\$) 55.00         6 Contributor address: City, State, Zip Code TX       9 Employer (See Instructions) Cyfair Fire Department HCESD9       7 Amount of Contribution (\$) 55.00         Date 06/32/2023       Full name of contributor ox-of-state PAC (Dot					
Cy-Fair Professional Firefighters Political Action Committee       00087022         4 Date       5 Full name of contribution	The Instruc	tion Guide explains how to complete this f	orm.		_
Cy-Fair Professional Firefighters Political Action Committee       00087022         4 Date       5 Full name of contribution	2 FILER NAME			·	rs)
05/31/2023       Albright, Andrew       \$5.00         6       Contributor address: City: State; Zip Code       TX         7       7       9       Employer (See Instructions)         Firefigher       Pull name of contributor       out-ot-state PAC (DB//// Contributors)       Amount of Contribution (S)         06/28/2023       Full name of contributor       out-ot-state PAC (DB/// Contributors)       Amount of Contribution (S)         7/rincipal occupation / Job title (See Instructions)       Employer (See Instructions)       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-ot-state PAC (DB//// Contributions)       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-ot-state PAC (DB/// Contributions)       Amount of Contribution (S)         06/14/2023       Full name of contributor       out-ot-state PAC (DB/// Contributions)       Amount of Contribution (S)         7       TX       Employer (See Instructions)       S5.00         06/31/2023       Full name of contributor       out-ot-state PAC (DB//// Contributions)       Amount of Contribution (S)         05/31/2023       Full name of contributor       out-ot-state PAC (DB/// Contributions)       Amount of Contribution (S)         05/31/2023       Full name of contributor       out-ot-state PAC (DB/// Contributions)       Amount of Contributi		essional Firefighters Political Action Committee			
6       Contributor address; City; State; Zip Code         TX       9       Employer (See Instructions)         Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor       aut-of-state PAC (Dir:         O6/28/2023       Arnold, Katrina       Contributor address; City; State: Zip Code         Tx       Principal occupation / Job tifle (See Instructions)       Employer (See Instructions)         Firefigher       Contributor address; City; State: Zip Code       Amount of Contribution (S)         Firefigher       Full name of contributor       out-of-state PAC (Dir:       Amount of Contribution (S)         O6/14/2023       Full name of contributor       out-of-state PAC (Dir:       Amount of Contribution (S)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       S5.00         Tx       Tx       Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Contributor address; City; State; Zip Code       Amount of Contribution (S)       \$5.00         Date       Full name of contributor       out-of-state PAC (Dir:       Amount of Contribution (S)       \$5.00         O6/13/2023       Full name of contributor       out-of-state PAC (Dir:       Amount of Contribution (S)       \$5.00         Ofs/17/2023 <td>4 Date</td> <td>5 Full name of contributor out-of-state PAC (ID#:</td> <td>)</td> <td>7 Amount of Contribution (\$)</td> <td></td>	4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
TX       Finitipal occupation / Job title (See Instructions)       9 Employer (See Instructions)       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (De       Amount of Contribution (S)       \$5.00         Date       Contributor address, City, State: Zip Code       Amount of Contribution (S)       \$5.00         TX       Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (De       Amount of Contribution (S)       \$5.00         O6/14/2023       Full name of contributor       out-of-state PAC (De       Amount of Contribution (S)       \$5.00         Date       Full name of contributor       out-of-state PAC (De       Amount of Contribution (S)       \$5.00         O6/14/2023       Full name of contributor       out-of-state PAC (De       Amount of Contribution (S)       \$5.00         TX       Employer (See Instructions)       Employer (See Instructions)       \$5.00         Firefigher       Contributor address; City; State: Zip Code       Amount of Contribution (S)       \$5.00         Date       Full name of contributor       out-of-state PAC (De       Amount of Contribution (S)       \$5.00         05/31/2023       Full name of contributor       out-of-state	05/31/2023	Albright, Andrew		4	\$5.00
8       Principal occupation / Job title (See Instructions)       9       Employer (See Instructions)         Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (Der)       Amount of Contribution (\$)         06/28/2023       Full name of contributor       out-of-state PAC (Der)       Amount of Contribution (\$)         06/28/2023       Full name of contributor       out-of-state PAC (Der)       Amount of Contribution (\$)         7       Full name of contributor       out-of-state PAC (Der)       Amount of Contribution (\$)         06/14/2023       Full name of contributor       out-of-state PAC (Der)       Amount of Contribution (\$)         06/14/2023       Full name of contributor       out-of-state PAC (Der)       Amount of Contribution (\$)         06/14/2023       Full name of contributor       out-of-state PAC (Der)       Amount of Contribution (\$)         7       Tx       Employer (See Instructions)       Employer (See Instructions)         Firefigher       Out-of-state PAC (Der)       Amount of Contribution (\$)       \$5.00         05/31/2023       Full name of contributor       out-of-state PAC (Der)       Amount of Contribution (\$)       \$5.00         05/17/2023       Full name of contributor       out-of-state PAC (Der) <td< td=""><td>ľ</td><td>6 Contributor address; City; State; Zip Code</td><td></td><td></td><td></td></td<>	ľ	6 Contributor address; City; State; Zip Code			
8       Principal occupation / Job title (See Instructions)       9       Employer (See Instructions)         Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (Der)       Amount of Contribution (\$)         06/28/2023       Full name of contributor       out-of-state PAC (Der)       Amount of Contribution (\$)         06/28/2023       Full name of contributor       out-of-state PAC (Der)       Amount of Contribution (\$)         7       Full name of contributor       out-of-state PAC (Der)       Amount of Contribution (\$)         06/14/2023       Full name of contributor       out-of-state PAC (Der)       Amount of Contribution (\$)         06/14/2023       Full name of contributor       out-of-state PAC (Der)       Amount of Contribution (\$)         06/14/2023       Full name of contributor       out-of-state PAC (Der)       Amount of Contribution (\$)         7       Tx       Employer (See Instructions)       Employer (See Instructions)         Firefigher       Out-of-state PAC (Der)       Amount of Contribution (\$)       \$5.00         05/31/2023       Full name of contributor       out-of-state PAC (Der)       Amount of Contribution (\$)       \$5.00         05/17/2023       Full name of contributor       out-of-state PAC (Der) <td< td=""><td></td><td></td><td></td><td></td><td></td></td<>					
Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (Dar Contributor address; City: State; Zip Code       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       S5.00         Principal occupation / Job title (See Instructions)       Contributor address; City: State; Zip Code       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (Dar Contributor address; City: State; Zip Code       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       S5.00         Firefigher       Contributor address; City: State; Zip Code       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       S5.00         Firefigher       Out-of-state PAC (Dar TX       Amount of Contribution (\$)       \$5.00         Date       Full name of contributor       out-of-state PAC (Dar TX       Amount of Contribution (\$)       \$5.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Contribution (\$)       \$5.00         O5/31/2023       Full name of contributor       Out-of-state PAC (Dar TX       Amount of Contribution (\$)       \$5.00         Date       Full name of contribut		ТХ			
Date       Full name of contributor       out-of-state PAC (D#       Amount of Contribution (\$)       \$5.00         06/28/2023       Arnold, Katrina       Contributor address; City; State; Zip Code       Amount of Contribution (\$)       \$5.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (D#       Amount of Contribution (\$)         06/14/2023       Arnold, Katrina       S5.00         TX       Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       S5.00         Firefigher       TX       Principal occupation / Job title (See Instructions)       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (D#       Amount of Contribution (\$)       S5.00         05/31/2023       Full name of contributor       out-of-state PAC (D#       Amount of Contribution (\$)       S5.00         05/17/2023       Full name of contributor       out-of-state PAC (D#       Amount of Contribution (\$)       S5.00         05/17/2023       Full name of contributor       out-of-state PAC (D#       Amount of Contribution (\$)       S5.00         05/17/2023	8 Principal occup	pation / Job title (See Instructions)			
06/28/2023       Arnold, Katrina       \$\$5.00         TX       Frincipal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (Dir:	Firefigher		Cyfair Fire Department I	HCESD9	
Contributor address; City; State; Zip Code         Tx         Principal occupation / Job title (See Instructions)         Firefigher       Employer (See Instructions)         Contributor address; City; State; Zip Code       Amount of Contribution (\$)         06/14/2023       Arnold, Katrina         Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Tx       Principal occupation / Job title (See Instructions)         Firefigher       Employer (See Instructions)         Of/31/2023       Full name of contributor       out-of-state PAC (IDe:	Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
Contributor address; City; State; Zip Code       TX         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (IDE:	06/28/2023			4	\$5.00
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Pirefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:	ľ				
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Pirefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:					
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:					
Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/14/2023       Arnold, Katrina       \$5.00         Tx       Employer (See Instructions)       Employer (See Instructions)         Firefigher       Amount of Contribution (\$)       \$5.00         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/31/2023       Arnold, Katrina					
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/14/2023       Arnold, Katrina       \$5.00         TX       Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/31/2023       Arnold, Katrina       Contributor address; City; State; Zip Code       Amount of Contribution (\$)         TX       Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$5.00         05/31/2023       Arnold, Katrina       S5.00       Cyfair Fire Department HCESD9         Date       TX       Employer (See Instructions)       \$5.00         Firefigher       Out-of-state PAC (ID#:)       Amount of Contribution (\$)       \$5.00         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)       \$5.00         O5/17/2023       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)       \$5.00         O5/17/2023       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribut		pation / Job title (See Instructions)			
06/14/2023       Arnold, Katrina       \$5.00         TX       TX       Finicipal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor address; City; State; Zip Code       Amount of Contribution (\$)         05/31/2023       Full name of contributor       out-of-state PAC (ID#;	Firetigner		Cyfair Fire Department i	1	
Contributor address; City; State; Zip Code       TX         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:			)		
Tx       Employer (See Instructions)       Employer (See Instructions)         Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:)         05/31/2023       Arnold, Katrina       \$5.00         Contributor address; City; State; Zip Code       Tx       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$5.00         Firefigher       Tx       Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Amount of Contribution (\$)         Firefigher       Out-of-state PAC (ID#:)       Amount of Contribution (\$)       \$5.00         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)       \$5.00         05/17/2023       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)       \$5.00         05/17/2023       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)       \$5.00         Tx       Tx       Tx       Image: State; Zip Code       Image: State; Zip Code       Image: State; Zip Code       Image: State; Zip Code       Image: State;	06/14/2023			9	\$5.00
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/31/2023       Arnold, Katrina        Amount of Contribution (\$)       \$5.00         05/31/2023       Arnold, Katrina		Contributor address; City; State; Zip Code			
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/31/2023       Arnold, Katrina        Amount of Contribution (\$)       \$5.00         05/31/2023       Arnold, Katrina					
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:)         05/31/2023       Arnold, Katrina       \$5.00         Contributor address; City; State; Zip Code       TX       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$5.00         Firefigher       Cyfair Fire Department HCESD9       \$5.00         Date       TX       Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Cyfair Fire Department HCESD9       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/17/2023       Arnold, Katrina       contributor address; City; State; Zip Code       Amount of Contribution (\$)         TX       TX       TX       Principal occupation / Job title (See Instructions)       \$5.00         TX       Employer (See Instructions)       Employer (See Instructions)       \$5.00		тх			
Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/31/2023       Arnold, Katrina       \$5.00         Contributor address; City; State; Zip Code       TX       Fincipal occupation / Job title (See Instructions)         Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:)         Obj/17/2023       Full name of contributor       out-of-state PAC (ID#:)         Obj/17/2023       Full name of contributor       out-of-state PAC (ID#:)         Obj/17/2023       Full name of contributor       out-of-state PAC (ID#:)         TX       Arnold, Katrina       \$5.00         Contributor address; City; State; Zip Code       Amount of Contribution (\$)         TX       TX       Fincipal occupation / Job title (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)	Principal occup		Employer (See Instructions	<u> </u>	
05/31/2023       Arnold, Katrina       \$5.00         Contributor address; City; State; Zip Code       TX         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:)         05/17/2023       Arnold, Katrina       Amount of Contribution (\$)         05/17/2024       TX       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$5.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Amount of Contribution (\$)         TX       TX       Employer (See Instructions)       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       State S					
Contributor address; City; State; Zip Code         TX         Principal occupation / Job title (See Instructions)         Firefigher         Date         Full name of contributor         05/17/2023         Arnold, Katrina         Contributor address; City; State; Zip Code         TX         Principal occupation / Job title (See Instructions)         Full name of contributor         Out-of-state PAC (ID#:)         Arnold, Katrina         Contributor address; City; State; Zip Code         TX         Principal occupation / Job title (See Instructions)         Employer (See Instructions)         Employer (See Instructions)	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
TX         Principal occupation / Job title (See Instructions)         Firefigher         Date         Full name of contributor         05/17/2023         Arnold, Katrina         Contributor address; City; State; Zip Code         TX         Principal occupation / Job title (See Instructions)         Employer (See Instructions)         Contributor address; City; State; Zip Code         TX         Principal occupation / Job title (See Instructions)         Employer (See Instructions)	05/31/2023	Arnold, Katrina		\$	\$5.00
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/17/2023       Arnold, Katrina	ŀ	Contributor address; City; State; Zip Code			
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/17/2023       Arnold, Katrina					
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/17/2023       Arnold, Katrina					
Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/17/2023       Arnold, Katrina       \$5.00         Contributor address; City; State; Zip Code       TX       TX         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Employer (See Instructions)					
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The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 4/118 Rpt: 7/121	
2 FILER NAME			3 Filer ID (Ethics Commission File	ers)
	essional Firefighters Political Action Committee		00087022	- ,
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
05/03/2023	Arnold, Katrina			\$5.00
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Date 04/19/2023	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	ቀ⊑ በበ
04/19/2023	Arnold, Katrina			\$5.00
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Principal occur	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 3)	
Firefigher		Cyfair Fire Department I		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
06/28/2023	Ayala, Alexa			\$5.00
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	pation / Job title (See Instructions)	Employer (See Instructions	3)	
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Firefigher		Cyfair Fire Department I		
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	
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Date			Amount of Contribution (\$)	\$5.00
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2 FILER NAME			3 Filer ID (Ethics Commission Filers)	)
	essional Firefighters Political Action Committee		00087022	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
05/17/2023	Ayala, Alexa		\$5	5.00
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	pation / Job title (See Instructions)	9 Employer (See Instructions		
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Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
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	pation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department I	HCESD9	
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04/05/2023	Ayala, Alexa		\$5	5.00
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03/22/2023	Full name of contributor out-of-state PAC (ID#: Ayala, Alexa	/		5.00
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	essional Firefighters Political Action Committee		00087022	
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
06/28/2023	Bailey, Bryan		\$	10.00
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8 Principal occup	pation / Job title (See Instructions)	9 Employer (See Instructions	5)	
Firefigher		Cyfair Fire Department	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
06/14/2023	Bailey, Bryan			10.00
	Contributor address; City; State; Zip Code			
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Principal occur	pation / Job title (See Instructions)	Employer (See Instructions	5)	
Firefigher		Cyfair Fire Department		
-	Full name of contributor out-of-state PAC (ID#:			
Date 05/31/2023		)	Amount of Contribution (\$)	10.00
05/31/2023	Bailey, Bryan		φ.	10.00
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Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
06/28/2023	Becker, Cierra		]	\$5.00
	Contributor address; City; State; Zip Code			
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	pation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
06/14/2023	Becker, Cierra			\$5.00
-	Contributor address; City; State; Zip Code			
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Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	5)	
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The Instruction Guide explains how	to complete this form.	1 Total pages Schedule A1: Sch: 8/118 Rpt: 11/121
2 FILER NAME		<b>3</b> Filer ID (Ethics Commission Filers)
Cy-Fair Professional Firefighters Political A	Action Committee	00087022
4 Date 5 Full name of contributor	out-of-state PAC (ID#:	_) <b>7</b> Amount of Contribution (\$)
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8 Principal occupation / Job title (See Instructions) Firefigher	) 9 Employer (See Instru Cyfair Fire Departn	
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02/08/2023 Becker, Cierra		\$5.00
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Cy-Fair Professional Firefighters Political Action Committee       0008702         4 Date       5 Full name of contributor       out-of-state PAC (ID#:)       7 Amount of Contribution (\$)         01/11/2023       6 Contributor address; City; State: Zip Code       7       7 Amount of Contribution (\$)         8 Principal occupation / Job title (See Instructions)       9 Employer (See Instructions)       7 Amount of Contribution (\$)         Firefigher       06/28/2023       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/28/2023       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/28/2023       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/28/2023       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Cyfair Fire Department HCESD9         Tx       Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Amount of Contribution (\$)         06/14/2023       Books, Brandon       Contributor address; City; State; Zip Code       Amount of Contribution (\$)         7       Tr       State PAC (ID#:	The Instru	iction Guide explains how to complete this f	orm.		
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01/11/2023       Becker, Cierra       Image: City State; Zip Code         6       Contributor address; City; State; Zip Code       TX         8       Principal occupation / Job title (See Instructions) Firefigher       9       Employer (See Instructions) Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:					
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Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#;)       Amount of Contribution (\$)       \$         06/28/2023       Books, Brandon       Contributor address; City, State; Zip Code       Amount of Contribution (\$)       \$         Tx       Frincipal occupation / Job title (See Instructions)       Employer (See Instructions)       Amount of Contribution (\$)       \$         Date       Full name of contributor       out-of-state PAC (ID#;	8 Principal occu		9 Employer (See Instructions	s)	
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/28/2023       Books, Brandon       Contributor address; City; State; Zip Code       Amount of Contribution (\$)       S         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/14/2023       Fooks, Brandon       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/14/2023       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       S         TX       Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       S         Firefigher       Cyfair Fire Department HCESD9       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/31/2023       Books, Brandon       Contributor address; City; State; Zip Code       Amount of Contribution (\$)					
06/28/2023       Books, Brandon       s         Contributor address; City; State; Zip Code       TX         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Contributor address; City; State; Zip Code         Date       Full name of contributor       out-of-state PAC (ID#:)         Amount of Contribution (\$)       Books, Brandon       Amount of Contribution (\$)         06/14/2023       Books, Brandon       Amount of Contribution (\$)         Contributor address; City; State; Zip Code       TX       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       S         Firefigher       Contributor address; City; State; Zip Code       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/31/2023       Books, Brandon       Contributor address; City; State; Zip Code       Amount of Contribution (\$)         05/31/2023       Books, Brandon       Amount of Contribution (\$)       S         Contributor address; City; State; Zip Code       Amount of Contribution (\$)       S		Full name of contributor Out-of-state PAC (ID#:			
Contributor address; City; State; Zip Code       TX         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:)         06/14/2023       Books, Brandon       Amount of Contribution (\$)         Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Tx       Tx         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Tx         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Contributor address; City; State; Zip Code         Date       Full name of contributor       Out-of-state PAC (ID#:)         Obj(31/2023       Full name of contributor       Out-of-state PAC (ID#:)         Date       Full name of contributor       Out-of-state PAC (ID#:)         Obj(31/2023       Books, Brandon       Amount of Contribution (\$)         Obj(31/2023       Full name of contributor       Amount of Contribution (\$)         Obj(31/2023       Full name of contributor       Amount of Contribution (\$)         Obj(31/2023       Books, Brandon       Amount of Contribution (\$) <td></td> <td></td> <td>/</td> <td></td> <td>20.00</td>			/		20.00
TX       Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Cyfair Fire Department HCESD9         Date       Full name of contributor out-of-state PAC (ID#:)       Amount of Contribution (\$)       S         06/14/2023       Books, Brandon        Contributor address; City; State; Zip Code       Amount of Contribution (\$)       S         TX       TX       TX       Employer (See Instructions)       S         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       S         Firefigher       TX       Cyfair Fire Department HCESD9       S         Date       Full name of contributor out-of-state PAC (ID#:)       Amount of Contribution (\$)       S         Date       Full name of contributor out-of-state PAC (ID#:)       Amount of Contribution (\$)       S         Date       Full name of contributor out-of-state PAC (ID#:)       Amount of Contribution (\$)       S       S         05/31/2023       Books, Brandon       Contributor address; City; State; Zip Code       Amount of Contribution (\$)       S		· · · · · · · · · · · · · · · · · · ·		•	••••
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:)         06/14/2023       Books, Brandon       Amount of Contribution (\$)         Contributor address; City; State; Zip Code       TX         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       TX         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:)         Amount of Contributor       out-of-state PAC (ID#:)         Amount of Contributor       out-of-state PAC (ID#:)         Date       Full name of contributor       out-of-state PAC (ID#:)         Mount of Contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/31/2023       Books, Brandon       S         Contributor address; City; State; Zip Code       Amount of Contribution (\$)					
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:)         06/14/2023       Books, Brandon       Amount of Contribution (\$)         Contributor address; City; State; Zip Code       TX         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Contributor address; City; State; Zip Code         Date       Full name of contributor       out-of-state PAC (ID#:)         Amount of Contributor       out-of-state PAC (ID#:)         Date       Full name of contributor       out-of-state PAC (ID#:)         Amount of Contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/31/2023       Books, Brandon       S         Contributor address; City; State; Zip Code       Amount of Contribution (\$)					
Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/14/2023       Books, Brandon       Contributor address; City; State; Zip Code       Amount of Contribution (\$)         TX       Tx       Frincipal occupation / Job title (See Instructions)       Employer (See Instructions)       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/31/2023       Books, Brandon       Contributor address; City; State; Zip Code       Amount of Contribution (\$)		ТХ			
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/14/2023       Books, Brandon       \$         Contributor address; City; State; Zip Code       TX         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor         05/31/2023       Books, Brandon         Contributor address; City; State; Zip Code	•	upation / Job title (See Instructions)			
06/14/2023       Books, Brandon       S         Contributor address; City; State; Zip Code       TX         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor out-of-state PAC (ID#:)         Amount of Contribution (\$)       S         O5/31/2023       Books, Brandon         Contributor address; City; State; Zip Code       Amount of Contribution (\$)	Firefigher		Cyfair Fire Department	HCESD9	
Contributor address; City; State; Zip Code         TX         Principal occupation / Job title (See Instructions)         Firefigher         Date         Full name of contributor         05/31/2023         Books, Brandon         Contributor address; City; State; Zip Code	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
TX       Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:)         05/31/2023       Books, Brandon       S         Contributor address; City; State; Zip Code       Amount of Contribution (\$)	06/14/2023	Books, Brandon		\$20	20.00
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor out-of-state PAC (ID#:)         05/31/2023       Books, Brandon         Contributor address; City; State; Zip Code       Amount of Contribution (\$)		Contributor address; City; State; Zip Code		1	
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor out-of-state PAC (ID#:)         05/31/2023       Books, Brandon         Contributor address; City; State; Zip Code       Amount of Contribution (\$)					
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor out-of-state PAC (ID#:)         05/31/2023       Books, Brandon         Contributor address; City; State; Zip Code       Amount of Contribution (\$)					
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Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/31/2023       Books, Brandon       \$         Contributor address; City; State; Zip Code       \$		Jpalion / Job lille (See instructions)		,	
05/31/2023 Books, Brandon Contributor address; City; State; Zip Code				1	
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Principal occupation / Job title (See Instructions) Employer (See Instructions)	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)	
Firefigher Cyfair Fire Department HCESD9	Firefigher		Cyfair Fire Department	HCESD9	
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)	Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
06/28/2023 Bornowski, Kyle	06/28/2023	Bornowski, Kyle		\$10	0.00
Contributor address; City; State; Zip Code		Contributor address; City; State; Zip Code		1	
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Principal occupation / Job title (See Instructions) Employer (See Instructions)		upation / Job title (See Instructions)			
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2 FILER NAME Cy-Fair Profe	essional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 06/14/2023	<ul> <li>5 Full name of contributor out-of-state PAC (ID#:</li> <li>Bornowski, Kyle</li> <li>6 Contributor address; City; State; Zip Code</li> </ul>		7 Amount of Contribution (\$) 
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8 Principal occup Firefigher	ipation / Job title (See Instructions)	9 Employer (See Instructions Cyfair Fire Department I	
Date 05/31/2023	Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) \$10.00
Principal occup Firefigher	TX Ipation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I	
Date 05/17/2023	Full name of contributor out-of-state PAC (ID#: Bornowski, Kyle Contributor address; City; State; Zip Code		Amount of Contribution (\$) 
Principal occur Firefigher	TX Ipation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I	
Date 05/03/2023	Full name of contributor out-of-state PAC (ID#: Bornowski, Kyle Contributor address; City; State; Zip Code		Amount of Contribution (\$) 
Principal occur Firefigher	TX Ipation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I	
Date 04/19/2023	Full name of contributor out-of-state PAC (ID#:_ Bornowski, Kyle Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) \$10.00
Principal occup Firefigher	I Ipation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I	
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The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 11/118 Rpt: 14/121	
2 FILER NAME			3 Filer ID (Ethics Commission F	Filers)
	essional Firefighters Political Action Committee		00087022	·
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
04/05/2023	Bornowski, Kyle			\$10.00
	6 Contributor address; City; State; Zip Code	,	1	
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8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)	
Firefigher		Cyfair Fire Department H	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
03/22/2023	Bornowski, Kyle			\$10.00
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Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
Firefigher	,	Cyfair Fire Department H		
Date	Full name of contributor Out-of-state PAC (ID#:		Amount of Contribution (\$)	
03/08/2023	Full name of contributor out-of-state PAC (ID#: Bornowski, Kyle			\$10.00
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	Contributor address; City; State; Zip Code	ļ		
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Principal occur	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
Firefigher		Cyfair Fire Department H		
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Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	ቀ10 00
02/22/2023	Bornowski, Kyle			\$10.00
	Contributor address; City; State; Zip Code			
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Firefigher	pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department H		
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Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
02/08/2023	Bornowski, Kyle			\$10.00
	Contributor address; City; State; Zip Code			
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	pation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department H	HCESD9	

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 12/118 Rpt: 15/121	
2 FILER NAME Cy-Fair Profe	essional Firefighters Political Action Committee		3 Filer ID (Ethics Commission File 00087022	ers)
4 Date 01/25/2023	<ul> <li>5 Full name of contributor out-of-state PAC (ID#: Bornowski, Kyle</li> <li>6 Contributor address; City; State; Zip Code</li> </ul>	)	7 Amount of Contribution (\$)	\$10.00
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8 Principal occu Firefigher	pation / Job title (See Instructions)	9 Employer (See Instructions Cyfair Fire Department H		
Date 01/11/2023	Full name of contributor out-of-state PAC (ID#: Bornowski, Kyle Contributor address; City; State; Zip Code TX		Amount of Contribution (\$)	\$10.00
Principal occu Firefigher	pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I		
Date 06/28/2023	Full name of contributor out-of-state PAC (ID#: Bowers, Braxton Contributor address; City; State; Zip Code	)	Amount of Contribution (\$)	\$15.00
Principal occu Firefigher	TX pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I		
Date 06/14/2023	Full name of contributor out-of-state PAC (ID#: Bowers, Braxton Contributor address; City; State; Zip Code	)	Amount of Contribution (\$)	\$15.00
Principal occu Firefigher	TX pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I		
Date 05/31/2023	Full name of contributor out-of-state PAC (ID#: Bowers, Braxton Contributor address; City; State; Zip Code	)	Amount of Contribution (\$)	\$15.00
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2 FILER NAME Cy-Fair Profe	essional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
05/17/2023	<ul> <li>5 Full name of contributor out-of-state PAC (ID#:</li> <li>Bowers, Braxton</li> <li>6 Contributor address; City; State; Zip Code</li> </ul>	)	7 Amount of Contribution (\$) \$15.
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8 Principal occu Firefigher	pation / Job title (See Instructions)	9 Employer (See Instructions Cyfair Fire Department H	
Date 05/03/2023	Full name of contributor out-of-state PAC (ID#:_ Bowers, Braxton Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) \$15.
Principal occu Firefigher	I pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department F	,
Date 04/19/2023	Full name of contributor out-of-state PAC (ID#: Bowers, Braxton Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) \$15.
Principal occu Firefigher	TX pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department H	
Date 04/05/2023	Full name of contributor out-of-state PAC (ID#: Bowers, Braxton Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) \$15.
Principal occu Firefigher	TX pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department H	
Date 03/22/2023	Full name of contributor out-of-state PAC (ID#: Bowers, Braxton Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) \$15.
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The Instruction Guide explains how to complete this form.	
	1 Total pages Schedule A1: Sch: 14/118 Rpt: 17/121
2 FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)
Cy-Fair Professional Firefighters Political Action Committee	00087022
4 Date 5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
03/08/2023 Bowers, Braxton	\$15.00
6 Contributor address; City; State; Zip Code	
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8         Principal occupation / Job title (See Instructions)         9         Employer (See Instruction)	
Firefigher Cyfair Fire Department	HCESD9
Date     Full name of contributor     out-of-state PAC (ID#:)	Amount of Contribution (\$)
02/22/2023 Bowers, Braxton	\$15.00
Contributor address; City; State; Zip Code	
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Principal occupation / Job title (See Instructions) Employer (See Instruction	
Firefigher Cyfair Fire Department	HCESD9
Date     Full name of contributor     out-of-state PAC (ID#:)	Amount of Contribution (\$)
02/08/2023 Bowers, Braxton	\$15.00
Contributor address; City; State; Zip Code	
TX	
Principal occupation / Job title (See Instructions) Employer (See Instruction	
Firefigher Cyfair Fire Department	HCESD9
Date     Full name of contributor     out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/25/2023 Bowers, Braxton	\$15.00
Contributor address; City; State; Zip Code	
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Principal occupation / Job title (See Instructions)Employer (See InstructionFirefigherCyfair Fire Department	
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Date     Full name of contributor     out-of-state PAC (ID#:)	Amount of Contribution (\$)
Date     Full name of contributor     out-of-state PAC (ID#:)       01/11/2023     Bowers, Braxton	\$15.00
Date     Full name of contributor     out-of-state PAC (ID#:)	
Date     Full name of contributor     out-of-state PAC (ID#:)       01/11/2023     Bowers, Braxton	
Date     Full name of contributor     out-of-state PAC (ID#:)       01/11/2023     Bowers, Braxton       Contributor address; City; State; Zip Code	
Date       Full name of contributor       out-of-state PAC (ID#:)         01/11/2023       Bowers, Braxton         Contributor address; City; State; Zip Code         TX	\$15.00
Date       Full name of contributor       out-of-state PAC (ID#:)         01/11/2023       Bowers, Braxton         Contributor address; City; State; Zip Code         TX         Principal occupation / Job title (See Instructions)       Employer (See Instruction)	\$15.00 s)
Date       Full name of contributor       out-of-state PAC (ID#:)         01/11/2023       Bowers, Braxton         Contributor address; City; State; Zip Code         TX	\$15.00

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2 FILER NAME			Sch: 15/118 Rpt: 18/121 <b>3</b> Filer ID (Ethics Commission Filers)
	essional Firefighters Political Action Committee		00087022
_	<ul> <li>5 Full name of contributor out-of-state PAC (ID#:_ Brewer, Jason</li> <li>6 Contributor address; City; State; Zip Code</li> </ul>	)	7 Amount of Contribution (\$) \$10
	TX		
8 Principal occup Firefigher	pation / Job title (See Instructions)	9 Employer (See Instructions) Cyfair Fire Department H	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
06/28/2023	Buonarosa, Nicholas		\$10
	Contributor address; City; State; Zip Code		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> ۱
Firefigher		Cyfair Fire Department H	•
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)
06/14/2023	Buonarosa, Nicholas	/	\$10 \$10
	Contributor address; City; State; Zip Code		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	;)
Firefigher		Cyfair Fire Department H	HCESD9
Date 05/31/2023	Full name of contributor out-of-state PAC (ID#: Buonarosa, Nicholas Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) \$10
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Principal occu Firefigher	pation / Job title (See Instructions)	Employer (See Instructions) Cyfair Fire Department H	HCESD9
	Full name of contributor out-of-state PAC (ID#:_ Buonarosa, Nicholas Contributor address; City; State; Zip Code		HCESD9 Amount of Contribution (\$) \$10
Firefigher Date 05/17/2023	Full name of contributor out-of-state PAC (ID#:_ Buonarosa, Nicholas Contributor address; City; State; Zip Code	Cyfair Fire Department F	Amount of Contribution (\$) \$10
Firefigher Date 05/17/2023	Full name of contributor out-of-state PAC (ID#:_ Buonarosa, Nicholas Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$10

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2 FILER NAME			3 Filer ID (Ethics Commission Fil	lers)
	essional Firefighters Political Action Committee		00087022	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)	
05/03/2023	Buonarosa, Nicholas			\$10.00
l .	6 Contributor address; City; State; Zip Code		•	
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8 Principal occup	pation / Job title (See Instructions)	9 Employer (See Instructions	Σ)	
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	·)	Amount of Contribution (\$)	
04/19/2023	Buonarosa, Nicholas			\$10.00
	Contributor address; City; State; Zip Code		•	Ţ
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Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	1 5)	
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:_	·)	Amount of Contribution (\$)	
04/05/2023	Buonarosa, Nicholas			\$10.00
ł	Contributor address; City; State; Zip Code		•	
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Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	s)	
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
03/22/2023	Buonarosa, Nicholas			\$10.00
ľ	Contributor address; City; State; Zip Code			
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	pation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
03/08/2023	Buonarosa, Nicholas			\$10.00
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Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	s)	
Firefigher		Cyfair Fire Department	HCESD9	
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2 FILER NAME			3 Filer ID (Ethics Commission Fi	ilers)
Cy-Fair Profe	essional Firefighters Political Action Committee		00087022	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)	
02/22/2023	Buonarosa, Nicholas		.,	\$10.00
	6 Contributor address; City; State; Zip Code		•	
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8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)	
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
02/08/2023	Buonarosa, Nicholas			\$10.00
	Contributor address; City; State; Zip Code		•	
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Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)	
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
01/25/2023	Buonarosa, Nicholas			\$10.00
	Contributor address; City; State; Zip Code		•	
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	pation / Job title (See Instructions)	Employer (See Instructions	,	
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
01/11/2023	Buonarosa, Nicholas			\$10.00
	Contributor address; City; State; Zip Code		1	
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	pation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department I	-	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
06/28/2023	Cardenas, Carlos			\$10.00
	Contributor address; City; State; Zip Code			
Duin single age	TX		Į	
	pation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department I	HCESDy	

The Instruc	tion Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 18/118 Rpt: 21/121
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
	essional Firefighters Political Action Committee		00087022
	5 Full name of contributor Out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)
06/14/2023	Cardenas, Carlos		\$10.00
ľ	6 Contributor address; City; State; Zip Code		1
	ТХ		
8 Principal occup	pation / Job title (See Instructions)	9 Employer (See Instructions	s)
Firefigher		Cyfair Fire Department	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
05/31/2023	Cardenas, Carlos	)	\$10.00
	ТХ		
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	
Firefigher		Cyfair Fire Department	HCESD9
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
06/28/2023	Carter, Russell		\$2.00
ľ	Contributor address; City; State; Zip Code		1
	TX	<u> </u>	
	pation / Job title (See Instructions)	Employer (See Instructions	
Firefigher		Cyfair Fire Department	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
06/14/2023	Carter, Russell		\$2.00
	Contributor address; City; State; Zip Code		
	тх		
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	s)
Firefigher		Cyfair Fire Department	
Date	Full name of contributor Out-of-state PAC (ID#:	)	Amount of Contribution (\$)
05/31/2023	Carter, Russell		\$2.00
ŀ	Contributor address; City; State; Zip Code		·
	ТХ		
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	s)
Firefigher		Cyfair Fire Department	HCESD9

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 19/118 Rpt: 22/121	-
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers	s)
	essional Firefighters Political Action Committee		00087022	
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
05/17/2023	Carter, Russell		\$	\$2.00
[	6 Contributor address; City; State; Zip Code		1	
	ТХ			
8 Principal occup	pation / Job title (See Instructions)	9 Employer (See Instructions	\$)	
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
05/03/2023	Carter, Russell			62.00
	Contributor address; City; State; Zip Code			
	ТХ			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	۲ ۶)	
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
04/19/2023	Carter, Russell	/		62.00
	Contributor address; City; State; Zip Code			
	ТХ			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	\$)	
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
04/05/2023	Carter, Russell			\$2.00
	Contributor address; City; State; Zip Code			
	ТХ			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	;)	
Firefigher	1	Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
03/22/2023	Carter, Russell		\$	62.00
	Contributor address; City; State; Zip Code			
	 I			
	ТХ			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	s)	
Firefigher		Cyfair Fire Department I	HCESD9	

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 20/118 Rpt: 23/121
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
	essional Firefighters Political Action Committee		00087022
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)
03/08/2023	Carter, Russell	I	\$2.00
	6 Contributor address; City; State; Zip Code		1
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	ТХ		
-	ipation / Job title (See Instructions)	9 Employer (See Instructions	
Firefigher		Cyfair Fire Department I	HCESD9
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
02/22/2023	Carter, Russell		\$2.00
	Contributor address; City; State; Zip Code		1
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	ТХ		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	
Firefigher		Cyfair Fire Department I	HCESD9
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
02/08/2023	Carter, Russell		\$2.00
	Contributor address; City; State; Zip Code		1
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	ТХ		
	ipation / Job title (See Instructions)	Employer (See Instructions	
Firefigher		Cyfair Fire Department I	HCESD9
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
01/25/2023	Carter, Russell	I	\$2.00
	Contributor address; City; State; Zip Code	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1
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	ТХ		
	pation / Job title (See Instructions)	Employer (See Instructions	
Firefigher		Cyfair Fire Department I	HCESD9
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
01/11/2023	Carter, Russell	I	\$2.00
	Contributor address; City; State; Zip Code		1
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	ТХ		
	ipation / Job title (See Instructions)	Employer (See Instructions	
Firefigher		Cyfair Fire Department I	HCESD9

The Instruc	tion Guide explains how to complete this fe	orm.	1 Total pages Schedule A1: Sch: 21/118 Rpt: 24/121	
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filer	·s)
Cy-Fair Profes	ssional Firefighters Political Action Committee		00087022	
4 Date !	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)	
06/28/2023	Chavez, Alex		\$	\$5.00
	6 Contributor address; City; State; Zip Code			
	ТХ			
	ation / Job title (See Instructions)	9 Employer (See Instructions		
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
06/14/2023	Chavez, Alex		\$	\$5.00
	Contributor address; City; State; Zip Code			
<u> </u>	TX			
	ation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
05/31/2023	Chavez, Alex		\$	\$5.00
	Contributor address; City; State; Zip Code			
	ТХ			
Principal occup	ation / Job title (See Instructions)	Employer (See Instructions	<u></u>	
Firefigher		Cyfair Fire Department I		
			ICLODS	
Data				
Date	Full name of contributor Out-of-state PAC (ID#:	)	Amount of Contribution (\$)	5.00
Date 06/28/2023	Choma, Jonathan	)		\$5.00
		)		\$5.00
	Choma, Jonathan	)		\$5.00
	Choma, Jonathan	)		\$5.00
06/28/2023	Choma, Jonathan Contributor address; City; State; Zip Code	Employer (See Instructions	\$	\$5.00
06/28/2023	Choma, Jonathan Contributor address; City; State; Zip Code	)	\$	\$5.00
06/28/2023	Choma, Jonathan Contributor address; City; State; Zip Code TX Pation / Job title (See Instructions)	)	\$ S) HCESD9	\$5.00
06/28/2023 Principal occup Firefigher	Choma, Jonathan Contributor address; City; State; Zip Code TX Pation / Job title (See Instructions)	)	\$ s) HCESD9 Amount of Contribution (\$)	\$5.00
06/28/2023 Principal occup Firefigher Date	Choma, Jonathan Contributor address; City; State; Zip Code TX Pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Choma, Jonathan	)	\$ s) HCESD9 Amount of Contribution (\$)	
06/28/2023 Principal occup Firefigher Date	Choma, Jonathan Contributor address; City; State; Zip Code TX Pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:	)	\$ s) HCESD9 Amount of Contribution (\$)	
06/28/2023 Principal occup Firefigher Date	Choma, Jonathan Contributor address; City; State; Zip Code TX Pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Choma, Jonathan	)	\$ s) HCESD9 Amount of Contribution (\$)	
06/28/2023 Principal occup Firefigher Date	Choma, Jonathan Contributor address; City; State; Zip Code TX Pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Choma, Jonathan	)	\$ s) HCESD9 Amount of Contribution (\$)	
06/28/2023 Principal occup Firefigher Date 06/14/2023	Choma, Jonathan Contributor address; City; State; Zip Code TX Pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Choma, Jonathan Contributor address; City; State; Zip Code	)	\$ S) HCESD9 Amount of Contribution (\$) \$	

3	Total pages Schedule A1: Sch: 22/118 Rpt: 25/121 Filer ID (Ethics Commission Filers) 00087022 Amount of Contribution (\$)
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) 7	Amount of Contribution (\$)
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ployer (See Instructions)	
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)	Amount of Contribution (\$)
	\$5.00
fair Fire Department HC	
)	Amount of Contribution (\$)
	\$5.00
enloyer (See Instructions)	
)	Amount of Contribution (\$) \$5.00
	\$3.00
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fair Fire Department HC	CESD9
	Amount of Contribution (\$)
,	\$5.00
nployer (See Instructions)	
	fair Fire Department HC

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 23/118 Rpt: 26/121	
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)	.)
	essional Firefighters Political Action Committee		00087022	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)	
03/22/2023	Choma, Jonathan		\$5	5.00
ľ	6 Contributor address; City; State; Zip Code		1	
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	ТХ			
8 Principal occup	pation / Job title (See Instructions)	9 Employer (See Instructions	s)	
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
03/08/2023	Choma, Jonathan			5.00
	Contributor address; City; State; Zip Code		1	
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	тх			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	δ)	
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
02/22/2023	Choma, Jonathan			5.00
	Contributor address; City; State; Zip Code		1	-
	тх			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	5)	
Firefigher		Cyfair Fire Department	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
02/08/2023	Choma, Jonathan			5.00
	Contributor address; City; State; Zip Code		1	-
	I			
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Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	Σ	
Firefigher		Cyfair Fire Department I		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
01/25/2023	Choma, Jonathan			5.00
	Contributor address; City; State; Zip Code		1	
	ТХ			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	<u>ι</u> δ)	
Firefigher	•	Cyfair Fire Department		
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The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 24/118 Rpt: 27/121	
2 FILER NAME			3 Filer ID (Ethics Commission Filers	s)
	essional Firefighters Political Action Committee		00087022	-,
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
01/11/2023	Choma, Jonathan			\$5.00
	6 Contributor address; City; State; Zip Code		4	
	тх			
8 Principal occur	pation / Job title (See Instructions)	9 Employer (See Instructions	\$)	
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
06/28/2023	Christiansen, Blaine		\$1	L0.00
	Contributor address; City; State; Zip Code		1	
	ТХ			
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions	\$)	
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
06/14/2023	Christiansen, Blaine		\$1	L0.00
	Contributor address; City; State; Zip Code		1	
	ТХ			
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions	\$)	
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
05/31/2023	Christiansen, Blaine		\$1	L0.00
	Contributor address; City; State; Zip Code		1	
	ТХ			
	pation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
06/28/2023	Derden, Ashely		\$1	L0.00
	Contributor address; City; State; Zip Code		1	
	ТХ			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)	
Firefigher		Cyfair Fire Department I	HCESD9	

The Instruc	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 25/118 Rpt: 28/121	
2 FILER NAME Cy-Fair Profe	essional Firefighters Political Action Committee		3 Filer ID (Ethics Commission File 00087022	ers)
4 Date 06/14/2023	<ul> <li>5 Full name of contributor out-of-state PAC (ID#: Derden, Ashely</li> <li>6 Contributor address; City; State; Zip Code</li> </ul>	)	7 Amount of Contribution (\$)	\$10.00
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8 Principal occu Firefigher	pation / Job title (See Instructions)	9 Employer (See Instructions Cyfair Fire Department H		
Date 05/31/2023	Full name of contributor out-of-state PAC (ID#: Derden, Ashely Contributor address; City; State; Zip Code TX	)	Amount of Contribution (\$)	\$10.00
Principal occu Firefigher	pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department H	,	
Date 05/17/2023	Full name of contributor out-of-state PAC (ID#:_ Derden, Ashely Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) \$	\$10.00
Principal occu Firefigher	TX pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department H		
Date 05/03/2023	Full name of contributor out-of-state PAC (ID#: Derden, Ashely Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) \$	\$10.00
Principal occu Firefigher	TX pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department H		
Date 04/19/2023	Full name of contributor       out-of-state PAC (ID#:_         Derden, Ashely       out-of-state PAC (ID#:_         Contributor address;       City; State; Zip Code	)	Amount of Contribution (\$)	\$10.00
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plete this form.       1 Total pages Schedule A1:         Sch: 26/118 Rpt: 29/121
<b>3</b> Filer ID (Ethics Commission Filers)
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state PAC (ID#:) 7 Amount of Contribution (\$)
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9 Employer (See Instructions)
Cyfair Fire Department HCESD9
state PAC (ID#:) Amount of Contribution (\$)
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Cyfair Fire Department HCESD9
state PAC (ID#:) Amount of Contribution (\$)
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state PAC (ID#:) Amount of Contribution (\$)
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Employer (See Instructions)
Cyfair Fire Department HCESD9
state PAC (ID#:) Amount of Contribution (\$)
\$10.00
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The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 27/118 Rpt: 30/121	
2 FILER NAME			3 Filer ID (Ethics Commission File	lers)
	essional Firefighters Political Action Committee		00087022	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)	
05/31/2023	Diaz, Roberto			\$10.00
ŀ	6 Contributor address; City; State; Zip Code			
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	pation / Job title (See Instructions)	9 Employer (See Instructions		
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
05/17/2023	Diaz, Roberto			\$10.00
ľ	Contributor address; City; State; Zip Code		1	
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	ТХ			
	pation / Job title (See Instructions)	Employer (See Instructions	,	
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
05/03/2023	Diaz, Roberto		5	\$10.00
ľ	Contributor address; City; State; Zip Code			
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	pation / Job title (See Instructions)	Employer (See Instructions	,	
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
04/19/2023	Diaz, Roberto			\$10.00
	Contributor address; City; State; Zip Code		1	
	тх			
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ۱	
Firefigher		Cyfair Fire Department I		
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	
04/05/2023	Diaz, Roberto	/		\$10.00
	Contributor address; City; State; Zip Code			Φ10.00
	Culturbulor address, City, State, Lip Code			
	тх			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> \$)	
Firefigher	•	Cyfair Fire Department I		

The Instruc	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 28/118 Rpt: 31/121	
2 FILER NAME Cy-Fair Profe	essional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filer 00087022	rs)
4 Date 03/22/2023	<ul> <li>5 Full name of contributor out-of-state PAC (ID#: Diaz, Roberto</li> <li>6 Contributor address; City; State; Zip Code</li> </ul>	)	7 Amount of Contribution (\$) \$.	\$10.00
	тх			
8 Principal occu Firefigher	pation / Job title (See Instructions)	9 Employer (See Instructions Cyfair Fire Department H		
Date 03/08/2023	Full name of contributor out-of-state PAC (ID#: Diaz, Roberto Contributor address; City; State; Zip Code TX		Amount of Contribution (\$) \$.	510.00
Principal occu Firefigher	pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department F	,	
Date 06/28/2023	Full name of contributor out-of-state PAC (ID#: Dornak, Blake Contributor address; City; State; Zip Code	)	Amount of Contribution (\$)	520.00
Principal occu Firefigher	TX pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department H		
Date 06/14/2023	Full name of contributor out-of-state PAC (ID#: Dornak, Blake Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) \$	620.00
Principal occu Firefigher	TX pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department H		
Date 05/31/2023	Full name of contributor out-of-state PAC (ID#: Dornak, Blake Contributor address; City; State; Zip Code	)	Amount of Contribution (\$)	520.0C
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The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 29/118 Rpt: 32/121
2 FILER NAME Cy-Fair Profe	essional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
05/17/2023	<ul> <li>5 Full name of contributor out-of-state PAC (ID#: Dornak, Blake</li> <li>6 Contributor address; City; State; Zip Code</li> </ul>		7 Amount of Contribution (\$) 
D. D. insigal acqu	TX		
8 Principal occup Firefigher	pation / Job title (See Instructions)	9 Employer (See Instructions Cyfair Fire Department H	
Date 05/03/2023	Full name of contributor out-of-state PAC (ID#: Dornak, Blake Contributor address; City; State; Zip Code TX	)	Amount of Contribution (\$) \$20.0
Principal occup Firefigher	pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I	,
Date 04/19/2023	Full name of contributor out-of-state PAC (ID#: Dornak, Blake Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) 
Principal occup Firefigher	TX pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I	,
Date 04/05/2023	Full name of contributor out-of-state PAC (ID#: Dornak, Blake Contributor address; City; State; Zip Code		Amount of Contribution (\$) 
Principal occup Firefigher	TX pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I	
Date 03/22/2023	Full name of contributor out-of-state PAC (ID#: Dornak, Blake Contributor address; City; State; Zip Code TX	)	Amount of Contribution (\$) \$20.0
Principal occup Firefigher	I pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I	

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 30/118 Rpt: 33/121	
2 FILER NAME			3 Filer ID (Ethics Commission Fi	ilers)
	essional Firefighters Political Action Committee		00087022	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)	
03/08/2023	Dornak, Blake			\$20.00
ľ	6 Contributor address; City; State; Zip Code			
	тх	-		
	pation / Job title (See Instructions)	9 Employer (See Instructions		
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
06/28/2023	Duckworth, Tyler			\$10.00
	Contributor address; City; State; Zip Code			
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	pation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department I	+CESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
06/14/2023	Duckworth, Tyler			\$10.00
	Contributor address; City; State; Zip Code			
	TX		-	
	pation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department I		
Date	Full name of contributor 🛛 🗌 out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
			.,	
05/31/2023	Duckworth, Tyler		.,	\$10.00
05/31/2023	Duckworth, Tyler Contributor address; City; State; Zip Code		.,	\$10.00
05/31/2023	-		.,	\$10.00
05/31/2023	Contributor address; City; State; Zip Code		.,	\$10.00
	Contributor address; City; State; Zip Code	Employer (See Instructions		\$10.00
Principal occur	Contributor address; City; State; Zip Code	Employer (See Instructions	;)	\$10.00
Principal occup Firefigher	Contributor address; City; State; Zip Code TX pation / Job title (See Instructions)	Cyfair Fire Department I	s) HCESD9	\$10.00
Principal occur Firefigher Date	Contributor address; City; State; Zip Code TX Dation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_	Cyfair Fire Department I	;)	
Principal occup Firefigher	Contributor address; City; State; Zip Code TX pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Elaffouri, Zachariah	Cyfair Fire Department I	s) HCESD9	
Principal occur Firefigher Date	Contributor address; City; State; Zip Code TX Dation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_	Cyfair Fire Department I	s) HCESD9	
Principal occur Firefigher Date	Contributor address; City; State; Zip Code TX pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Elaffouri, Zachariah	Cyfair Fire Department I	s) HCESD9	
Principal occur Firefigher Date	Contributor address; City; State; Zip Code TX Dation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Elaffouri, Zachariah Contributor address; City; State; Zip Code	Cyfair Fire Department I	s) HCESD9	
Principal occur Firefigher Date 06/28/2023	Contributor address; City; State; Zip Code TX Dation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Elaffouri, Zachariah Contributor address; City; State; Zip Code TX	Cyfair Fire Department I	S) HCESD9 Amount of Contribution (\$)	
Principal occur Firefigher Date 06/28/2023	Contributor address; City; State; Zip Code TX Dation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Elaffouri, Zachariah Contributor address; City; State; Zip Code	Cyfair Fire Department I	e) HCESD9 Amount of Contribution (\$)	\$10.00

The Instru	ction Guide explains how to complete this f	iorm.	1 Total pages Schedule A1: Sch: 31/118 Rpt: 34/121	
2 FILER NAME			3 Filer ID (Ethics Commission File	ers)
	essional Firefighters Political Action Committee		00087022	
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
06/28/2023	Fillmore, Christopher		\$	\$20.00
	6 Contributor address; City; State; Zip Code		•	
	ТХ			
	pation / Job title (See Instructions)	9 Employer (See Instructions		
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
06/14/2023	Fillmore, Christopher		\$	\$20.00
	Contributor address; City; State; Zip Code			
	ТХ			
	pation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
05/31/2023	Fillmore, Christopher		\$	\$20.00
	Contributor address; City; State; Zip Code			
	ТХ			
	pation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
05/17/2023	Fillmore, Christopher		\$	\$20.00
	Contributor address; City; State; Zip Code			
	тх			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
Firefigher		Cyfair Fire Department I		
Date 05/03/2023	Full name of contributor out-of-state PAC (ID#: Fillmore, Christopher	)	Amount of Contribution (\$)	\$20.00
03/03/2023	·		•	20.00
	Contributor address; City; State; Zip Code			
	тх			
Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions	<b> </b>	
Firefigher		Cyfair Fire Department I		

				. <u> </u>
The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 32/118 Rpt: 35/121	
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filer	rs)
	essional Firefighters Political Action Committee		00087022	
4 Date	5 Full name of contributor Out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)	
04/19/2023	Fillmore, Christopher			20.00
	6 Contributor address; City; State; Zip Code		1	
	ТХ			
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)	
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
04/05/2023	Fillmore, Christopher			20.00
	Contributor address; City; State; Zip Code			
	тх			
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions	) ;)	
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
03/22/2023	Fillmore, Christopher			20.00
	Contributor address; City; State; Zip Code			
	тх			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	3)	
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
03/08/2023	Fillmore, Christopher		\$2	20.00
	Contributor address; City; State; Zip Code			
	ТХ			
	pation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
02/22/2023	Fillmore, Christopher		\$2	20.00
	Contributor address; City; State; Zip Code			
	ТХ			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department I	HCESD9	

The Instruc	tion Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 33/118 Rpt: 36/121	
2 FILER NAME			3 Filer ID (Ethics Commission Filer	rs)
	essional Firefighters Political Action Committee		00087022	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)	
02/08/2023	Fillmore, Christopher			20.00
	6 Contributor address; City; State; Zip Code			
	ТХ			
	pation / Job title (See Instructions)	9 Employer (See Instructions		
Firefigher		Cyfair Fire Department H	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
01/25/2023	Fillmore, Christopher		\$2	20.00
	Contributor address; City; State; Zip Code			
	ТХ			
	pation / Job title (See Instructions)	Employer (See Instructions	,	
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
01/11/2023	Fillmore, Christopher		\$2	20.00
	Contributor address; City; State; Zip Code			
	ТХ			
	pation / Job title (See Instructions)	Employer (See Instructions		
Firefigher				
		Cyfair Fire Department I	ACESD9	
Date	Full name of contributor out-of-state PAC (ID#:_	Cyfair Fire Department I	Amount of Contribution (\$)	
-	Full name of contributor out-of-state PAC (ID#:_	Cyfair Fire Department   )	Amount of Contribution (\$)	\$5.00
Date		Cyfair Fire Department I	Amount of Contribution (\$)	\$5.00
Date	Flannelly, Connor	Cyfair Fire Department I	Amount of Contribution (\$)	\$5.00
Date	Flannelly, Connor Contributor address; City; State; Zip Code	Cyfair Fire Department I	Amount of Contribution (\$)	\$5.00
Date 06/28/2023	Flannelly, Connor Contributor address; City; State; Zip Code	)	Amount of Contribution (\$)	\$5.00
Date 06/28/2023 Principal occup	Flannelly, Connor Contributor address; City; State; Zip Code	)	Amount of Contribution (\$)	\$5.00
Date 06/28/2023 Principal occup Firefigher	Flannelly, Connor Contributor address; City; State; Zip Code TX pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I	Amount of Contribution (\$) S HCESD9	\$5.00
Date 06/28/2023 Principal occup Firefigher Date	Flannelly, Connor Contributor address; City; State; Zip Code TX Dation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:	Employer (See Instructions Cyfair Fire Department I	Amount of Contribution (\$) S) HCESD9 Amount of Contribution (\$)	
Date 06/28/2023 Principal occup Firefigher	Flannelly, Connor Contributor address; City; State; Zip Code TX Dation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Flannelly, Connor	Employer (See Instructions Cyfair Fire Department I	Amount of Contribution (\$) S) HCESD9 Amount of Contribution (\$)	\$5.00
Date 06/28/2023 Principal occup Firefigher Date	Flannelly, Connor Contributor address; City; State; Zip Code TX Dation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:	Employer (See Instructions Cyfair Fire Department I	Amount of Contribution (\$) S) HCESD9 Amount of Contribution (\$)	
Date 06/28/2023 Principal occup Firefigher Date	Flannelly, Connor Contributor address; City; State; Zip Code TX Dation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Flannelly, Connor	Employer (See Instructions Cyfair Fire Department I	Amount of Contribution (\$) S) HCESD9 Amount of Contribution (\$)	
Date 06/28/2023 Principal occup Firefigher Date	Flannelly, Connor Contributor address; City; State; Zip Code TX Dation / Job title (See Instructions) Full name of contributor	Employer (See Instructions Cyfair Fire Department I	Amount of Contribution (\$) S) HCESD9 Amount of Contribution (\$)	
Date 06/28/2023 Principal occur Firefigher Date 06/14/2023	Flannelly, Connor Contributor address; City; State; Zip Code TX Dation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Flannelly, Connor Contributor address; City; State; Zip Code TX	Employer (See Instructions Cyfair Fire Department H	Amount of Contribution (\$) 5) HCESD9 Amount of Contribution (\$)	
Date 06/28/2023 Principal occur Firefigher Date 06/14/2023	Flannelly, Connor Contributor address; City; State; Zip Code TX Dation / Job title (See Instructions) Full name of contributor	Employer (See Instructions Cyfair Fire Department I	Amount of Contribution (\$) S) HCESD9 Amount of Contribution (\$) S)	

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 34/118 Rpt: 37/121	
2 FILER NAME			3 Filer ID (Ethics Commission File	ers)
	essional Firefighters Political Action Committee		00087022	,,,,
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
05/31/2023	Flannelly, Connor			\$5.00
ľ	6 Contributor address; City; State; Zip Code			
	тх			
	pation / Job title (See Instructions)	9 Employer (See Instructions		
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
05/17/2023	Flannelly, Connor			\$5.00
ľ	Contributor address; City; State; Zip Code			
	ТХ			
	pation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
05/03/2023	Flannelly, Connor			\$5.00
ľ	Contributor address; City; State; Zip Code			
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	TX			
	TX pation / Job title (See Instructions)	Employer (See Instructions		
Firefigher	pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I	HCESD9	
Firefigher Date	Dation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_		HCESD9 Amount of Contribution (\$)	
Firefigher	Dation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Flannelly, Connor		HCESD9 Amount of Contribution (\$)	\$5.00
Firefigher Date	Dation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_		HCESD9 Amount of Contribution (\$)	\$5.00
Firefigher Date	Dation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Flannelly, Connor		HCESD9 Amount of Contribution (\$)	\$5.00
Firefigher Date	Dation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Flannelly, Connor		HCESD9 Amount of Contribution (\$)	\$5.00
Firefigher Date 04/19/2023	Full name of contributor out-of-state PAC (ID#:_ Flannelly, Connor Contributor address; City; State; Zip Code		HCESD9 Amount of Contribution (\$)	\$5.00
Firefigher Date 04/19/2023	Dation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Flannelly, Connor Contributor address; City; State; Zip Code TX	Cyfair Fire Department I	HCESD9 Amount of Contribution (\$)	\$5.00
Firefigher Date 04/19/2023 Principal occup	Dation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Flannelly, Connor Contributor address; City; State; Zip Code TX	Cyfair Fire Department H	HCESD9 Amount of Contribution (\$)	\$5.00
Firefigher Date 04/19/2023 Principal occup Firefigher	Dation / Job title (See Instructions)         Full name of contributor       out-of-state PAC (ID#:_         Flannelly, Connor         Contributor address; City; State; Zip Code         TX         Dation / Job title (See Instructions)	Cyfair Fire Department H	HCESD9 Amount of Contribution (\$) (\$) HCESD9 Amount of Contribution (\$)	\$5.00
Firefigher Date 04/19/2023 Principal occup Firefigher Date	Dation / Job title (See Instructions)         Full name of contributor       out-of-state PAC (ID#:_         Flannelly, Connor         Contributor address; City; State; Zip Code         TX         Dation / Job title (See Instructions)         Full name of contributor         Out-of-state PAC (ID#:_	Cyfair Fire Department H	HCESD9 Amount of Contribution (\$) (\$) HCESD9 Amount of Contribution (\$)	
Firefigher Date 04/19/2023 Principal occup Firefigher Date	Dation / Job title (See Instructions)         Full name of contributor       out-of-state PAC (ID#:_         Flannelly, Connor         Contributor address; City; State; Zip Code         TX         Dation / Job title (See Instructions)         Full name of contributor         Out-of-state PAC (ID#:_         Full name of contributor         Full name of contributor         Full name of contributor         Full name of contributor	Cyfair Fire Department H	HCESD9 Amount of Contribution (\$) (\$) HCESD9 Amount of Contribution (\$)	
Firefigher Date 04/19/2023 Principal occup Firefigher Date	Dation / Job title (See Instructions)         Full name of contributor       out-of-state PAC (ID#:_         Flannelly, Connor         Contributor address; City; State; Zip Code         TX         Dation / Job title (See Instructions)         Full name of contributor         Out-of-state PAC (ID#:_         Full name of contributor         Full name of contributor         Full name of contributor         Full name of contributor	Cyfair Fire Department H	HCESD9 Amount of Contribution (\$) (\$) HCESD9 Amount of Contribution (\$)	
Firefigher Date 04/19/2023 Principal occup Firefigher Date	Dation / Job title (See Instructions)         Full name of contributor       out-of-state PAC (ID#:_         Flannelly, Connor         Contributor address; City; State; Zip Code         TX         Dation / Job title (See Instructions)         Full name of contributor         Out-of-state PAC (ID#:_         Full name of contributor         Full name of contributor         Full name of contributor         Full name of contributor	Cyfair Fire Department H	HCESD9 Amount of Contribution (\$) (\$) HCESD9 Amount of Contribution (\$)	
Firefigher Date 04/19/2023 Principal occur Firefigher Date 04/05/2023	Dation / Job title (See Instructions)         Full name of contributor       out-of-state PAC (ID#:_         Flannelly, Connor       Contributor address; City; State; Zip Code         TX       Dation / Job title (See Instructions)         Full name of contributor       out-of-state PAC (ID#:_         Full name of contributor       out-of-state PAC (ID#:_         Flannelly, Connor       Contributor address; City; State; Zip Code	Cyfair Fire Department H	HCESD9 Amount of Contribution (\$) S) HCESD9 Amount of Contribution (\$)	

The Instruc	ction Guide explains how to complete this f	iorm.	1 Total pages Schedule A1: Sch: 35/118 Rpt: 38/121
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
	essional Firefighters Political Action Committee		00087022
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)
03/22/2023	Flannelly, Connor		\$5.00
	6 Contributor address; City; State; Zip Code		1
	ТХ		
• Drincinal occu	IX Ipation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u>
Firefigher		Cyfair Fire Department	
Date 03/08/2023	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$) \$5.00
03/06/2023	Flannelly, Connor		\$5.00
	Contributor address; City; State; Zip Code		
	тх		
Princinal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u>
Firefigher		Cyfair Fire Department	
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)
Dale 02/22/2023	Full name of contributor out-of-state PAC (ID#: Flannelly, Connor	)	Amount of Contribution (\$) \$5.00
0212212025			ψο.ου
	Contributor address; City; State; Zip Code		
	тх		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)
Firefigher		Cyfair Fire Department	HCESD9
Date	Full name of contributor out-of-state PAC (ID#:_	<u> </u>	Amount of Contribution (\$)
02/08/2023	Flannelly, Connor		\$5.00
	Contributor address; City; State; Zip Code		4
	ТХ		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)
Firefigher		Cyfair Fire Department	HCESD9
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
01/25/2023	Flannelly, Connor		\$5.00
	Contributor address; City; State; Zip Code		
	ТХ		
	upation / Job title (See Instructions)	Employer (See Instructions	
Firefigher		Cyfair Fire Department	HCESD9

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 36/118 Rpt: 39/121	
2 FILER NAME			3 Filer ID (Ethics Commission Filer	lers)
	essional Firefighters Political Action Committee		00087022	
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
01/11/2023	Flannelly, Connor			\$5.00
ľ	6 Contributor address; City; State; Zip Code			
	ТХ			
	pation / Job title (See Instructions)	9 Employer (See Instructions		
Firefigher		Cyfair Fire Department	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
06/28/2023	Fromholz, Mitchell			\$15.00
ĺ	Contributor address; City; State; Zip Code			
	TX			
	pation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
06/14/2023	Fromholz, Mitchell			\$15.00
	Contributor address; City; State; Zip Code			
	TV			
Principal occur	TX	Employer (See Instructions	A	
	TX pation / Job title (See Instructions)	Employer (See Instructions		
Firefigher	pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department	HCESD9	
Firefigher Date	Dation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_		HCESD9 Amount of Contribution (\$)	÷45.00
Firefigher	Dation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Fromholz, Mitchell		HCESD9 Amount of Contribution (\$)	\$15.00
Firefigher Date	Dation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_		HCESD9 Amount of Contribution (\$)	\$15.00
Firefigher Date	Dation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Fromholz, Mitchell		HCESD9 Amount of Contribution (\$)	\$15.00
Firefigher Date	Dation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Fromholz, Mitchell		HCESD9 Amount of Contribution (\$)	\$15.00
Firefigher Date 05/31/2023	Dation / Job title (See Instructions)         Full name of contributor       out-of-state PAC (ID#:_         Fromholz, Mitchell         Contributor address; City; State; Zip Code         TX	Cyfair Fire Department	HCESD9 Amount of Contribution (\$)	\$15.00
Firefigher Date 05/31/2023	Full name of contributor out-of-state PAC (ID#:_ Fromholz, Mitchell Contributor address; City; State; Zip Code		HCESD9 Amount of Contribution (\$)	\$15.00
Firefigher Date 05/31/2023 Principal occup Firefigher	Dation / Job title (See Instructions)         Full name of contributor       out-of-state PAC (ID#:_         Fromholz, Mitchell         Contributor address; City; State; Zip Code         TX         Dation / Job title (See Instructions)	Cyfair Fire Department	HCESD9 Amount of Contribution (\$)	\$15.00
Firefigher Date 05/31/2023 Principal occup	Dation / Job title (See Instructions)         Full name of contributor       out-of-state PAC (ID#:_         Fromholz, Mitchell         Contributor address; City; State; Zip Code         TX         Dation / Job title (See Instructions)         Full name of contributor         Out-of-state PAC (ID#:_	Cyfair Fire Department	HCESD9 Amount of Contribution (\$)	\$15.00
Firefigher Date 05/31/2023 Principal occup Firefigher Date	Dation / Job title (See Instructions)         Full name of contributor       out-of-state PAC (ID#:_         Fromholz, Mitchell         Contributor address; City; State; Zip Code         TX         Dation / Job title (See Instructions)         Full name of contributor         Garcia Carabantes, Marylin	Cyfair Fire Department	HCESD9 Amount of Contribution (\$)	
Firefigher Date 05/31/2023 Principal occup Firefigher Date	Dation / Job title (See Instructions)         Full name of contributor       out-of-state PAC (ID#:_         Fromholz, Mitchell         Contributor address; City; State; Zip Code         TX         Dation / Job title (See Instructions)         Full name of contributor         Out-of-state PAC (ID#:_	Cyfair Fire Department	HCESD9 Amount of Contribution (\$)	
Firefigher Date 05/31/2023 Principal occup Firefigher Date	Dation / Job title (See Instructions)         Full name of contributor       out-of-state PAC (ID#:_         Fromholz, Mitchell         Contributor address; City; State; Zip Code         TX         Dation / Job title (See Instructions)         Full name of contributor         Garcia Carabantes, Marylin	Cyfair Fire Department	HCESD9 Amount of Contribution (\$)	
Firefigher Date 05/31/2023 Principal occup Firefigher Date	Dation / Job title (See Instructions)         Full name of contributor       out-of-state PAC (ID#:_         Fromholz, Mitchell         Contributor address; City; State; Zip Code         TX         Dation / Job title (See Instructions)         Full name of contributor         Garcia Carabantes, Marylin	Cyfair Fire Department	HCESD9 Amount of Contribution (\$)	
Firefigher Date 05/31/2023 Principal occur Firefigher Date 06/28/2023	Dation / Job title (See Instructions)         Full name of contributor       out-of-state PAC (ID#:_         Fromholz, Mitchell         Contributor address; City; State; Zip Code         TX         Dation / Job title (See Instructions)         Full name of contributor         Out-of-state PAC (ID#:_         Garcia Carabantes, Marylin         Contributor address; City; State; Zip Code	Cyfair Fire Department	HCESD9 Amount of Contribution (\$)  S) HCESD9 Amount of Contribution (\$)	

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 37/118 Rpt: 40/121	
2 FILER NAME	essional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Fi 00087022	ilers)
	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
06/14/2023	Garcia Carabantes, Marylin	,		\$5.00
	6 Contributor address; City; State; Zip Code			
	тх			
	pation / Job title (See Instructions)	9 Employer (See Instructions		
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	_
05/31/2023	Garcia Carabantes, Marylin			\$5.00
	Contributor address; City; State; Zip Code			
	ТХ			
	pation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor Out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
05/17/2023	Garcia Carabantes, Marylin			\$5.00
1	Contributor address; City; State; Zip Code			
	ТХ			
	TX pation / Job title (See Instructions)	Employer (See Instructions	·	
Principal occur Firefigher		Employer (See Instructions Cyfair Fire Department I	·	
			·	
Firefigher	pation / Job title (See Instructions)		HCESD9	\$5.00
Firefigher Date	Dation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_		HCESD9	\$5.00
Firefigher Date 05/03/2023	Full name of contributor out-of-state PAC (ID#:_ Garcia Carabantes, Marylin Contributor address; City; State; Zip Code	Cyfair Fire Department   )	HCESD9 Amount of Contribution (\$)	\$5.00
Firefigher Date 05/03/2023	Full name of contributor out-of-state PAC (ID#:_ Garcia Carabantes, Marylin Contributor address; City; State; Zip Code		HCESD9 Amount of Contribution (\$)	\$5.00
Firefigher Date 05/03/2023 Principal occur	Full name of contributor out-of-state PAC (ID#:_ Garcia Carabantes, Marylin Contributor address; City; State; Zip Code	Cyfair Fire Department I	HCESD9 Amount of Contribution (\$)	\$5.00
Firefigher Date 05/03/2023 Principal occur Firefigher	Dation / Job title (See Instructions)         Full name of contributor       out-of-state PAC (ID#:_ Garcia Carabantes, Marylin         Contributor address; City; State; Zip Code         TX         Dation / Job title (See Instructions)	Cyfair Fire Department I	HCESD9 Amount of Contribution (\$)	\$5.00
Firefigher Date 05/03/2023 Principal occur Firefigher Date	Dation / Job title (See Instructions)         Full name of contributor       out-of-state PAC (ID#:_ Garcia Carabantes, Marylin         Contributor address;       City; State; Zip Code         TX       Dation / Job title (See Instructions)         Full name of contributor       out-of-state PAC (ID#:_	Cyfair Fire Department I	HCESD9 Amount of Contribution (\$)	
Firefigher Date 05/03/2023 Principal occur Firefigher Date	Dation / Job title (See Instructions)         Full name of contributor       out-of-state PAC (ID#:_ Garcia Carabantes, Marylin         Contributor address; City; State; Zip Code         TX         Dation / Job title (See Instructions)         Full name of contributor         Out-of-state PAC (ID#:_ Garcia Carabantes, Marylin	Cyfair Fire Department I	HCESD9 Amount of Contribution (\$)	
Firefigher Date 05/03/2023 Principal occur Firefigher Date 04/19/2023	Dation / Job title (See Instructions)         Full name of contributor       out-of-state PAC (ID#:_ Garcia Carabantes, Marylin         Contributor address; City; State; Zip Code         TX         Dation / Job title (See Instructions)         Full name of contributor       out-of-state PAC (ID#:_ Garcia Carabantes, Marylin         Contributor address; City; State; Zip Code         Contributor address; City; State; Zip Code	Cyfair Fire Department I	HCESD9 Amount of Contribution (\$) S) HCESD9 Amount of Contribution (\$)	

The Instruc	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 38/118 Rpt: 41/121
2 FILER NAME Cy-Fair Profe	essional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
04/05/2023	<ul> <li>5 Full name of contributor out-of-state PAC (ID#:Garcia Carabantes, Marylin</li> <li>6 Contributor address; City; State; Zip Code</li> </ul>		7 Amount of Contribution (\$) \$5.0
	TX	C Eventer (See Instructions	<u> </u>
Firefigher	pation / Job title (See Instructions)	9 Employer (See Instructions Cyfair Fire Department I	
Date 03/22/2023	Garcia Carabantes, Marylin	)	Amount of Contribution (\$) \$5.0
Principal occup Firefigher	pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I	
Date 06/28/2023	Full name of contributor out-of-state PAC (ID#: Gore, Caleb Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$5.0
	TX pation / Job title (See Instructions)	Employer (See Instructions	
Firefigher		Cyfair Fire Department I	
Date			
06/14/2023	Full name of contributor out-of-state PAC (ID#: Gore, Caleb Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$5.0
	Gore, Caleb Contributor address; City; State; Zip Code		\$5.0
	Gore, Caleb Contributor address; City; State; Zip Code		\$5.0 \$5.0
Principal occur	Gore, Caleb Contributor address; City; State; Zip Code TX Dation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Gore, Caleb Contributor address; City; State; Zip Code	Employer (See Instructions	\$5.0 \$5.0
Principal occur Firefigher Date 05/31/2023	Gore, Caleb Contributor address; City; State; Zip Code TX Dation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Gore, Caleb	Employer (See Instructions	\$5.0 s) HCESD9 Amount of Contribution (\$) \$5.0

<ul> <li>1 Total pages Schedule A1: Sch: 39/118 Rpt: 42/121</li> <li>3 Filer ID (Ethics Commission Filers) 00087022</li> </ul>
) <b>7</b> Amount of Contribution (\$)
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The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 40/118 Rpt: 43/121	
2 FILER NAME			3 Filer ID (Ethics Commission File	ers)
	essional Firefighters Political Action Committee		00087022	
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
04/19/2023	Griffin, Gregg		\$	610.00
	6 Contributor address; City; State; Zip Code			
	TX			
	pation / Job title (See Instructions)	9 Employer (See Instructions		
Firefigher		Cyfair Fire Department		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
04/05/2023	Griffin, Gregg		\$	\$10.00
	Contributor address; City; State; Zip Code			
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Dringing oggu	upation / Job title (See Instructions)	Employer (See Instructions		
Firefigher	pation / Job title (See Instructions)	Cyfair Fire Department		
_				
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	10.00
03/22/2023			\$	610.00
	Contributor address; City; State; Zip Code			
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Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
Firefigher		Cyfair Fire Department	·	
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	
06/28/2023	Gutierrez, Rafael	)		\$10.00
00/20/2020	Contributor address; City; State; Zip Code			10.00
	Contributor address, City, State, Zip Code			
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Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)	
Firefigher		Cyfair Fire Department	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
06/14/2023	Gutierrez, Rafael			\$10.00
	Contributor address; City; State; Zip Code			
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Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	3)	
Firefigher		Cyfair Fire Department	HCESD9	

The Instruc	tion Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 41/118 Rpt: 44/121	
2 FILER NAME			3 Filer ID (Ethics Commission Fi	ilers)
	essional Firefighters Political Action Committee		00087022	
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
05/31/2023	Gutierrez, Rafael			\$10.00
ľ	6 Contributor address; City; State; Zip Code			
	ТХ			
	pation / Job title (See Instructions)	9 Employer (See Instructions		
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
05/17/2023	Gutierrez, Rafael			\$10.00
ľ	Contributor address; City; State; Zip Code			
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	pation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
05/03/2023	Gutierrez, Rafael			\$10.00
ľ	Contributor address; City; State; Zip Code			
	TX	l <u>.</u>		
	pation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department I		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	_
04/19/2023	Gutierrez, Rafael			\$10.00
	Contributor address; City; State; Zip Code			
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Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
Firefigher	,	Cyfair Fire Department I		
Date	Full name of contributor Out-of-state PAC (ID#:_		Amount of Contribution (\$)	
04/05/2023	Gutierrez, Rafael	/		\$10.00
	Contributor address; City; State; Zip Code			<b>410.0</b> 0
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Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> ۶)	
Firefigher	<b>`</b>	Cyfair Fire Department I		
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Cy-Fair Professional Firefighters Political Action Committee       00087022         4       Date       5       Full name of contributor       out-of-state PAC (ID#	Sch: 42/118 Rpt: 45/121	nstruction Guide explains how to complete this fo
03/22/2023       Gutierrez, Rafael       s         6       Contributor address; City; State; Zip Code       rx         7       TX       principal occupation / Job title (See Instructions)       s         Firefigher       Full name of contributor       out-of-state PAC (ID#	3 Filer ID (Ethics Commission Filers)	
6       Contributor address; City; State; Zip Code         Tx       Tx         8       Principal occupation / Job title (See Instructions)       9       Employer (See Instructions)         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         03/08/2023       Gutierrez, Rafael	) <b>7</b> Amount of Contribution (\$) \$10.00	2023 Gutierrez, Rafael
Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         03/08/2023       Gutierrez, Rafael		6 Contributor address; City; State; Zip Code
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         03/08/2023       Gutierrez, Rafael       \$         Contributor address; City; State; Zip Code       TX         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Contributor         Date       Full name of contributor         02/22/2023       Gutierrez, Rafael         Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Tx       Principal occupation / Job title (See Instructions)         Firefigher       Full name of contributor         O2/22/2023       Gutierrez, Rafael         Tx       Tx         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Tx         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Tx         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:		
03/08/2023       Gutierrez, Rafael		
Contributor address; City; State; Zip Code       TX         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:		
Contributor address; City; State; Zip Code       TX         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:)         O2/22/2023       Gutierrez, Rafael       Amount of Contribution (\$)         Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Tx       Tx         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Tx       Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:)         O2/08/2023       Full name of contributor       out-of-state PAC (ID#:)         O2/08/2023       Full name of contributor       out-of-state PAC (ID#:)         Amount of Contribution (\$)       Amount of Contribution (\$)       \$         O2/08/2023       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)	\$10.00	
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:)         02/22/2023       Gutierrez, Rafael       Amount of Contribution (\$)         Contributor address; City; State; Zip Code       TX       Fincipal occupation / Job title (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Employer (See Instructions)         Firefigher       Cyfair Fire Department HCESD9       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         02/08/2023       Gutierrez, Rafael       Sutterrez, Rafael       Sutterrez		Contributor address; City; State; Zip Code
Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         02/22/2023       Gutierrez, Rafael       Contributor address; City; State; Zip Code       Amount of Contribution (\$)         TX       TX       Employer (See Instructions)       Employer (See Instructions)         Firefigher       Full name of contributor       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:)         02/08/2023       Gutierrez, Rafael       Amount of Contribution (\$)	ver (Cas Instructions)	
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         02/22/2023       Gutierrez, Rafael       \$         Contributor address; City; State; Zip Code       \$         TX       TX         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:)         02/08/2023       Gutierrez, Rafael       \$		
02/22/2023       Gutierrez, Rafael       \$         Contributor address; City; State; Zip Code       \$         TX       TX         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor out-of-state PAC (ID#:)         Amount of Contribution (\$)       \$         02/08/2023       Gutierrez, Rafael	Fire Department HCESD9	her
Contributor address; City; State; Zip Code         TX         Principal occupation / Job title (See Instructions)         Firefigher         Date         Full name of contributor         02/08/2023         Gutierrez, Rafael	) Amount of Contribution (\$)	Full name of contributor out-of-state PAC (ID#:
Contributor address; City; State; Zip Code         TX         Principal occupation / Job title (See Instructions)         Firefigher         Employer (See Instructions)         Firefigher         Date         O2/08/2023         Gutierrez, Rafael	\$10.00	2023 Gutierrez, Rafael
Firefigher     Cyfair Fire Department HCESD9       Date     Full name of contributor     out-of-state PAC (ID#:)     Amount of Contribution (\$)       02/08/2023     Gutierrez, Rafael     \$		
Date     Full name of contributor     out-of-state PAC (ID#:)     Amount of Contribution (\$)       02/08/2023     Gutierrez, Rafael     \$	yer (See Instructions)	al occupation / Job title (See Instructions)
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02/08/2023 Gutierrez, Rafael \$	Amount of Contribution (\$)	Eull name of contributor
	) Anothe of contribution (\$) \$10.00	
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Principal occupation / Job title (See Instructions) Employer (See Instructions)	yer (See Instructions)	al occupation / Job title (See Instructions)
Firefigher Cyfair Fire Department HCESD9	Fire Department HCESD9	her
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)	Amount of Contribution (\$)	Full name of contributor
	\$10.00	
Contributor address; City; State; Zip Code		Contributor address; City; State; Zip Code
	ver (See Instructions)	
Firefigher Cyfair Fire Department HCESD9	yer (See Instructions)	ner

The Instruc	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1:	
2 FILER NAME	· ·		Sch: 43/118 Rpt: 46/121	lare)
	essional Firefighters Political Action Committee		3 Filer ID (Ethics Commission File 00087022	215)
4 Date 01/11/2023	<ul> <li>5 Full name of contributor out-of-state PAC (ID#:_Gutierrez, Rafael</li> <li>6 Contributor address; City; State; Zip Code</li> </ul>	)	7 Amount of Contribution (\$)	\$10.00
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8 Principal occup Firefigher	pation / Job title (See Instructions)	9 Employer (See Instructions Cyfair Fire Department H		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
06/28/2023	Holmes, Erin	1	\$	\$10.00
	Contributor address; City; State; Zip Code			
	TX		<u> </u>	
Principal occu Firefigher	pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department F		
-			1	
Date 06/14/2023	Full name of contributor out-of-state PAC (ID#: Holmes, Erin	)	Amount of Contribution (\$)	\$10.00
	Contributor address; City; State; Zip Code			P10
	TX		<u> </u>	
Principal occu Firefigher	pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department F		
Date 05/31/2023	Full name of contributor out-of-state PAC (ID#: Holmes, Erin	)	Amount of Contribution (\$) \$	\$10.00
	Contributor address; City; State; Zip Code			
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Principal occu Firefigher	pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I		
Date 05/17/2023	Full name of contributor out-of-state PAC (ID#: Holmes, Erin Contributor address; City; State; Zip Code	)	Amount of Contribution (\$)	\$10.00
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	pation / Job title (See Instructions)	Employer (See Instructions		

The Instrue	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 44/118 Rpt: 47/121	
2 FILER NAME			3 Filer ID (Ethics Commission F	ilers)
	essional Firefighters Political Action Committee		00087022	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)	
05/03/2023	Holmes, Erin			\$10.00
	6 Contributor address; City; State; Zip Code		•	
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	pation / Job title (See Instructions)	9 Employer (See Instructions		
Firefigher		Cyfair Fire Department	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
04/19/2023	Holmes, Erin			\$10.00
	Contributor address; City; State; Zip Code			
	ТХ			
	pation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
04/05/2023	Holmes, Erin			\$10.00
	Contributor address; City; State; Zip Code		1	
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	pation / Job title (See Instructions)	Employer (See Instructions	•	
Firefigher		Cyfair Fire Department	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
03/22/2023	Holmes, Erin			\$10.00
	Contributor address; City; State; Zip Code		1	
	ТХ			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	~	
Firefigher		Cyfair Fire Department		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	<b>#10.00</b>
03/08/2023	Holmes, Erin			\$10.00
	Contributor address; City; State; Zip Code			
	ТХ			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
Firefigher		Cyfair Fire Department		
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2 FILER NAME Cy-Fair Profe	essional Firefighters Political Action Committee		<ul> <li>Filer ID (Ethics Commission Filer 00087022</li> </ul>	rs)
4 Date 02/22/2023	<ul> <li>5 Full name of contributor out-of-state PAC (ID#:_ Holmes, Erin</li> <li>6 Contributor address; City; State; Zip Code</li> <li>TX</li> </ul>	)	7 Amount of Contribution (\$) \$1	10.00
B Principal occup Firefigher	pation / Job title (See Instructions)	<ul> <li>9 Employer (See Instructions</li> <li>Cyfair Fire Department H</li> </ul>		
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Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
06/28/2023	Hybert-Bice, Nicholas		\$1	10.00
	Contributor address; City; State; Zip Code			
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department I	,	
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Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
06/14/2023	Hybert-Bice, Nicholas		\$1	10.00
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Principal occup Firefigher	pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department H		
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
05/31/2023	Hybert-Bice, Nicholas		\$1	10.00
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	Contributor address; City; State; Zip Code			
	Contributor address; City; State; Zip Code			
Principal occur	ТХ	Employer (See Instructions	)	
		Employer (See Instructions Cyfair Fire Department I		
Firefigher	TX Dation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I	HCESD9	
Firefigher Date	TX Dation / Job title (See Instructions) Full name of contributor uut-of-state PAC (ID#:_		HCESD9 Amount of Contribution (\$)	
Firefigher	TX Dation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Hybert-Bice, Nicholas		HCESD9 Amount of Contribution (\$)	10.00
Firefigher Date	TX Dation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Hybert-Bice, Nicholas Contributor address; City; State; Zip Code		HCESD9 Amount of Contribution (\$)	10.00
Firefigher Date 05/17/2023	TX pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#: Hybert-Bice, Nicholas Contributor address; City; State; Zip Code TX	Cyfair Fire Department H	HCESD9 Amount of Contribution (\$) \$1	10.00
Firefigher Date 05/17/2023	TX Dation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Hybert-Bice, Nicholas Contributor address; City; State; Zip Code		HCESD9 Amount of Contribution (\$) \$1	10.00

The Instruct	tion Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 46/118 Rpt: 49/121	
2 FILER NAME			3 Filer ID (Ethics Commission File	ers)
	ssional Firefighters Political Action Committee		00087022	
4 Date !	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)	
05/03/2023	Hybert-Bice, Nicholas			\$10.00
ï	6 Contributor address; City; State; Zip Code			
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	ТХ			
	ation / Job title (See Instructions)	9 Employer (See Instructions		
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
06/28/2023	Johnson, Travis		\$	\$20.00
ľ	Contributor address; City; State; Zip Code			
	TX	1		
	ation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department I		
Date		)	Amount of Contribution (\$)	
06/14/2023	Johnson, Travis		4	\$20.00
	Contributor address; City; State; Zip Code			
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Principal occup	ation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u>	
Firefigher		Cyfair Fire Department H		
Date	Full name of contributor Out-of-state PAC (ID#:		Amount of Contribution (\$)	
05/31/2023				
	Johnson, Iravis			\$20.00
	Johnson, Travis Contributor address: City: State: Zip Code			\$20.00
	Contributor address; City; State; Zip Code			\$20.00
				\$20.00
				\$20.00
Principal occup	Contributor address; City; State; Zip Code	Employer (See Instructions	\$	\$20.00
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	Contributor address; City; State; Zip Code TX	Employer (See Instructions Cyfair Fire Department I	\$	\$20.00
Firefigher	Contributor address; City; State; Zip Code TX ation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I	\$ ;;) HCESD9 Amount of Contribution (\$)	\$20.00
Firefigher Date	Contributor address; City; State; Zip Code TX ation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:	Employer (See Instructions Cyfair Fire Department I	\$ ;;) HCESD9 Amount of Contribution (\$)	
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Firefigher Date 05/17/2023	Contributor address; City; State; Zip Code TX ation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:	Employer (See Instructions Cyfair Fire Department I )	\$ S) HCESD9 Amount of Contribution (\$) \$	
Firefigher Date 05/17/2023	Contributor address; City; State; Zip Code TX ation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:	Employer (See Instructions Cyfair Fire Department I	\$ HCESD9 Amount of Contribution (\$) \$	

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 47/118 Rpt: 50/121	
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)	)
Cy-Fair Prof	essional Firefighters Political Action Committee		00087022	
4 Date	5 Full name of contributor Out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)	
05/03/2023	Johnson, Travis		\$20	0.00
	6 Contributor address; City; State; Zip Code		•	
	ТХ			
	ipation / Job title (See Instructions)	9 Employer (See Instructions		
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
04/19/2023	Johnson, Travis		\$20	).00
	Contributor address; City; State; Zip Code		1	
	ТХ			
	ipation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department I	HCESD9	
Date	—	)	Amount of Contribution (\$)	
04/05/2023	Johnson, Travis		\$20	).00
	Contributor address; City; State; Zip Code		]	
Drinsing Loopu	TX	1 Employee (Cool Instructions	\	
Firefigher	ipation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
03/22/2023	Johnson, Travis		\$20	).00
	Contributor address; City; State; Zip Code			
	тх			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
Firefigher		Cyfair Fire Department I		
Date	Full name of contributor out-of-state PAC (ID#:_		Amount of Contribution (\$)	
03/08/2023	Johnson, Travis	/	\$20	00 ו
00,00,	Contributor address; City; State; Zip Code			/
	ТХ			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)	
Firefigher		Cyfair Fire Department I	HCESD9	

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 48/118 Rpt: 51/121	
2 FILER NAME			3 Filer ID (Ethics Commission Filers	rs)
Cy-Fair Profe	essional Firefighters Political Action Committee		00087022	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)	
02/22/2023	Johnson, Travis		\$2	20.00
ľ	6 Contributor address; City; State; Zip Code		1	
	- -			
	ТХ			
8 Principal occup	pation / Job title (See Instructions)	9 Employer (See Instructions		
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
02/08/2023	Johnson, Travis		\$2	20.00
ľ	Contributor address; City; State; Zip Code		1	
	- · ·			
	ТХ			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	(ز	
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
01/25/2023	Johnson, Travis			20.00
ľ	Contributor address; City; State; Zip Code			
	-	ļ		
		ļ		
	ТХ			
	pation / Job title (See Instructions)	Employer (See Instructions	,	
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
01/11/2023	Johnson, Travis	ļ	\$2	20.00
ľ	Contributor address; City; State; Zip Code			
	ТХ			
	pation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
06/28/2023	Johnson, William		\$2	20.00
ľ	Contributor address; City; State; Zip Code	,		
	ТХ	-		
	pation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department I	HCESD9	

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 49/118 Rpt: 52/121
2 FILER NAME Cy-Fair Profe	essional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
4 Date 06/14/2023	5 Full name of contributor out-of-state PAC (ID#: Johnson, William		7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code		
Principal occu	TX pation / Job title (See Instructions)	9 Employer (See Instructions	<u></u>
Firefigher		Cyfair Fire Department H	
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)
05/31/2023	Johnson, William		\$20.00
	тх		
	pation / Job title (See Instructions)	Employer (See Instructions	,
Firefigher		Cyfair Fire Department I	HCESD9
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
06/28/2023	Kanewske, Cohen Contributor address; City; State; Zip Code	!	\$5.00
Dringing occu	TX	Employer (Soo Instruction	A
Principal occu Firefigher	pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department H	
Date 06/14/2023	Full name of contributor out-of-state PAC (ID#: Kanewske, Cohen	)	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code		
	тх		
			s)
Principal occu Firefigher	pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department H	
	pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Kanewske, Cohen Contributor address; City; State; Zip Code	Cyfair Fire Department I	HCESD9 Amount of Contribution (\$)
Firefigher Date	Full name of contributor out-of-state PAC (ID#:_ Kanewske, Cohen	Cyfair Fire Department I	HCESD9 Amount of Contribution (\$)
Firefigher Date 05/31/2023	Full name of contributor out-of-state PAC (ID#:_ Kanewske, Cohen Contributor address; City; State; Zip Code	Cyfair Fire Department I	HCESD9 Amount of Contribution (\$) \$5.00 \$5.00

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 50/118 Rpt: 53/121	_
2 FILER NAME			3 Filer ID (Ethics Commission Filer	rs)
	essional Firefighters Political Action Committee		00087022	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)	
05/17/2023	Kanewske, Cohen			\$5.00
	6 Contributor address; City; State; Zip Code			
	TV			
Princinal occur	TX pation / Job title (See Instructions)	9 Employer (See Instructions	<u></u>	
Firefigher		Cyfair Fire Department		
-	Full name of contributor out-of-state PAC (ID#:	-	Amount of Contribution (\$)	
Date 05/03/2023	Full name of contributor out-of-state PAC (ID#: Kanewske, Cohen	)		\$5.00
00/00/2020				\$0.00
	Contributor address; City; State; Zip Code			
	ТХ			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> ۶)	
Firefigher	``````````````````````````````````````	Cyfair Fire Department	,	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
04/19/2023	Kanewske, Cohen	/		\$5.00
	Contributor address; City; State; Zip Code		4	
	ТХ			
	pation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
04/05/2023	Kanewske, Cohen		S	\$5.00
	Contributor address; City; State; Zip Code		1	
	тх			
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department I		
Date	Full name of contributor Out-of-state PAC (ID#:		Amount of Contribution (\$)	
03/22/2023	Full name of contributor out-of-state PAC (ID#: Kanewske, Cohen	)		\$5.00
	Contributor address; City; State; Zip Code			φυ.υυ
	Continuation address, City, State, Lip Code			
	тх			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	۲ <u>ــــــــــــــــــــــــــــــــــــ</u>	
Firefigher		Cyfair Fire Department I	HCESD9	
		1		

The Instruction Guide explai	ns how to complete this	form.	1 Total pages Schedule A1: Sch: 51/118 Rpt: 54/121	
2 FILER NAME			3 Filer ID (Ethics Commission Filer	rs)
Cy-Fair Professional Firefighters P	olitical Action Committee		00087022	10)
4 Date 5 Full name of contribu	utor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
03/08/2023 Kanewske, Coher	1			\$5.00
6 Contributor address;	City; State; Zip Code			
ТХ				
8 Principal occupation / Job title (See Ins	structions)	9 Employer (See Instructions		
Firefigher		Cyfair Fire Department	HCESD9	
Date Full name of contribu	utor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
02/22/2023 Kanewske, Coher				\$5.00
Contributor address:	; City; State; Zip Code		1	
ТХ				
Principal occupation / Job title (See Ins	structions)	Employer (See Instructions	5)	
Firefigher		Cyfair Fire Department	HCESD9	
Date Full name of contribu	utor out-of-state PAC (ID#:	· ·)	Amount of Contribution (\$)	
06/28/2023 Kelly, William	—			\$5.00
Contributor address	; City; State; Zip Code		1	
ТХ				
Principal occupation / Job title (See Ins	structions)	Employer (See Instructions	5)	
Firefigher		Cyfair Fire Department	HCESD9	
Date Full name of contribu	utor out-of-state PAC (ID#:	· :)	Amount of Contribution (\$)	
06/14/2023 Kelly, William	—			\$5.00
Contributor address	; City; State; Zip Code			
	· ·			
ТХ				
Principal occupation / Job title (See Ins	structions)	Employer (See Instructions	5)	
Firefigher		Cyfair Fire Department	HCESD9	
Date Full name of contribu	utor out-of-state PAC (ID#:	L)	Amount of Contribution (\$)	
05/31/2023 Kelly, William	—			\$5.00
Contributor address	; City; State; Zip Code			
ТХ				
Principal occupation / Job title (See Ins	structions)	Employer (See Instructions	5)	
Firefigher		Cyfair Fire Department	HCESD9	

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 52/118 Rpt: 55/121
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
	essional Firefighters Political Action Committee		00087022
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)
05/17/2023	Kelly, William		\$5.00
	6 Contributor address; City; State; Zip Code		
	ТХ		
	pation / Job title (See Instructions)	9 Employer (See Instructions	
Firefigher		Cyfair Fire Department	HCESD9
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
05/03/2023	Kelly, William		\$5.00
	Contributor address; City; State; Zip Code		
	ТХ		
	pation / Job title (See Instructions)	Employer (See Instructions	
Firefigher		Cyfair Fire Department	HCESD9
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
04/19/2023	Kelly, William		\$5.00
	Contributor address; City; State; Zip Code		
	TX	1	
	pation / Job title (See Instructions)	Employer (See Instructions	
Firefigher		Cyfair Fire Department	-
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
04/05/2023	Kelly, William		\$5.00
	Contributor address; City; State; Zip Code		
	TX		<u> </u>
	pation / Job title (See Instructions)	Employer (See Instructions	
Firefigher		Cyfair Fire Department	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
03/22/2023	Kelly, William		
	Contributor address; City; State; Zip Code		
	TX		<u> </u>
	pation / Job title (See Instructions)	Employer (See Instructions	
Firefigher		Cyfair Fire Department	НСЕЗДЯ

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 53/118 Rpt: 56/121
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
	essional Firefighters Political Action Committee		00087022
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
03/08/2023	Kelly, William		\$5.00
	6 Contributor address; City; State; Zip Code		1
	ТХ		
	pation / Job title (See Instructions)	9 Employer (See Instructions	
Firefigher		Cyfair Fire Department	HCESD9
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
02/22/2023	Kelly, William		\$5.00
	Contributor address; City; State; Zip Code		1
	ТХ		
	pation / Job title (See Instructions)	Employer (See Instructions	
Firefigher		Cyfair Fire Department	HCESD9
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
02/08/2023	Kelly, William		\$5.00
	Contributor address; City; State; Zip Code		1
	ТХ		
	pation / Job title (See Instructions)	Employer (See Instructions	,
Firefigher		Cyfair Fire Department	HCESD9
Date	Full name of contributor 🔲 out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
01/25/2023	Kelly, William		\$5.00
	Contributor address; City; State; Zip Code		1
	ТХ		
	pation / Job title (See Instructions)	Employer (See Instructions	,
Firefigher		Cyfair Fire Department	HCESD9
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
01/11/2023	Kelly, William		\$5.00
	Contributor address; City; State; Zip Code		1
	ТХ	1	
	pation / Job title (See Instructions)	Employer (See Instructions	
Firefigher		Cyfair Fire Department	HCESD9

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 54/118 Rpt: 57/121
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
	essional Firefighters Political Action Committee		00087022
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
06/28/2023	Lanzas, Mauricio		\$5.
	6 Contributor address; City; State; Zip Code		
	тх		
8 Principal occur	pation / Job title (See Instructions)	9 Employer (See Instructions	s)
Firefigher		Cyfair Fire Department I	HCESD9
Date	Full name of contributor Out-of-state PAC (ID#:_	<u> </u> )	Amount of Contribution (\$)
06/14/2023	Lanzas, Mauricio		\$5.
	Contributor address; City; State; Zip Code		•
	тх		
Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions	<u> </u> \$)
Firefigher		Cyfair Fire Department I	,
Date	Full name of contributor Out-of-state PAC (ID#:	<u> </u>	Amount of Contribution (\$)
05/31/2023	Lanzas, Mauricio	/	\$5.
00/02/2222	Contributor address; City; State; Zip Code		•
	Culturbutor audress, City, State, Lip Coue		
	тх		
Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions	<u> </u> \$)
Firefigher	· · ·	Cyfair Fire Department I	HCESD9
Date	Full name of contributor Out-of-state PAC (ID#:	)	Amount of Contribution (\$)
05/17/2023	Lanzas, Mauricio		\$5.
	Contributor address; City; State; Zip Code		•
	ТХ		
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions	\$)
Firefigher		Cyfair Fire Department I	HCESD9
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
05/03/2023	Lanzas, Mauricio		\$5.
	Contributor address; City; State; Zip Code		4
	тх		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	δ)
Firefigher		Cyfair Fire Department I	HCESD9
Firefigher		Cyfair Fire Department I	HCESD9

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 55/118 Rpt: 58/121	
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)	
	essional Firefighters Political Action Committee		00087022	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)	
04/19/2023	Lanzas, Mauricio		\$5.	.00
	6 Contributor address; City; State; Zip Code		1	
	тх			
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)	
Firefigher		Cyfair Fire Department	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
04/05/2023	Lanzas, Mauricio		\$5	.00
	Contributor address; City; State; Zip Code		1	
	ТХ			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	δ)	
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
03/22/2023	Lanzas, Mauricio			.00
	Contributor address; City; State; Zip Code		4	
	ТХ			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	۲ <u>ــــــــــــــــــــــــــــــــــــ</u>	
Firefigher		Cyfair Fire Department	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	_
03/08/2023	Lanzas, Mauricio		\$5	.00
	Contributor address; City; State; Zip Code		•	
	тх			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)	
Firefigher		Cyfair Fire Department	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
02/22/2023	Lanzas, Mauricio			.00
	Contributor address; City; State; Zip Code		1	
	ТХ			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	۲ <u>ــــــــــــــــــــــــــــــــــــ</u>	
Firefigher		Cyfair Fire Department	HCESD9	

The Instruc	tion Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 56/118 Rpt: 59/121	
2 FILER NAME			3 Filer ID (Ethics Commission File	ers)
	essional Firefighters Political Action Committee		00087022	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)	
02/08/2023	Lanzas, Mauricio			\$5.00
ľ	6 Contributor address; City; State; Zip Code			
	ТХ			
	pation / Job title (See Instructions)	9 Employer (See Instructions		
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
01/25/2023	Lanzas, Mauricio			\$5.00
ľ	Contributor address; City; State; Zip Code			
	ТХ			
	pation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
01/11/2023	Lanzas, Mauricio			\$5.00
ľ	Contributor address; City; State; Zip Code			
	ТХ			
	pation / Job title (See Instructions)	Employer (See Instructions	·	
Principal occup Firefigher	pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I	·	
	Full name of contributor out-of-state PAC (ID#:_		·	
Firefigher			HCESD9 Amount of Contribution (\$)	\$10.00
Firefigher Date	Full name of contributor out-of-state PAC (ID#:_		HCESD9 Amount of Contribution (\$)	\$10.00
Firefigher Date	Full name of contributor out-of-state PAC (ID#:_ Laws, Roshun		HCESD9 Amount of Contribution (\$)	\$10.00
Firefigher Date	Full name of contributor out-of-state PAC (ID#:_ Laws, Roshun Contributor address; City; State; Zip Code		HCESD9 Amount of Contribution (\$)	\$10.00
Firefigher Date 06/28/2023	Full name of contributor out-of-state PAC (ID#:_ Laws, Roshun Contributor address; City; State; Zip Code	Cyfair Fire Department H	HCESD9 Amount of Contribution (\$)	\$10.00
Firefigher Date 06/28/2023 Principal occup	Full name of contributor out-of-state PAC (ID#:_ Laws, Roshun Contributor address; City; State; Zip Code	Cyfair Fire Department I	HCESD9 Amount of Contribution (\$)	\$10.00
Firefigher Date 06/28/2023	Full name of contributor out-of-state PAC (ID#:_ Laws, Roshun Contributor address; City; State; Zip Code	Cyfair Fire Department H	HCESD9 Amount of Contribution (\$)	\$10.00
Firefigher Date 06/28/2023 Principal occup	Full name of contributor       out-of-state PAC (ID#:_         Laws, Roshun       contributor address; City; State; Zip Code         TX	Cyfair Fire Department I	HCESD9 Amount of Contribution (\$)	\$10.00
Firefigher Date 06/28/2023 Principal occup Firefigher	Full name of contributor       out-of-state PAC (ID#:_         Laws, Roshun       Contributor address; City; State; Zip Code         TX       Dation / Job title (See Instructions)	Cyfair Fire Department I	HCESD9 Amount of Contribution (\$) \$ HCESD9 Amount of Contribution (\$)	\$10.00
Firefigher Date 06/28/2023 Principal occup Firefigher Date	Full name of contributor       out-of-state PAC (ID#:_         Laws, Roshun       Contributor address; City; State; Zip Code         TX       TX         Dation / Job title (See Instructions)         Full name of contributor       out-of-state PAC (ID#:_	Cyfair Fire Department I	HCESD9 Amount of Contribution (\$) \$ HCESD9 Amount of Contribution (\$)	
Firefigher Date 06/28/2023 Principal occup Firefigher Date	Full name of contributor       out-of-state PAC (ID#:_         Laws, Roshun       Contributor address; City; State; Zip Code         TX       TX         Dation / Job title (See Instructions)       out-of-state PAC (ID#:_         Full name of contributor       out-of-state PAC (ID#:_         Laws, Roshun       Out-of-state PAC (ID#:_	Cyfair Fire Department I	HCESD9 Amount of Contribution (\$) \$ HCESD9 Amount of Contribution (\$)	
Firefigher Date 06/28/2023 Principal occup Firefigher Date	Full name of contributor       out-of-state PAC (ID#:_         Laws, Roshun       Contributor address; City; State; Zip Code         TX       TX         Dation / Job title (See Instructions)       out-of-state PAC (ID#:_         Full name of contributor       out-of-state PAC (ID#:_         Laws, Roshun       Contributor address; City; State; Zip Code	Cyfair Fire Department I	HCESD9 Amount of Contribution (\$) \$ HCESD9 Amount of Contribution (\$)	
Firefigher Date 06/28/2023 Principal occup Firefigher Date 06/14/2023	Full name of contributor       out-of-state PAC (ID#:_         Laws, Roshun       Contributor address; City; State; Zip Code         TX       TX         Dation / Job title (See Instructions)       out-of-state PAC (ID#:_         Full name of contributor       out-of-state PAC (ID#:_         Laws, Roshun       Contributor address; City; State; Zip Code         TX       TX	Cyfair Fire Department H	HCESD9 Amount of Contribution (\$) \$ HCESD9 Amount of Contribution (\$) \$	
Firefigher Date 06/28/2023 Principal occup Firefigher Date 06/14/2023	Full name of contributor       out-of-state PAC (ID#:_         Laws, Roshun       Contributor address; City; State; Zip Code         TX       TX         Dation / Job title (See Instructions)       out-of-state PAC (ID#:_         Full name of contributor       out-of-state PAC (ID#:_         Laws, Roshun       Contributor address; City; State; Zip Code	Cyfair Fire Department I	HCESD9 Amount of Contribution (\$) HCESD9 Amount of Contribution (\$) Amount of Contribution (\$)	

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 57/118 Rpt: 60/121	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	5)
	essional Firefighters Political Action Committee		00087022	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)	
05/31/2023	Laws, Roshun		\$10	0.00
ľ	6 Contributor address; City; State; Zip Code		1	
	ТХ			
	pation / Job title (See Instructions)	9 Employer (See Instructions		
Firefigher		Cyfair Fire Department	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
06/28/2023	Leauge, Cory		\$5	5.00
[	Contributor address; City; State; Zip Code		1	
	ТХ			
	pation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
06/14/2023	Leauge, Cory		\$5	5.00
	Contributor address; City; State; Zip Code			
	TX	1		
	pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I		
Firefigher		Cylair Fire Department		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
05/31/2023	Leauge, Cory		\$5	5.00
	Contributor address; City; State; Zip Code			
	тх			
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
Firefigher		Cyfair Fire Department I		
Date	Full name of contributor Out-of-state PAC (ID#:		Amount of Contribution (\$)	
05/17/2023	Leauge, Cory	)		5.00
00/11/2020	Contributor address; City; State; Zip Code			5.00
	Contributor address, City, State, Zip Code			
	ТХ			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	ι δ)	
Firefigher		Cyfair Fire Department I	HCESD9	

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 58/118 Rpt: 61/121	
2 FILER NAME			3 Filer ID (Ethics Commission Filers	s)
	essional Firefighters Political Action Committee		00087022	-,
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
05/03/2023	Leauge, Cory		\$	\$5.00
	6 Contributor address; City; State; Zip Code		1	
	ТХ			
	pation / Job title (See Instructions)	9 Employer (See Instructions		
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
04/19/2023	Leauge, Cory		\$	\$5.00
	Contributor address; City; State; Zip Code		1	
	ТХ			
	pation / Job title (See Instructions)	Employer (See Instructions	,	
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
04/05/2023	Leauge, Cory		\$	\$5.00
	Contributor address; City; State; Zip Code		1	
	TX	· · · · · · · · · · · · · · · · · · ·		
	pation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department I		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
03/22/2023	Leauge, Cory		\$	\$5.00
	Contributor address; City; State; Zip Code			
	тх			
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ډ)	
Firefigher		Cyfair Fire Department I		
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	
03/08/2023	Leauge, Cory	J		\$5.00
00/00/2020	Contributor address; City; State; Zip Code		· ·	0.00
	Continuation address, City, State, Zip Code			
	тх			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> ۶)	
Firefigher	•	Cyfair Fire Department		
		-		

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The Instrue	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 59/118 Rpt: 62/121	
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers	s)
	essional Firefighters Political Action Committee		00087022	-,
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
02/22/2023	Leauge, Cory		\$	5.00
	6 Contributor address; City; State; Zip Code		•	
	ТХ			
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)	
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	
06/28/2023	Lieder, Nicole			5.00
	Contributor address; City; State; Zip Code		•	
	ТХ			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)	
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
06/14/2023	Lieder, Nicole			5.00
	Contributor address; City; State; Zip Code		•	-
	тх			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	3)	
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
05/31/2023	Lieder, Nicole		\$	5.00
	Contributor address; City; State; Zip Code			
	ТХ			
	pation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
05/17/2023	Lieder, Nicole		\$	5.00
	Contributor address; City; State; Zip Code			
	ТХ			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)	
Firefigher		Cyfair Fire Department I	HCESD9	

The Instruction Guide explains how to comp	Image: Schedule A1:         Sch: 60/118 Rpt: 63/121
2 FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)
Cy-Fair Professional Firefighters Political Action Con	
4 Date 5 Full name of contributor out-of-st	ate PAC (ID#:) 7 Amount of Contribution (\$)
05/03/2023 Lieder, Nicole	\$5.0
<b>6</b> Contributor address; City; State; Zip Co	de
ТХ	
8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Firefigher	Cyfair Fire Department HCESD9
Date Full name of contributor out-of-st	ate PAC (ID#:) Amount of Contribution (\$)
04/19/2023 Lieder, Nicole	\$5.0
Contributor address; City; State; Zip Co	de
ТХ	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Firefigher	Cyfair Fire Department HCESD9
Date Full name of contributor out-of-st	ate PAC (ID#:) Amount of Contribution (\$)
06/28/2023 Maher, Jordan	\$20.0
Contributor address; City; State; Zip Co	de
ТХ	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Firefigher	
	Cyfair Fire Department HCESD9
	Cyfair Fire Department HCESD9
Date Full name of contributor out-of-st	Cyfair Fire Department HCESD9         ate PAC (ID#:)         Amount of Contribution (\$)         \$20.00
Date   Full name of contributor   out-of-st     06/14/2023   Maher, Jordan	Cyfair Fire Department HCESD9 ate PAC (ID#:) Amount of Contribution (\$) \$20.04
Date       Full name of contributor       out-of-st         06/14/2023       Maher, Jordan         Contributor address; City; State; Zip Contributor	Cyfair Fire Department HCESD9 ate PAC (ID#:) Amount of Contribution (\$) \$20.04
Date       Full name of contributor       out-of-st         06/14/2023       Maher, Jordan         Contributor address; City; State; Zip Contributor         TX	Cyfair Fire Department HCESD9         ate PAC (ID#:)         Amount of Contribution (\$)         de
Date       Full name of contributor       out-of-st         06/14/2023       Maher, Jordan         Contributor address; City; State; Zip Contributor       TX         Principal occupation / Job title (See Instructions)	Cyfair Fire Department HCESD9  ate PAC (ID#:) Amount of Contribution (\$)  de  Employer (See Instructions)
Date       Full name of contributor       out-of-st         06/14/2023       Maher, Jordan         Contributor address; City; State; Zip Contributor         TX	Cyfair Fire Department HCESD9         ate PAC (ID#:)         Amount of Contribution (\$)         de
Date       Full name of contributor       out-of-st         06/14/2023       Maher, Jordan         Contributor address; City; State; Zip Contributor       TX         Principal occupation / Job title (See Instructions)       Firefigher	Cyfair Fire Department HCESD9  ate PAC (ID#:) Amount of Contribution (\$)  de  Employer (See Instructions)
Date       Full name of contributor       out-of-st         06/14/2023       Maher, Jordan         Contributor address; City; State; Zip Contributor       TX         Principal occupation / Job title (See Instructions)       Firefigher	Cyfair Fire Department HCESD9  ate PAC (ID#:) Amount of Contribution (\$) \$20.00 de Employer (See Instructions) Cyfair Fire Department HCESD9
Date       Full name of contributor       out-of-st         06/14/2023       Maher, Jordan         Contributor address; City; State; Zip Contributor       TX         Principal occupation / Job title (See Instructions)       Firefigher         Date       Full name of contributor       out-of-st         Date       Full name of contributor       out-of-st	Cyfair Fire Department HCESD9         ate PAC (ID#:)         Amount of Contribution (\$)         de         be         Employer (See Instructions)         Cyfair Fire Department HCESD9         ate PAC (ID#:)         Amount of Contribution (\$)         \$20.00         Employer (See Instructions)         Cyfair Fire Department HCESD9         ate PAC (ID#:)         Amount of Contribution (\$)         \$20.00
Date       Full name of contributor       out-of-st         06/14/2023       Maher, Jordan         Contributor address; City; State; Zip Contributor address; City; State; Zip Contributor address; City; State; Zip Contributor         TX         Principal occupation / Job title (See Instructions)         Firefigher         Date       Full name of contributor         05/31/2023       Maher, Jordan	Cyfair Fire Department HCESD9         ate PAC (ID#:)         Amount of Contribution (\$)         de         be         Employer (See Instructions)         Cyfair Fire Department HCESD9         ate PAC (ID#:)         Amount of Contribution (\$)         \$20.00         Employer (See Instructions)         Cyfair Fire Department HCESD9         ate PAC (ID#:)         Amount of Contribution (\$)         \$20.00
Date       Full name of contributor       out-of-st         06/14/2023       Maher, Jordan         Contributor address; City; State; Zip Contributor address; City; State; Zip Contributor         TX         Principal occupation / Job title (See Instructions)         Firefigher         Date       Full name of contributor         05/31/2023         Maher, Jordan         Contributor address; City; State; Zip Contributor address; City; State; Zip Contributor	Cyfair Fire Department HCESD9         ate PAC (ID#:)         Amount of Contribution (\$)         de         be         Employer (See Instructions)         Cyfair Fire Department HCESD9         ate PAC (ID#:)         Amount of Contribution (\$)         \$20.00         Employer (See Instructions)         Cyfair Fire Department HCESD9         ate PAC (ID#:)         Amount of Contribution (\$)         \$20.00
Date       Full name of contributor       out-of-st         06/14/2023       Maher, Jordan         Contributor address; City; State; Zip Contributor address; City; State; Zip Contributor address; City; State; Zip Contributor         TX         Principal occupation / Job title (See Instructions)         Firefigher         Date       Full name of contributor         05/31/2023       Maher, Jordan	Cyfair Fire Department HCESD9         ate PAC (ID#:)         Amount of Contribution (\$)         de         be         Employer (See Instructions)         Cyfair Fire Department HCESD9         ate PAC (ID#:)         Amount of Contribution (\$)         \$20.00         Employer (See Instructions)         Cyfair Fire Department HCESD9         ate PAC (ID#:)         Amount of Contribution (\$)         \$20.00
Date       Full name of contributor       out-of-st         06/14/2023       Maher, Jordan         Contributor address; City; State; Zip Contributor address; City; State; Zip Contributor address; City; State; Zip Contributor         TX         Principal occupation / Job title (See Instructions)         Firefigher         Date       Full name of contributor         05/31/2023       Maher, Jordan         Contributor address; City; State; Zip Contributor address; City; State; Zip Contributor	Cyfair Fire Department HCESD9         ate PAC (ID#:)         Amount of Contribution (\$)         de         be         Employer (See Instructions)         Cyfair Fire Department HCESD9         ate PAC (ID#:)         Amount of Contribution (\$)         \$20.00         Employer (See Instructions)         Cyfair Fire Department HCESD9         ate PAC (ID#:)         Amount of Contribution (\$)         \$20.00

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 61/118 Rpt: 64/121
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
	essional Firefighters Political Action Committee		00087022
4 Date 06/28/2023	<ul> <li>5 Full name of contributor out-of-state PAC (ID#: Maloney, Joshua</li> <li>6 Contributor address; City; State; Zip Code</li> </ul>		7 Amount of Contribution (\$) \$15.0
	ТХ		
8 Principal occu Firefigher	upation / Job title (See Instructions)	9 Employer (See Instructions Cyfair Fire Department H	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
06/14/2023	Maloney, Joshua		\$15.0
	Contributor address; City; State; Zip Code		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u></u>
Firefigher		Cyfair Fire Department I	
_			
Date 05/31/2023	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$) \$15.0
00/01/2020	Maloney, Joshua Contributor address; City; State; Zip Code		+
Principal occu	I upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>
Firefigher		Cyfair Fire Department H	
Date 05/17/2023	Full name of contributor out-of-state PAC (ID#: Maloney, Joshua		Amount of Contribution (\$) \$15.0
	Contributor address; City; State; Zip Code		
Principal occu Firefigher	ipation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I	·
Date 05/03/2023	Full name of contributor out-of-state PAC (ID#: Maloney, Joshua Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) \$15.0
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>
Firefigher		Cyfair Fire Department I	

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 62/118 Rpt: 65/121	
2 FILER NAME			3 Filer ID (Ethics Commission F	-ilers)
	essional Firefighters Political Action Committee		00087022	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
04/19/2023	Maloney, Joshua			\$15.00
	6 Contributor address; City; State; Zip Code		1	
	ТХ			
	upation / Job title (See Instructions)	9 Employer (See Instructions		
Firefigher		Cyfair Fire Department	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
04/05/2023	Maloney, Joshua			\$15.00
	Contributor address; City; State; Zip Code			
	ТХ			
	upation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
03/22/2023	Maloney, Joshua			\$15.00
	Contributor address; City; State; Zip Code		1	
	ТХ			
-	upation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
03/08/2023	Maloney, Joshua			\$15.00
	Contributor address; City; State; Zip Code		1	
	ТХ			
-	pation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
02/22/2023	Maloney, Joshua			\$15.00
	Contributor address; City; State; Zip Code		1	
	ТХ			
	upation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department I	HCESD9	

			1 Total pages Sabadula A1:
The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 63/118 Rpt: 66/121
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
Cy-Fair Profe	essional Firefighters Political Action Committee		00087022
02/08/2023	<ul> <li>5 Full name of contributor out-of-state PAC (ID#:_ Maloney, Joshua</li> <li>6 Contributor address; City; State; Zip Code</li> </ul>	)	7 Amount of Contribution (\$) \$15.
	TX		
8 Principal occup Firefigher	pation / Job title (See Instructions)	9 Employer (See Instructions Cyfair Fire Department H	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
01/25/2023	Maloney, Joshua		\$15.
	Contributor address; City; State; Zip Code		
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>
Firefigher		Cyfair Fire Department I	,
Date	Full name of contributor Out-of-state PAC (ID#:		
Date 01/11/2023	Full name of contributor out-of-state PAC (ID#: Maloney, Joshua		Amount of Contribution (\$) \$15.
	Contributor address; City; State; Zip Code		
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> ة)
Firefigher		Cyfair Fire Department I	
Date 06/28/2023	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$) \$10.
	ТХ		
Principal occup Firefigher	pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I	·
Date 06/14/2023	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$) \$10.
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>
Firefigher		Cyfair Fire Department I	

The Instruc	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 64/118 Rpt: 67/121	
2 FILER NAME			3 Filer ID (Ethics Commission Filer	ers)
	essional Firefighters Political Action Committee		00087022	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)	
05/31/2023	McMahan, Jonathan		\$	510.00
ľ	6 Contributor address; City; State; Zip Code		1	
	1			
	TX	1		
	pation / Job title (See Instructions)	9 Employer (See Instructions		
Firefigher		Cyfair Fire Department I		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
06/28/2023	Mcniel, Patrick		\$	510.00
	Contributor address; City; State; Zip Code			
	тх			
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions	 s)	
Firefigher		Cyfair Fire Department I		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
06/14/2023	Mcniel, Patrick	/		510.00
	Contributor address; City; State; Zip Code		· ·	10.00
	Culturbulor dudress, City, State, Lip Code			
	тх			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	\$)	
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
05/31/2023	Mcniel, Patrick		\$	510.00
ľ	Contributor address; City; State; Zip Code			
	тх			
Drincinal occur	pation / Job title (See Instructions)	Employer (See Instructions	<u></u>	
Firefigher		Cyfair Fire Department I		
-	Full name of contributor Out-of-state PAC (ID#:			
Date 05/17/2023	Full name of contributor out-of-state PAC (ID#: Mcniel, Patrick	)	Amount of Contribution (\$)	510.00
	Contributor address; City; State; Zip Code		+	10.00
	Continuation address, City, State, Zip Code			
	ТХ			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> ۶)	
Firefigher		Cyfair Fire Department I	HCESD9	

The Instruc	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 65/118 Rpt: 68/121	
2 FILER NAME Cy-Fair Profe	essional Firefighters Political Action Committee		3 Filer ID (Ethics Commission File 00087022	ers)
4 Date 06/28/2023	<ul> <li>5 Full name of contributor out-of-state PAC (ID#: Meyer, Levi</li> <li>6 Contributor address; City; State; Zip Code</li> </ul>	)	7 Amount of Contribution (\$)	\$15.00
	тх			
8 Principal occup Firefigher	pation / Job title (See Instructions)	9 Employer (See Instructions Cyfair Fire Department H		
Date 06/14/2023	Full name of contributor out-of-state PAC (ID#: Meyer, Levi Contributor address; City; State; Zip Code TX		Amount of Contribution (\$)	\$15.00
Principal occu Firefigher	pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I		
Date 05/31/2023	Full name of contributor out-of-state PAC (ID#: Meyer, Levi Contributor address; City; State; Zip Code	)	Amount of Contribution (\$)	\$15.00
Principal occu Firefigher	TX pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I		
Date 06/28/2023	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	\$10.00
Principal occu Firefigher	TX pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I		
Date 06/14/2023	Full name of contributor out-of-state PAC (ID#: Moon, Christopher Contributor address; City; State; Zip Code	)	Amount of Contribution (\$)	\$10.00
	тх			

The Instru	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 66/118 Rpt: 69/121	
2 FILER NAME Cy-Fair Profe	essional Firefighters Political Action Committee		3 Filer ID (Ethics Commission File 00087022	ers)
4 Date 05/31/2023	<ul> <li>5 Full name of contributor out-of-state PAC (ID#: Moon, Christopher</li> <li>6 Contributor address; City; State; Zip Code</li> </ul>	)	7 Amount of Contribution (\$) \$	\$10.00
	тх			
8 Principal occu Firefigher	pation / Job title (See Instructions)	9 Employer (See Instructions Cyfair Fire Department H		
Date 05/17/2023	Full name of contributor       out-of-state PAC (ID#:_         Moon, Christopher       Outributor address; City; State; Zip Code         TX       TX	)	Amount of Contribution (\$)	\$10.00
Principal occu Firefigher	pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I	,	
Date 05/03/2023	Full name of contributor out-of-state PAC (ID#: Moon, Christopher Contributor address; City; State; Zip Code	)	Amount of Contribution (\$)	\$10.00
Principal occu Firefigher	TX pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I		
Date 04/19/2023	Full name of contributor out-of-state PAC (ID#: Moon, Christopher Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) \$	\$10.00
Principal occu Firefigher	TX pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I		
Date 04/05/2023	Full name of contributor out-of-state PAC (ID#: Moon, Christopher Contributor address; City; State; Zip Code	)	Amount of Contribution (\$)	\$10.00
	ТХ		Į	

The Instruc	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 67/118 Rpt: 70/121
2 FILER NAME Cy-Fair Profe	essional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
06/28/2023	<ul> <li>5 Full name of contributor out-of-state PAC (ID#: Muse, Joseph</li> <li>6 Contributor address; City; State; Zip Code</li> </ul>	)	7 Amount of Contribution (\$) \$10
	TX	·	
B Principal occup Firefigher	pation / Job title (See Instructions)	9 Employer (See Instructions Cyfair Fire Department I	
Date 06/14/2023	Full name of contributor out-of-state PAC (ID#: Muse, Joseph Contributor address; City; State; Zip Code TX		Amount of Contribution (\$) \$10
Principal occup Firefigher	pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I	,
Date 05/31/2023	Full name of contributor out-of-state PAC (ID#: Muse, Joseph Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) \$10
Principal occur Firefigher	TX pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I	
Date 05/17/2023	Full name of contributor out-of-state PAC (ID#: Muse, Joseph Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) \$10
Principal occur Firefigher	TX pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I	
Date 05/03/2023	Full name of contributor out-of-state PAC (ID#: Muse, Joseph Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) \$10
	тх		

The Instruc	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 68/118 Rpt: 71/121
2 FILER NAME Cy-Fair Profe	essional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
04/19/2023	<ul> <li>5 Full name of contributor out-of-state PAC (ID#:</li></ul>	)	7 Amount of Contribution (\$) \$10.
	TX		
8 Principal occup Firefigher	pation / Job title (See Instructions)	9 Employer (See Instructions) Cyfair Fire Department F	
Date 04/05/2023	Full name of contributor out-of-state PAC (ID#: Muse, Joseph Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) \$10.
Principal occup Firefigher	pation / Job title (See Instructions)	Employer (See Instructions) Cyfair Fire Department F	,
Date 03/22/2023	Full name of contributor out-of-state PAC (ID#: Muse, Joseph Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) \$10.
Principal occup Firefigher	TX pation / Job title (See Instructions)	Employer (See Instructions) Cyfair Fire Department H	
Date 03/08/2023	Full name of contributor out-of-state PAC (ID#: Muse, Joseph Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) \$10.
Principal occup Firefigher	TX pation / Job title (See Instructions)	Employer (See Instructions) Cyfair Fire Department H	
Date 02/22/2023	Full name of contributor out-of-state PAC (ID#: Muse, Joseph Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) \$10.
			5)

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 69/118 Rpt: 72/121	
2 FILER NAME			3 Filer ID (Ethics Commission F	-ilers)
	essional Firefighters Political Action Committee		00087022	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
06/28/2023	Neblett, Marco			\$10.00
	6 Contributor address; City; State; Zip Code			
	тх			
8 Principal occup	pation / Job title (See Instructions)	9 Employer (See Instructions	;)	
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
06/14/2023	Neblett, Marco			\$10.00
	Contributor address; City; State; Zip Code			
	TX			
	pation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department I		
Date		)	Amount of Contribution (\$)	
05/31/2023	Neblett, Marco			\$10.00
	Contributor address; City; State; Zip Code			
1				
	тх			
Principal occur	TX pation / Job title (See Instructions)	Employer (See Instructions	)	
Principal occur Firefigher		Employer (See Instructions Cyfair Fire Department I		
Firefigher	pation / Job title (See Instructions)		HCESD9	\$5.00
Firefigher Date	Dation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_		HCESD9	\$5.00
Firefigher Date	Dation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Nilsen, Gjermund		HCESD9	\$5.00
Firefigher Date	Dation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Nilsen, Gjermund		HCESD9	\$5.00
Firefigher Date 06/28/2023	Full name of contributor out-of-state PAC (ID#:_ Nilsen, Gjermund Contributor address; City; State; Zip Code		HCESD9 Amount of Contribution (\$)	\$5.00
Firefigher Date 06/28/2023	Dation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:	Cyfair Fire Department I	HCESD9 Amount of Contribution (\$)	\$5.00
Firefigher Date 06/28/2023 Principal occur	Dation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:	Cyfair Fire Department H	HCESD9 Amount of Contribution (\$)	\$5.00
Firefigher Date 06/28/2023 Principal occup Firefigher	Dation / Job title (See Instructions)         Full name of contributor       out-of-state PAC (ID#:_         Nilsen, Gjermund         Contributor address; City; State; Zip Code         TX         Dation / Job title (See Instructions)	Cyfair Fire Department H	HCESD9 Amount of Contribution (\$) (\$) HCESD9	
Firefigher Date 06/28/2023 Principal occur Firefigher Date	Dation / Job title (See Instructions)         Full name of contributor       out-of-state PAC (ID#:	Cyfair Fire Department H	HCESD9 Amount of Contribution (\$) (\$) HCESD9	
Firefigher Date 06/28/2023 Principal occur Firefigher Date	Dation / Job title (See Instructions)         Full name of contributor       out-of-state PAC (ID#:	Cyfair Fire Department H	HCESD9 Amount of Contribution (\$) (\$) HCESD9	
Firefigher Date 06/28/2023 Principal occur Firefigher Date	Dation / Job title (See Instructions)         Full name of contributor       out-of-state PAC (ID#:_         Nilsen, Gjermund       Out-of-state; Zip Code         TX       TX         Dation / Job title (See Instructions)       out-of-state PAC (ID#:_         Full name of contributor       out-of-state PAC (ID#:_         Nilsen, Gjermund       Out-of-state PAC (ID#:_         Contributor address; City; State; Zip Code       Out-of-state PAC (ID#:_	Cyfair Fire Department H	HCESD9 Amount of Contribution (\$) (\$) HCESD9	
Firefigher Date 06/28/2023 Principal occur Firefigher Date 06/14/2023	Dation / Job title (See Instructions)     Full name of contributor   out-of-state PAC (ID#:_   Nilsen, Gjermund   Contributor address; City; State; Zip Code   TX   Dation / Job title (See Instructions)   Full name of contributor   out-of-state PAC (ID#:_   Nilsen, Gjermund   Contributor address; City; State; Zip Code	Cyfair Fire Department H	HCESD9 Amount of Contribution (\$) (\$) HCESD9 Amount of Contribution (\$)	
Firefigher Date 06/28/2023 Principal occur Firefigher Date 06/14/2023	Dation / Job title (See Instructions)         Full name of contributor       out-of-state PAC (ID#:_         Nilsen, Gjermund       Out-of-state; Zip Code         TX       TX         Dation / Job title (See Instructions)       out-of-state PAC (ID#:_         Full name of contributor       out-of-state PAC (ID#:_         Nilsen, Gjermund       Out-of-state PAC (ID#:_         Contributor address; City; State; Zip Code       Out-of-state PAC (ID#:_	Cyfair Fire Department H	HCESD9 Amount of Contribution (\$) HCESD9 Amount of Contribution (\$) Amount of Contribution (\$)	\$5.00

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 70/118 Rpt: 73/121	
2 FILER NAME	FILER NAME		3 Filer ID (Ethics Commission File	ers)
	essional Firefighters Political Action Committee		00087022	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)	
05/31/2023	Nilsen, Gjermund			\$5.00
ŀ	6 Contributor address; City; State; Zip Code			
	ТХ			
B Principal occup	pation / Job title (See Instructions)	9 Employer (See Instructions	\$)	
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
05/17/2023	Nilsen, Gjermund			\$5.00
ŀ	Contributor address; City; State; Zip Code			
	ТХ			
	pation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
05/03/2023	Nilsen, Gjermund			\$5.00
Contributor address; City; State; Zip Code				
	ТХ			
Princinal occur			s)	
	pation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Employer (See Instructions Cyfair Fire Department I	HCESD9	
Firefigher Date	Full name of contributor out-of-state PAC (ID#:		HCESD9 Amount of Contribution (\$)	
Firefigher	Full name of contributor out-of-state PAC (ID#: Nilsen, Gjermund		HCESD9 Amount of Contribution (\$)	\$5.00
Firefigher Date	Full name of contributor out-of-state PAC (ID#:		HCESD9 Amount of Contribution (\$)	\$5.00
Firefigher Date	Full name of contributor out-of-state PAC (ID#: Nilsen, Gjermund		HCESD9 Amount of Contribution (\$)	\$5.00
Firefigher Date	Full name of contributor out-of-state PAC (ID#:		HCESD9 Amount of Contribution (\$)	\$5.00
Firefigher Date 04/19/2023	Full name of contributor out-of-state PAC (ID#:	Cyfair Fire Department H	HCESD9 Amount of Contribution (\$)	\$5.00
Firefigher Date 04/19/2023	Full name of contributor out-of-state PAC (ID#:		HCESD9 Amount of Contribution (\$)	\$5.00
Firefigher Date 04/19/2023 Principal occup Firefigher	Full name of contributor       out-of-state PAC (ID#:_         Nilsen, Gjermund       Out-of-state PAC (ID#:_         Contributor address;       City; State; Zip Code         TX       Dation / Job title (See Instructions)	Cyfair Fire Department I	HCESD9 Amount of Contribution (\$)	\$5.00
Firefigher Date 04/19/2023 Principal occup Firefigher Date	Full name of contributor       out-of-state PAC (ID#:	Cyfair Fire Department I	HCESD9 Amount of Contribution (\$) (\$) HCESD9 Amount of Contribution (\$)	
Firefigher Date 04/19/2023 Principal occup Firefigher	Full name of contributor       out-of-state PAC (ID#:_         Nilsen, Gjermund       Out-of-state PAC (ID#:_         Contributor address;       City; State; Zip Code         TX       TX         Dation / Job title (See Instructions)       out-of-state PAC (ID#:_         Full name of contributor       out-of-state PAC (ID#:_         Nilsen, Gjermund       Out-of-state PAC (ID#:_	Cyfair Fire Department I	HCESD9 Amount of Contribution (\$) (\$) HCESD9 Amount of Contribution (\$)	\$5.00
Firefigher Date 04/19/2023 Principal occup Firefigher Date	Full name of contributor       out-of-state PAC (ID#:	Cyfair Fire Department I	HCESD9 Amount of Contribution (\$) (\$) HCESD9 Amount of Contribution (\$)	
Firefigher Date 04/19/2023 Principal occup Firefigher Date	Full name of contributor       out-of-state PAC (ID#:_         Nilsen, Gjermund       Out-of-state PAC (ID#:_         Contributor address;       City; State; Zip Code         TX       TX         Dation / Job title (See Instructions)       out-of-state PAC (ID#:_         Full name of contributor       out-of-state PAC (ID#:_         Nilsen, Gjermund       Out-of-state PAC (ID#:_	Cyfair Fire Department I	HCESD9 Amount of Contribution (\$) (\$) HCESD9 Amount of Contribution (\$)	
Firefigher Date 04/19/2023 Principal occup Firefigher Date	Full name of contributor       out-of-state PAC (ID#:_         Nilsen, Gjermund       Out-of-state PAC (ID#:_         Contributor address;       City; State; Zip Code         TX       TX         Dation / Job title (See Instructions)       Out-of-state PAC (ID#:_         Full name of contributor       out-of-state PAC (ID#:_         Nilsen, Gjermund       Out-of-state PAC (ID#:_	Cyfair Fire Department I	HCESD9 Amount of Contribution (\$) (\$) HCESD9 Amount of Contribution (\$)	
Firefigher Date 04/19/2023 Principal occur Firefigher Date 04/05/2023	Full name of contributor       out-of-state PAC (ID#:_         Nilsen, Gjermund       Contributor address; City; State; Zip Code         TX       TX         Dation / Job title (See Instructions)       out-of-state PAC (ID#:_         Full name of contributor       out-of-state PAC (ID#:_         Nilsen, Gjermund       Contributor address; City; State; Zip Code	Cyfair Fire Department I	HCESD9 Amount of Contribution (\$) s) HCESD9 Amount of Contribution (\$)	

The Instru	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 71/118 Rpt: 74/121
2 FILER NAME Cy-Fair Profe	essional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 03/22/2023	<ul> <li>5 Full name of contributor out-of-state PAC (ID#: Nilsen, Gjermund</li> <li>6 Contributor address; City; State; Zip Code</li> </ul>	)	7 Amount of Contribution (\$) \$5.00
	тх		
8 Principal occu Firefigher	pation / Job title (See Instructions)	9 Employer (See Instructions) Cyfair Fire Department F	
Date 03/08/2023	Full name of contributor out-of-state PAC (ID#: Nilsen, Gjermund Contributor address; City; State; Zip Code TX		Amount of Contribution (\$) \$5.00
Principal occu Firefigher	pation / Job title (See Instructions)	Employer (See Instructions) Cyfair Fire Department F	,
Date 02/22/2023	Full name of contributor out-of-state PAC (ID#: Nilsen, Gjermund Contributor address; City; State; Zip Code	)	Amount of Contribution (\$)
Principal occu Firefigher	TX pation / Job title (See Instructions)	Employer (See Instructions) Cyfair Fire Department H	,
Date 06/28/2023	Full name of contributor out-of-state PAC (ID#:_ Ocasio, Joel Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) \$5.00
Principal occu	TX pation / Job title (See Instructions)	Employer (See Instructions) Cyfair Fire Department F	
Firefigher			
Firefigher Date 06/14/2023	Full name of contributor out-of-state PAC (ID#: Ocasio, Joel Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) \$5.00

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 72/118 Rpt: 75/121	_
2 FILER NAME	FILER NAME		3 Filer ID (Ethics Commission Filers	s)
	essional Firefighters Political Action Committee		00087022	-,
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
05/31/2023	Ocasio, Joel		\$	5.00
	6 Contributor address; City; State; Zip Code		1	
	ТХ			
	upation / Job title (See Instructions)	9 Employer (See Instructions		
Firefigher		Cyfair Fire Department	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
05/17/2023	Ocasio, Joel		\$	5.00
	Contributor address; City; State; Zip Code		1	
	ТХ			
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	\$)	
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
05/03/2023	Ocasio, Joel		\$!	5.00
	Contributor address; City; State; Zip Code		1	
	ТХ			
	upation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
04/19/2023	Ocasio, Joel		\$5	5.00
	Contributor address; City; State; Zip Code			
	ТХ			
•	upation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
04/05/2023	Ocasio, Joel		\$	5.00
	Contributor address; City; State; Zip Code	,	1	
	ТХ			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	3)	
Firefigher		Cyfair Fire Department	HCESD9	
Firefigher		Cyfair Fire Department	HCESD9	

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 73/118 Rpt: 76/121	
2 FILER NAME			3 Filer ID (Ethics Commission File	ers)
Cy-Fair Profe	essional Firefighters Political Action Committee		00087022	
1 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)	
03/22/2023	Ocasio, Joel			\$5.00
	6 Contributor address; City; State; Zip Code			
	ТХ			
	pation / Job title (See Instructions)	9 Employer (See Instructions		
Firefigher		Cyfair Fire Department	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
03/08/2023	Ocasio, Joel			\$5.00
	Contributor address; City; State; Zip Code			
	TX		-	
	pation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
02/22/2023	Ocasio, Joel			\$5.00
	Contributor address; City; State; Zip Code			
	ту			
Principal occur	TX	Employer (See Instructions	5)	
	TX pation / Job title (See Instructions)	Employer (See Instructions		
Firefigher	pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department	HCESD9	
Firefigher Date	pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_			\$5.00
Firefigher	pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Perez, Andy		HCESD9	\$5.00
Firefigher Date	pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_		HCESD9	\$5.00
Firefigher Date	pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Perez, Andy		HCESD9	\$5.00
Firefigher Date	pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Perez, Andy		HCESD9	\$5.00
Firefigher Date 06/28/2023	pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Perez, Andy Contributor address; City; State; Zip Code		HCESD9 Amount of Contribution (\$)	\$5.00
Firefigher Date 06/28/2023	Full name of contributor out-of-state PAC (ID#:_ Perez, Andy Contributor address; City; State; Zip Code	Cyfair Fire Department	HCESD9 Amount of Contribution (\$)	\$5.00
Firefigher Date 06/28/2023 Principal occup	Full name of contributor out-of-state PAC (ID#:_ Perez, Andy Contributor address; City; State; Zip Code	Cyfair Fire Department	HCESD9 Amount of Contribution (\$)	\$5.00
Firefigher Date 06/28/2023 Principal occup Firefigher	pation / Job title (See Instructions)         Full name of contributor       out-of-state PAC (ID#:_         Perez, Andy         Contributor address; City; State; Zip Code         TX         pation / Job title (See Instructions)	Cyfair Fire Department	HCESD9 Amount of Contribution (\$)	\$5.00
Firefigher Date 06/28/2023 Principal occur Firefigher Date	pation / Job title (See Instructions)         Full name of contributor       out-of-state PAC (ID#:_         Perez, Andy         Contributor address; City; State; Zip Code         TX         pation / Job title (See Instructions)         Full name of contributor         Out-of-state PAC (ID#:_         Full name of contributor	Cyfair Fire Department	HCESD9 Amount of Contribution (\$)	
Firefigher Date 06/28/2023 Principal occur Firefigher Date	pation / Job title (See Instructions)         Full name of contributor       out-of-state PAC (ID#:_         Perez, Andy         Contributor address; City; State; Zip Code         TX         pation / Job title (See Instructions)         Full name of contributor         Out-of-state PAC (ID#:_         Perez, Andy	Cyfair Fire Department	HCESD9 Amount of Contribution (\$)	
Firefigher Date 06/28/2023 Principal occur Firefigher Date	pation / Job title (See Instructions)         Full name of contributor       out-of-state PAC (ID#:_         Perez, Andy         Contributor address; City; State; Zip Code         TX         pation / Job title (See Instructions)         Full name of contributor         Out-of-state PAC (ID#:_         Perez, Andy	Cyfair Fire Department	HCESD9 Amount of Contribution (\$)	
Firefigher Date 06/28/2023 Principal occur Firefigher Date	pation / Job title (See Instructions)         Full name of contributor       out-of-state PAC (ID#:_         Perez, Andy         Contributor address; City; State; Zip Code         TX         pation / Job title (See Instructions)         Full name of contributor         Out-of-state PAC (ID#:_         Perez, Andy	Cyfair Fire Department	HCESD9 Amount of Contribution (\$)	
Firefigher Date 06/28/2023 Principal occur Firefigher Date 06/14/2023	pation / Job title (See Instructions)         Full name of contributor       out-of-state PAC (ID#:_         Perez, Andy         Contributor address; City; State; Zip Code         TX         pation / Job title (See Instructions)         Full name of contributor         Out-of-state PAC (ID#:_         Perez, Andy         Contributor address; City; State; Zip Code         Contributor address; City; State; Zip Code	Cyfair Fire Department	HCESD9 Amount of Contribution (\$) HCESD9 Amount of Contribution (\$) Amount of Contribution (\$)	

The Instruc	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 74/118 Rpt: 77/121	
2 FILER NAME	FILER NAME		<b>3</b> Filer ID (Ethics Commission Filer	rs)
	essional Firefighters Political Action Committee		00087022	
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
05/31/2023	Perez, Andy		\$	\$5.00
	6 Contributor address; City; State; Zip Code			
	<b>T</b> \/			
Drincipal occur	TX pation / Job title (See Instructions)	9 Employer (See Instructions		
Firefigher		Cyfair Fire Department I		
-				
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	*⊑ 00
05/17/2023	Perez, Andy		4	\$5.00
	Contributor address; City; State; Zip Code			
	ТХ			
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions	l ;)	
Firefigher		Cyfair Fire Department I		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
05/03/2023	Perez, Andy			\$5.00
	тх			
	pation / Job title (See Instructions)	Employer (See Instructions		
Firefigher	,		HCESD9	
		Cyfair Fire Department I		
Date	Full name of contributor out-of-state PAC (ID#:	Cyfair Fire Department	Amount of Contribution (\$)	
-	Full name of contributor     Image: out-of-state PAC (ID#:       Perez, Andy     Image: out-of-state PAC (ID#:	Cyfair Fire Department	Amount of Contribution (\$)	\$5.00
Date		Cyfair Fire Department	Amount of Contribution (\$)	\$5.00
Date	Perez, Andy	Cyfair Fire Department	Amount of Contribution (\$)	\$5.00
Date	Perez, Andy Contributor address; City; State; Zip Code	Cyfair Fire Department	Amount of Contribution (\$)	\$5.00
Date 04/19/2023	Perez, Andy Contributor address; City; State; Zip Code	)	Amount of Contribution (\$)	\$5.00
Date 04/19/2023	Perez, Andy Contributor address; City; State; Zip Code	Employer (See Instructions Cyfair Fire Department I	Amount of Contribution (\$) \$	\$5.00
Date 04/19/2023 Principal occup Firefigher	Perez, Andy Contributor address; City; State; Zip Code TX Dation / Job title (See Instructions)	Employer (See Instructions	Amount of Contribution (\$) \$ \$ HCESD9	\$5.00
Date 04/19/2023 Principal occup	Perez, Andy Contributor address; City; State; Zip Code TX Dation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:	Employer (See Instructions	Amount of Contribution (\$) \$ S) HCESD9 Amount of Contribution (\$)	\$5.00
Date 04/19/2023 Principal occup Firefigher Date	Perez, Andy Contributor address; City; State; Zip Code TX Dation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Perez, Andy	Employer (See Instructions	Amount of Contribution (\$) \$ S) HCESD9 Amount of Contribution (\$)	
Date 04/19/2023 Principal occup Firefigher Date	Perez, Andy Contributor address; City; State; Zip Code TX Dation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:	Employer (See Instructions	Amount of Contribution (\$) \$ S) HCESD9 Amount of Contribution (\$)	
Date 04/19/2023 Principal occup Firefigher Date	Perez, Andy Contributor address; City; State; Zip Code TX Dation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Perez, Andy	Employer (See Instructions	Amount of Contribution (\$) \$ S) HCESD9 Amount of Contribution (\$)	
Date 04/19/2023 Principal occup Firefigher Date	Perez, Andy Contributor address; City; State; Zip Code TX Dation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Perez, Andy	Employer (See Instructions	Amount of Contribution (\$) \$ S) HCESD9 Amount of Contribution (\$)	
Date 04/19/2023 Principal occur Firefigher Date 04/05/2023	Perez, Andy Contributor address; City; State; Zip Code TX Dation / Job title (See Instructions) Full name of contributor	Employer (See Instructions	Amount of Contribution (\$) \$ HCESD9 Amount of Contribution (\$) \$	

The Instruction Guide explains how to complete this form	n.	1 Total pages Schedule A1: Sch: 75/118 Rpt: 78/121
FILER NAME		<b>3</b> Filer ID (Ethics Commission Filers)
Cy-Fair Professional Firefighters Political Action Committee		00087022
4 Date 5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
03/22/2023 Perez, Andy		\$5.00
6 Contributor address; City; State; Zip Code		
ТХ		
	Employer (See Instructions)	
Firefigher	Cyfair Fire Department H	ICESD9
Date Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
03/08/2023 Perez, Andy		\$5.00
Contributor address; City; State; Zip Code		
ТХ		
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	1
Firefigher	Cyfair Fire Department H	ICESD9
Date Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
06/28/2023 Plengemeyer, Kyle		\$15.00
Contributor address; City; State; Zip Code		
ТХ		
	Employer (See Instructions)	
Firefigher	Cyfair Fire Department H	ICESD9
Date Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
06/14/2023 Plengemeyer, Kyle		\$15.00
Contributor address; City; State; Zip Code		
TX		
	Employer (See Instructions)	
Firefigher	Cyfair Fire Department H	
Date Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
05/31/2023 Plengemeyer, Kyle		\$15.00
Contributor address; City; State; Zip Code		
	1	
ТХ		
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	
Principal occupation / Job title (See Instructions)	Employer (See Instructions) Cyfair Fire Department H	

The Instruction Guide explains how to complete this form.       1       Total pages Schedule A1: Sch: 76/118 Rpt: 79/121         2       FILER NAME Cy-Fair Professional Firefighters Political Action Committee       3       Filer ID (Ethics Commission File 00087022         4       Date 05/17/2023       5       Full name of contributor       out-of-state PAC (ID#:
Cy-Fair Professional Firefighters Political Action Committee       00087022         4       Date 05/17/2023       5       Full name of contributor Plengemeyer, Kyle       7       Amount of Contribution (\$)         6       Contributor address; City; State; Zip Code       7       Amount of Contribution (\$)       \$         7       TX       9       Employer (See Instructions) Firefigher       9       Employer (See Instructions) Cyfair Fire Department HCESD9         Date 05/03/2023       Plengemeyer, Kyle Contributor address; City; State; Zip Code       Amount of Contribution (\$)       \$         Virolization occupation / Job title (See Instructions) Firefigher       Plengemeyer, Kyle Contributor address; City; State; Zip Code       Amount of Contribution (\$)       \$         05/03/2023       Plengemeyer, Kyle Contributor address; City; State; Zip Code       Employer (See Instructions) Cyfair Fire Department HCESD9       \$         Date 04/19/2023       Full name of contributor       out-of-state PAC (ID#:) Plengemeyer, Kyle       Amount of Contribution (\$)       \$         Principal occupation / Job title (See Instructions) Tx       Employer (See Instructions) Cyfair Fire Department HCESD9       \$         Pirefigher       Contributor address; City; State; Zip Code       Amount of Contribution (\$)       \$         Principal occupation / Job title (See Instructions) Tx       Employer (See Instructions) Cyfair Fire Department HC
Cy-Fair Professional Firefighters Political Action Committee       00087022         4       Date 05/17/2023       5       Full name of contributor Plengemeyer, Kyle       7       Amount of Contribution (\$)         6       Contributor address; City; State; Zip Code       7       Amount of Contribution (\$)       \$         7       Tx       9       Employer (See Instructions) Firefigher       9       Employer (See Instructions) Cyfair Fire Department HCESD9         Date 05/03/2023       Full name of contributor Plengemeyer, Kyle       out-of-state PAC (ID#) Contributor address; City; State; Zip Code       Amount of Contribution (\$)       \$         7       Tx       Firefigher       Amount of Contribution (\$)       \$         05/03/2023       Plengemeyer, Kyle Contributor address; City; State; Zip Code       Amount of Contribution (\$)       \$         7       Tx       Employer (See Instructions) Cyfair Fire Department HCESD9       \$         Date 04/19/2023       Full name of contributor Tx       out-of-state PAC (ID#
05/17/2023       Plengemeyer, Kyle
6       Contributor address; City; State; Zip Code         TX       Principal occuration / Job title (See Instructions)       Pemployer (See Instructions)         Firefigher       Pull name of contributor       out-of-state PAC (ID#         Date       Full name of contributor       out-of-state PAC (ID#         05/03/2023       Plengemeyer, Kyle       Amount of Contribution (\$)         Contributor address; City; State; Zip Code       TX       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#       Amount of Contribution (\$)         04/19/2023       Full name of contributor       out-of-state PAC (ID#       Amount of Contribution (\$)         TX       Tx       Tx       Amount of Contribution (\$)       S         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       S         TX       Tx       Tx       Amount of Contribution (\$)       S         Principal occupation / Job title (See In
Image: TX       TX         8       Principal occupation / Job title (See Instructions) Firefigher       9       Employer (See Instructions) Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/03/2023       Plengemeyer, Kyle
Image: TX       TX         8       Principal occupation / Job title (See Instructions) Firefigher       9       Employer (See Instructions) Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/03/2023       Plengemeyer, Kyle
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Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:)         04/19/2023       Plengemeyer, Kyle
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:)         04/19/2023       Plengemeyer, Kyle
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Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         04/19/2023       Plengemeyer, Kyle       \$         Contributor address; City; State; Zip Code       TX         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:)         04/05/2023       Plengemeyer, Kyle       \$
04/19/2023       Plengemeyer, Kyle       \$         Contributor address; City; State; Zip Code       \$         TX       TX         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:)         04/05/2023       Plengemeyer, Kyle       \$
Contributor address; City; State; Zip Code         TX         Principal occupation / Job title (See Instructions)         Firefigher         Date         Full name of contributor         04/05/2023         Plengemeyer, Kyle
TX       Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:)         04/05/2023       Plengemeyer, Kyle       \$
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         04/05/2023       Plengemeyer, Kyle       \$
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         04/05/2023       Plengemeyer, Kyle       \$
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         04/05/2023       Plengemeyer, Kyle       \$
Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         04/05/2023       Plengemeyer, Kyle       \$
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2 FILER NAME	FILER NAME		<b>3</b> Filer ID (Ethics Commission Filers)	)
	essional Firefighters Political Action Committee		00087022	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)	
06/28/2023	Potenza, John		\$5	5.00
	6 Contributor address; City; State; Zip Code			
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8 Principal occup	pation / Job title (See Instructions)	9 Employer (See Instructions	δ)	
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:_	<u> </u> )	Amount of Contribution (\$)	
06/14/2023	Potenza, John			5.00
	Contributor address; City; State; Zip Code		4	
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Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)	
Firefigher		Cyfair Fire Department I	,	
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	Contributor address; City; State; Zip Code			
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Firefigher		Cyfair Fire Department I	,	
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05/03/2023	Potenza, John	/		5.00
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Firefigher		Cyfair Fire Department I		
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2 FILER NAME			<b>3</b> Filer ID (Ethics Commission File	ers)
Cy-Fair Profess	sional Firefighters Political Action Committee		00087022	
4 Date 5	Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
04/19/2023	Potenza, John			\$5.00
6	Contributor address; City; State; Zip Code			
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	tion / Job title (See Instructions)	9 Employer (See Instructions		
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
04/05/2023	Potenza, John			\$5.00
····	Contributor address; City; State; Zip Code			
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	tion / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
06/28/2023	Rand, Nicholas		\$	\$10.00
	Contributor address; City; State; Zip Code			
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Principal occupat	tion / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I		
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Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	*** • • •
06/14/2023	Rand, Nicholas		\$	\$10.00
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05/31/2023	Full name of contributor out-of-state PAC (ID#: Rand, Nicholas	/		\$10.00
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05/17/2023       Rand, Nicholas       S10.0         6       Contributor address: City: State: Zip Code       S10.0         7       TX       Principal occupation / Job thit (See Instructions)       S10.0         Date       Full name of contributor       out-of-state PAC (D#       Amount of Contribution (\$)         05/03/2023       Rand, Nicholas       Contributor address; City: State: Zip Code       Amount of Contribution (\$)         05/03/2023       Full name of contributor       out-of-state PAC (D#       Amount of Contribution (\$)         10       Full name of contributor       out-of-state PAC (D#       Amount of Contribution (\$)         11       Full name of contributor       out-of-state PAC (D#       Amount of Contribution (\$)         04/19/2023       Full name of contributor       out-of-state PAC (D#       Amount of Contribution (\$)         11       TX       Employer (See Instructions)       S10.0         11       TX       Employer (See Instructions)       S10.0         12       Full name of contributor       out-of-state PAC (D#       Amount of Contribution (\$)         04/19/2023       Full name of contributor       out-of-state PAC (D#       Amount of Contribution (\$)         13       TX       Employer (See Instructions)       S10.0         14       TX					
Cy-Fair Professional Firefighters Political Action Committee       00087022         4 Date 05/17/2023       5 Pull name of contribution   out-of-state PAC (Date TX       7 Amount of Contribution (\$) Contribution address; City, State; Zip Code       7         8 Principal occupation / Job title (See Instructions) Firefighter       9 Employer (See Instructions) Cyfair Fire Department HCESD9       Amount of Contribution (\$) Cyfair Fire Department HCESD9         05/03/2023       Rand, Nicholas       0ut-of-state PAC (Date       Amount of Contribution (\$) Cyfair Fire Department HCESD9         05/03/2023       Rand, Nicholas       Cut-of-state PAC (Date       Amount of Contribution (\$) Cyfair Fire Department HCESD9         05/03/2023       Rand, Nicholas       Employer (See Instructions) Cyfair Fire Department HCESD9       \$10.0         7 X       Principal occupation / Job title (See Instructions)       Employer (See Instructions) Cyfair Fire Department HCESD9       \$10.0         04/19/2023       Full name of contributor       Out-of-state PAC (Date       Amount of Contribution (\$) S10.0         04/19/2023       Full name of contributor       Out-of-state PAC (Date       Amount of Contribution (\$) S10.0         04/05/2023       Full name of contributor       Out-of-state PAC (Date       Amount of Contribution (\$) S10.0         04/05/2023       Full name of contributor       Out-of-state PAC (Date       Amount of Contribution (\$) Contributor address; City, State; Zip C	The Instruc	ction Guide explains how to complete this f	orm.		
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05/17/2023       Rand, Nicholas       \$10.0         6       Contributor address: City: State: Zip Code       \$10.0         7       Tx       9       Employer (See Instructions) Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#       Amount of Contribution (\$) S10.0         05/03/2023       Rand, Nicholas       Amount of Contribution (\$) Contributor address; City: State, Zip Code       Amount of Contribution (\$) S10.0         7x       Principal occupation / Job title (See Instructions) Firefigher       Employer (See Instructions) Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#       Amount of Contribution (\$) S10.0         04/19/2023       Full name of contributor       out-of-state PAC (ID#       Amount of Contribution (\$) S10.0         04/19/2024       Full name of contributor       out-of-state PAC (ID#       Amount of Contribution (\$) S10.0         04/05/2023       Full name of contributor       out-of-state PAC (ID#       Amount of Contribution (\$) S10.0         04/05/2023       Full name of contributor       out-of-state PAC (ID#       Amount of Contribution (\$) S10.0         04/05/2023       Full name of contributor       out-of-state PAC (ID#       Amount of Contribution (\$) Contributor address: City: State: Zip Code       Amount of Contribution (\$) S10.0         0	Cy-Fair Profe	essional Firefighters Political Action Committee			
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Date       Full name of contributor       out-ot-state PAC (ID#)       Amount of Contribution (\$)         05/03/2023       Rand, Nicholas       \$10.0         Contributor address; City; State; Zip Code       TX       Principal occupation / Job title (See Instructions)         Firefigher       Cytair Fire Department HCESD9       Amount of Contribution (\$)         O4/19/2023       Rand, Nicholas       S10.0         Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Contributor address; City; State; Zip Code         TX       Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Contributor       out-ot-state PAC (ID#)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Contributor address; City; State; Zip Code       Amount of Contribution (\$)         O4/05/2023       Full name of contributor       out-ot-state PAC (ID#)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Contributor address; City; State; Zip Code       Amount of Contribution (\$)         03/22/2023       Full name of contributor       out-ot-state PAC (ID#	8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)	
05/03/2023       Rand, Nicholas       \$10.0         Contributor address; City; State; Zip Code       TX         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Contributor address; City; State; Zip Code         Date       Full name of contributor       out-of-state PAC (ID#)         Amount of Contribution address; City; State; Zip Code       Amount of Contribution (\$)         TX       Employer (See Instructions)         Contributor address; City; State; Zip Code       Amount of Contribution (\$)         TX       Employer (See Instructions)         Firefigher       Contributor address; City; State; Zip Code         Date       Full name of contributor       out-of-state PAC (ID#	Firefigher		Cyfair Fire Department	HCESD9	
05/03/2023       Rand, Nicholas       \$10.0         Contributor address; City; State; Zip Code       TX         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Contributor address; City; State; Zip Code         Date       Full name of contributor       out-of-state PAC (ID#)         Amount of Contribution address; City; State; Zip Code       Amount of Contribution (\$)         TX       Employer (See Instructions)         Contributor address; City; State; Zip Code       Amount of Contribution (\$)         TX       Employer (See Instructions)         Firefigher       Contributor address; City; State; Zip Code         Date       Full name of contributor       out-of-state PAC (ID#	Date	Full name of contributor out-of-state PAC (ID#:_	<u> </u>	Amount of Contribution (\$)	
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Tx       Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#)         Amount of Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Tx       Employer (See Instructions)         Friefigher       Contributor address; City; State; Zip Code         Tx       Employer (See Instructions)         Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor         04/05/2023       Full name of contributor         Rand, Nicholas       Cyfair Fire Department HCESD9         Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Value       Full name of contributor       out-of-state PAC (ID#)         Od/05/2023       Full name of contributor       out-of-state PAC (ID#)         Tx       Employer (See Instructions)       \$10.0         Cyfair Fire Department HCESD9       \$10.0         Od/05/2023       Full name of contributor       out-of-state PAC (ID#)         Amount of Contributor address; City; State; Zip Code				•	•
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#)       Amount of Contribution (\$)         04/19/2023       Rand, Nicholas       Contributor address; City; State; Zip Code       Amount of Contribution (\$)         TX       TX       Employer (See Instructions)       \$10.0         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$10.0         Firefigher       Contributor address; City; State; Zip Code       Amount of Contribution (\$)         04/05/2023       Full name of contributor       out-of-state PAC (ID#)       Amount of Contribution (\$)         04/05/2023       Rand, Nicholas       S10.0       \$10.0         Contributor address; City; State; Zip Code       Amount of Contribution (\$)       \$10.0         TX       TX       Employer (See Instructions)       \$10.0         Firefigher       Contributor       out-of-state PAC (ID#					
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#					
Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)       \$10.0         04/19/2023       Rand, Nicholas		Тх			
Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor address; City; State; Zip Code       Amount of Contribution (\$)         TX       TX         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor         04/05/2023       Rand, Nicholas         Contributor address; City; State; Zip Code       Amount of Contribution (\$)         04/05/2023       Full name of contributor       out-of-state PAC (ID#:         04/05/2023       Rand, Nicholas       S10.0         Contributor address; City; State; Zip Code       Amount of Contribution (\$)         TX       Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:         Y       Contributor address; City; State; Zip Code       Amount of Contribution (\$)         03/22/2023       Full name of contributor       out-of-state PAC (ID#:       Amount of Contribution (\$)         03/22/2023       Rand, Nicholas       City; State; Zip Code       Amount of Contribution (\$)         TX       Contributor address; City; State; Zip Code       Amo	Principal occu	Ination / Job title (See Instructions)	Employer (See Instructions	1s)	
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         04/19/2023       Rand, Nicholas       \$10.0         TX       Contributor address; City; State; Zip Code       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         04/05/2023       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         04/05/2023       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         04/05/2023       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         TX       Fincipal occupation / Job title (See Instructions)       Employer (See Instructions)       \$10.0         Firefigher       TX       Employer (See Instructions)       \$10.0         O3/22/2023       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         03/22/2023       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)       \$10.0         TX       T       T       T       T       T       T         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of				,	
04/19/2023       Rand, Nicholas       \$10.0         Contributor address; City; State; Zip Code       TX         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:)         Amount of Contribution (\$)       \$10.0         04/05/2023       Rand, Nicholas       \$10.0         TX       Frincipal occupation / Job title (See Instructions)       \$10.0         TX       Frincipal occupation / Job title (See Instructions)       \$10.0         Firefigher       Cyfair Fire Department HCESD9       \$10.0         Date       Full name of contributor       out-of-state PAC (ID#:		Full name of contributor		1	
Contributor address; City; State; Zip Code         TX         Principal occupation / Job title (See Instructions)         Firefigher         Date         04/05/2023         Rand, Nicholas         Contributor address; City; State; Zip Code         TX         Principal occupation / Job title (See Instructions)         Employer (See Instructions)         Contributor address; City; State; Zip Code         TX         Principal occupation / Job title (See Instructions)         Firefigher         Date         Principal occupation / Job title (See Instructions)         Firefigher         Date         Oate         Oate         TX         Principal occupation / Job title (See Instructions)         Employer (See Instructions)         Cyfair Fire Department HCESD9         Date       Full name of contributor         03/22/2023       Rand, Nicholas         Contributor address; City; State; Zip Code         TX       Amount of Contribution (\$)         10.0         TX         Principal occupation / Job title (See Instructions)         Employer (See Instructions)         TX         Principal occupation /			/		\$10.00
TX         Principal occupation / Job title (See Instructions) Firefigher       Employer (See Instructions) Cyfair Fire Department HCESD9         Date       Full name of contributor out-of-state PAC (D#:) O4/05/2023       Amount of Contribution (\$) Rand, Nicholas         O4/05/2023       Full name of contributor out-of-state PAC (D#:) Contributor address; City; State; Zip Code       Amount of Contribution (\$) TX         Principal occupation / Job title (See Instructions) Firefigher       Employer (See Instructions) Cyfair Fire Department HCESD9         Date       Full name of contributor out-of-state PAC (D#:) O3/22/2023       Amount of Contribution (\$) Rand, Nicholas         Date       Full name of contributor out-of-state PAC (D#:) Contributor address; City; State; Zip Code       Amount of Contribution (\$) TX         Principal occupation / Job title (See Instructions)       Employer (See Instructions) Contributor address; City; State; Zip Code         TX       Employer (See Instructions)       \$10.0         TX       Employer (See Instructions)       \$10.0         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         TX       Employer (See Instructions)       \$10.0	04/10/2020				PT0.00
Principal occupation / Job title (See Instructions) Firefigher       Employer (See Instructions) Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:) Contributor address; City; State; Zip Code       Amount of Contribution (\$)         04/05/2023       Rand, Nicholas       full name of contributor address; City; State; Zip Code       Amount of Contribution (\$)         TX       Principal occupation / Job title (See Instructions) Firefigher       Employer (See Instructions) Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:) O3/22/2023       Amount of Contributor         03/22/2023       Full name of contributor       out-of-state PAC (ID#:) Contributor address; City; State; Zip Code       Amount of Contribution (\$)         TX       Tx       Full name of contributor       out-of-state PAC (ID#:) Contributor address; City; State; Zip Code       Amount of Contribution (\$)         TX       Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$10.0         TX       Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$10.0		Contributor address, City, State, Zip Code			
Principal occupation / Job title (See Instructions) Firefigher       Employer (See Instructions) Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:) Contributor address; City; State; Zip Code       Amount of Contribution (\$)         04/05/2023       Rand, Nicholas       full name of contributor address; City; State; Zip Code       Amount of Contribution (\$)         TX       Principal occupation / Job title (See Instructions) Firefigher       Employer (See Instructions) Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:) O3/22/2023       Amount of Contributor         03/22/2023       Full name of contributor       out-of-state PAC (ID#:) Contributor address; City; State; Zip Code       Amount of Contribution (\$)         TX       Tx       Full name of contributor       out-of-state PAC (ID#:) Contributor address; City; State; Zip Code       Amount of Contribution (\$)         TX       Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$10.0         TX       Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$10.0					
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:)         04/05/2023       Rand, Nicholas       Amount of Contribution (\$)         Contributor address; City; State; Zip Code       TX       Amount of Contributions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Still         Firefigher       Cupter State PAC (ID#:)       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         03/22/2023       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         03/22/2023       Rand, Nicholas       Contributor address; City; State; Zip Code       Amount of Contribution (\$)         TX       Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$10.0         TX       Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$10.0         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$10.0		Тх			
Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         04/05/2023       Rand, Nicholas       \$10.0         Contributor address; City; State; Zip Code       TX       Fincipal occupation / Job title (See Instructions)         Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:)         Cyfair Fire Department HCESD9       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#:)         O3/22/2023       Rand, Nicholas       Amount of Contribution (\$)         TX       TX       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         TX       TX       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)	Principal occu		Emplover (See Instructions	<u> </u>	
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         04/05/2023       Rand, Nicholas       \$10.0         Contributor address; City; State; Zip Code       TX       Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Cutributor address; City; State; Zip Code       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         03/22/2023       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         TX       TX       TX       TX       Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$10.0         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$10.0	•			,	
04/05/2023       Rand, Nicholas       \$10.0         Contributor address; City; State; Zip Code       TX         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:)         Amount of Contribution (\$)       Rand, Nicholas       \$10.0         03/22/2023       Rand, Nicholas       \$10.0         TX       Contributor address; City; State; Zip Code       Amount of Contribution (\$)         TX       TX       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$10.0         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$10.0		Full name of contributor			
Contributor address; City; State; Zip Code         TX         Principal occupation / Job title (See Instructions)         Firefigher         Date         Full name of contributor         03/22/2023         Rand, Nicholas         Contributor address; City; State; Zip Code         TX         Principal occupation / Job title (See Instructions)         Employer (See Instructions)         Cyfair Fire Department HCESD9         Amount of Contribution (\$)         Rand, Nicholas         Contributor address; City; State; Zip Code         TX         Principal occupation / Job title (See Instructions)         Employer (See Instructions)			)		¢10.00
TX         Principal occupation / Job title (See Instructions)         Firefigher         Date         Full name of contributor         03/22/2023         Rand, Nicholas         Contributor address; City; State; Zip Code         TX         Principal occupation / Job title (See Instructions)         Employer (See Instructions)         Contributor address; City; State; Zip Code         TX         Principal occupation / Job title (See Instructions)         Employer (See Instructions)	04/03/2023				ΦT0.00
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Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor out-of-state PAC (ID#:)       Amount of Contribution (\$)         03/22/2023       Rand, Nicholas       \$10.0         Contributor address; City; State; Zip Code       TX       TX         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Employer See Instructions)					
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor out-of-state PAC (ID#:)       Amount of Contribution (\$)         03/22/2023       Rand, Nicholas       \$10.0         Contributor address; City; State; Zip Code       TX       TX         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Employer See Instructions)		Тх			
Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         03/22/2023       Rand, Nicholas       \$10.0         Contributor address; City; State; Zip Code       TX       TX         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Employer (See Instructions)	Principal occu		Employer (See Instructions	<u> </u>	
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         03/22/2023       Rand, Nicholas       \$10.0         Contributor address; City; State; Zip Code       TX         Principal occupation / Job title (See Instructions)       Employer (See Instructions)					
03/22/2023       Rand, Nicholas       \$10.0         Contributor address; City; State; Zip Code       \$10.0         TX       TX         Principal occupation / Job title (See Instructions)       Employer (See Instructions)					
Contributor address; City; State; Zip Code         TX         Principal occupation / Job title (See Instructions)         Employer (See Instructions)			)		ቀ10 በበ
TX       Principal occupation / Job title (See Instructions)       Employer (See Instructions)	0312212023			- -	\$10.00
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2	FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)	)
		essional Firefighters Political Action Committee		00087022	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
	03/08/2023	Rand, Nicholas		\$10	0.00
		6 Contributor address; City; State; Zip Code		1	
Ļ		TX	<u>1                                    </u>		
8		pation / Job title (See Instructions)	9 Employer (See Instructions		
	Firefigher		Cyfair Fire Department		
	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
	02/22/2023	Rand, Nicholas		\$10	00.
		Contributor address; City; State; Zip Code			
		ТХ			
_	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions		
	Firefigher		Cyfair Fire Department		
		Full name of contributor out-of-state PAC (ID#:			
	Date 02/08/2023	Rand, Nicholas	)	Amount of Contribution (\$) \$10	<u>، م</u>
	02/00/2025			↓ ↓	.00
		Contributor address; City; State; Zip Code			
		тх			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	\$)	
	Firefigher		Cyfair Fire Department	HCESD9	
	Date	Full name of contributor out-of-state PAC (ID#:_	<u>·</u> )	Amount of Contribution (\$)	
	01/25/2023	Rand, Nicholas		\$10	0.00
		Contributor address; City; State; Zip Code			
		TX	<u> </u>	<u> </u>	
		pation / Job title (See Instructions)	Employer (See Instructions	,	
	Firefigher		Cyfair Fire Department		
	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
	01/11/2023	Rand, Nicholas		\$10	1.00
		Contributor address; City; State; Zip Code			
		тх			
┝	Drincinal OCCU	pation / Job title (See Instructions)	Employer (See Instructions	<u></u>	
	Firefigher		Cyfair Fire Department		
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2 FILER NAME Cy-Fair Profe	essional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers 00087022	3)
06/28/2023	<ul> <li>5 Full name of contributor out-of-state PAC (ID#:_ Roberts, Jason</li> <li>6 Contributor address; City; State; Zip Code</li> </ul>	)	7 Amount of Contribution (\$) \$10	10.00
	ТХ			
8 Principal occup Firefigher	ipation / Job title (See Instructions)	9 Employer (See Instructions Cyfair Fire Department H		
Date 06/14/2023	Full name of contributor out-of-state PAC (ID#:_ Roberts, Jason Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$10	10.00
Principal occu Firefigher	I Ipation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department F	,	
Date 05/31/2023	Full name of contributor out-of-state PAC (ID#: Roberts, Jason Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) \$10	10.00
Principal occu Firefigher	TX Ipation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department H		
Date 05/17/2023	Full name of contributor out-of-state PAC (ID#:_ Roberts, Jason Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) \$10	10.00
Principal occu Firefigher	TX Ipation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department H		
Date 05/03/2023	Full name of contributor out-of-state PAC (ID#:_ Roberts, Jason Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) \$10	10.00
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The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 83/118 Rpt: 86/121
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
Cy-Fair Prof	fessional Firefighters Political Action Committee		00087022
4 Date	5 Full name of contributor Out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)
04/19/2023	Roberts, Jason		\$10.00
	6 Contributor address; City; State; Zip Code		1
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	upation / Job title (See Instructions)	9 Employer (See Instructions	s)
Firefigher		Cyfair Fire Department I	HCESD9
Date	Full name of contributor out-of-state PAC (ID#:_	• )	Amount of Contribution (\$)
06/28/2023	Robertson, Jordan		\$5.00
	Contributor address; City; State; Zip Code		1
	ТХ		
	upation / Job title (See Instructions)	Employer (See Instructions	
Firefigher		Cyfair Fire Department I	HCESD9
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
06/14/2023	Robertson, Jordan		\$5.00
	Contributor address; City; State; Zip Code		1
Dringing oog	TX		<u> </u>
Firefigher	upation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I	
			1
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
05/31/2023	Robertson, Jordan		\$5.00
	Contributor address; City; State; Zip Code		
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Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)
Firefigher	Panori,	Cyfair Fire Department I	
Date	Full name of contributor out-of-state PAC (ID#:_		Amount of Contribution (\$)
05/17/2023	Robertson, Jordan	/	\$5.00
00,21,222	Contributor address; City; State; Zip Code		•
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Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)
Firefigher		Cyfair Fire Department I	HCESD9

The Instruc	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 84/118 Rpt: 87/121
2 FILER NAME Cy-Fair Profe	essional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
05/03/2023	<ul> <li>5 Full name of contributor out-of-state PAC (ID#:_ Robertson, Jordan</li> <li>6 Contributor address; City; State; Zip Code</li> </ul>	)	7 Amount of Contribution (\$) \$5.
	TX		
8 Principal occup Firefigher	pation / Job title (See Instructions)	9 Employer (See Instructions Cyfair Fire Department H	
Date 04/19/2023	Full name of contributor out-of-state PAC (ID#:_ Robertson, Jordan Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) \$5.
Principal occup Firefigher	pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I	•
Date 04/05/2023	Full name of contributor out-of-state PAC (ID#:_ Robertson, Jordan Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) \$5.
Principal occup Firefigher	TX pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department H	
Date 03/22/2023	Full name of contributor out-of-state PAC (ID#:_ Robertson, Jordan Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) \$5.
Principal occup Firefigher	TX pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department H	
Date 06/28/2023	Full name of contributor out-of-state PAC (ID#: Rodriguez, Michael Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) 
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The Instruc	ction Guide explains how to complete this t	form.	1 Total pages Schedule A1: Sch: 85/118 Rpt: 88/121	
2 FILER NAME			3 Filer ID (Ethics Commission Filers	5)
	essional Firefighters Political Action Committee		00087022	·
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
06/14/2023	Rodriguez, Michael		\$20	0.00
	6 Contributor address; City; State; Zip Code		1	
	ТХ	•		
	pation / Job title (See Instructions)	9 Employer (See Instructions		
Firefigher		Cyfair Fire Department	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
05/31/2023	Rodriguez, Michael		\$20	0.00
	Contributor address; City; State; Zip Code		1	
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	pation / Job title (See Instructions)	Employer (See Instructions	,	
Firefigher		Cyfair Fire Department	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
05/17/2023	Rodriguez, Michael		\$20	0.00
	Contributor address; City; State; Zip Code			
	TX	I		
	pation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
05/03/2023	Rodriguez, Michael		\$20	0.00
	Contributor address; City; State; Zip Code			
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Principal occur	pation / Job title (See Instructions)	Employer (See Instructions	5)	
Firefigher	· · · · ·	Cyfair Fire Department		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
04/19/2023	Rodriguez, Michael			0.00
0 11 10/2020	Contributor address; City; State; Zip Code			0.00
	Contributor address, City, State, Zip Code			
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Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	5)	
Firefigher	. ,	Cyfair Fire Department		
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The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 86/118 Rpt: 89/121	
2 FILER NAME			3 Filer ID (Ethics Commission File	ers)
Cy-Fair Profe	essional Firefighters Political Action Committee		00087022	
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
04/05/2023			\$	\$20.00
ľ	6 Contributor address; City; State; Zip Code			
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	pation / Job title (See Instructions)	9 Employer (See Instructions		
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
03/22/2023	Rodriguez, Michael		\$	\$20.00
ľ	Contributor address; City; State; Zip Code			
	ТХ			
	pation / Job title (See Instructions)	Employer (See Instructions	·	
Firefigher		Cyfair Fire Department I	HCESD9	
Date		)	Amount of Contribution (\$)	
03/08/2023	Rodriguez, Michael		\$	\$20.00
	Contributor address; City; State; Zip Code			
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Principal occup Firefigher	pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I		
-	<u> </u>			
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
02/22/2023	Rodriguez, Michael		\$	\$20.00
	Contributor address; City; State; Zip Code			
	тх			
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
Firefigher		Cyfair Fire Department I		
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	
02/08/2023	Full name of contributor out-of-state PAC (ID#: Rodriguez, Michael	)		\$20.00
02/00/2020	Contributor address; City; State; Zip Code			20.00
	Contributor address, City, State, Zip Code			
	ТХ			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> \$)	
Firefigher		Cyfair Fire Department I		
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The Instruc	tion Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 87/118 Rpt: 90/121
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
	essional Firefighters Political Action Committee		00087022
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
01/25/2023	- · · · · · · · · · · · · · · · · · · ·		\$20.00
	6 Contributor address; City; State; Zip Code		1
	ТХ		
	pation / Job title (See Instructions)	9 Employer (See Instructions	
Firefigher		Cyfair Fire Department I	HCESD9
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
01/11/2023	Rodriguez, Michael		\$20.0
ľ	Contributor address; City; State; Zip Code		1
	TX		
	pation / Job title (See Instructions)	Employer (See Instructions	,
Firefigher		Cyfair Fire Department I	
Date		)	Amount of Contribution (\$)
06/28/2023	Sayago, Jesus		\$5.0
	Contributor address; City; State; Zip Code		]
	тх		
Dringingl occur	I X pation / Job title (See Instructions)	Employer (See Instructions	
Firefigher		Cyfair Fire Department I	,
-			
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
06/14/2023	Sayago, Jesus		\$5.0
	Contributor address; City; State; Zip Code		
	тх		
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>
Firefigher	(allon / 002 allo (000),	Cyfair Fire Department I	
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)
05/31/2023	Sayago, Jesus	J	\$5.0
	Contributor address; City; State; Zip Code		
	Continuator address, City, State, Zip Coue		
	тх		
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)
Firefigher		Cyfair Fire Department I	

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The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 88/118 Rpt: 91/121	
2 FILER NAME			3 Filer ID (Ethics Commission File	ers)
	essional Firefighters Political Action Committee		00087022	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
05/17/2023	Sayago, Jesus			\$5.00
	6 Contributor address; City; State; Zip Code			
	TX	t <u></u>		
	pation / Job title (See Instructions)	9 Employer (See Instructions		
Firefigher		Cyfair Fire Department		
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	_
05/03/2023	Sayago, Jesus			\$5.00
	Contributor address; City; State; Zip Code			
	тх			
Princinal occur	pation / Job title (See Instructions)	Employer (See Instructions	<u></u>	
Firefigher		Cyfair Fire Department		
Date	Full name of contributor out-of-state PAC (ID#:			
04/19/2023	Full name of contributor out-of-state PAC (ID#: Sayago, Jesus	)	Amount of Contribution (\$)	\$5.00
04/10/2020	Contributor address; City; State; Zip Code			ψ0.00
	Continuation address, City, State, Zip Code			
	тх			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	;)	
Firefigher		Cyfair Fire Department	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
04/05/2023	Sayago, Jesus			\$5.00
Ī	Contributor address; City; State; Zip Code			
	тх			
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions	<u></u>	
Firefigher		Cyfair Fire Department		
-				
Date 03/22/2023	Full name of contributor out-of-state PAC (ID#: Sayago, Jesus	)	Amount of Contribution (\$)	\$5.00
03/22/2023	Contributor address; City; State; Zip Code			ψ0.00
	Contributor address, City, State, Zip Code			
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Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> ۶)	
Firefigher	•	Cyfair Fire Department		
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3	<ul> <li>Total pages Schedule A1:</li> <li>Sch: 89/118 Rpt: 92/121</li> <li>Filer ID (Ethics Commission Filers) 00087022</li> <li>Amount of Contribution (\$) \$5.00</li> </ul>
) <b>7</b>	00087022 Amount of Contribution (\$)
) <b>7</b>	00087022 Amount of Contribution (\$)
nplover (See Instructions)	\$5.00
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yfair Fire Department HC	CESD9
)	Amount of Contribution (\$)
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nployer (See Instructions)	
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)	Amount of Contribution (\$)
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yfair Fire Department HC	CESD9
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The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 90/118 Rpt: 93/121	
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission File	ers)
Cy-Fair Profe	essional Firefighters Political Action Committee		00087022	
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
06/28/2023	Schwab, Curt			\$10.00
	6 Contributor address; City; State; Zip Code		4	
	тх			
8 Principal occur	pation / Job title (See Instructions)	9 Employer (See Instructions	<u>ا</u> ۶)	
Firefigher		Cyfair Fire Department I		
Date	Full name of contributor out-of-state PAC (ID#:	<u> </u> )	Amount of Contribution (\$)	
06/14/2023	Schwab, Curt	/		\$10.00
00/1-7/2020	Contributor address; City; State; Zip Code			P10.00
	Contributor address, City, State, Zip Code			
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Principal occur	pation / Job title (See Instructions)	Employer (See Instructions	<u></u>	
Firefigher		Cyfair Fire Department I		
-			1	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
05/31/2023	Schwab, Curt		3	\$10.00
	Contributor address; City; State; Zip Code			
	ТХ			
	pation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
05/17/2023	Schwab, Curt		4	\$10.00
	Contributor address; City; State; Zip Code			
	ТХ			
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions	\$)	
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
05/03/2023	Schwab, Curt	/		\$10.00
	Contributor address; City; State; Zip Code		•	<b>P=0</b>
	כטוונווטענטו מעטופיזא, כוגץ, סומוכ, בוף כסמכ			
	тх			
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department I		
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4 Date 5 04/19/2023	ional Firefighters Political Action Committee		Sch: 91/118 Rpt: 94/121 3 Filer ID (Ethics Commission Filers	
04/19/2023		)	00087022	3)
	Full name of contributor       Out-of-state PAC (ID#:         Schwab, Curt       Out-of-state PAC (ID#:         Contributor address;       City; State; Zip Code	)	7 Amount of Contribution (\$) \$10	10.00
	TX			
8 Principal occupation Firefigher	ion / Job title (See Instructions)	9 Employer (See Instructions) Cyfair Fire Department H		
04/05/2023	Full name of contributor       out-of-state PAC (ID#:	)	Amount of Contribution (\$) \$10	10.00
	ion / Job title (See Instructions)	Employer (See Instructions) Cyfair Fire Department F		
Date 03/22/2023	Full name of contributor       out-of-state PAC (ID#:	)	Amount of Contribution (\$)	10.00
	ion / Job title (See Instructions)	Employer (See Instructions) Cyfair Fire Department H		
03/08/2023	Full name of contributor       out-of-state PAC (ID#:         Schwab, Curt       out-of-state PAC (ID#:         Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) \$10	10.00
	TX ion / Job title (See Instructions)	Employer (See Instructions) Cyfair Fire Department H		
02/22/2023	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$) \$10	10.00
	TX ion / Job title (See Instructions)	Employer (See Instructions) Cyfair Fire Department H		

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 92/118 Rpt: 95/121
2 FILER NAME Cy-Fair Profe	essional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
4 Date 06/28/2023	<ul> <li>5 Full name of contributor out-of-state PAC (ID#: Seguerra, Joshua</li> <li>6 Contributor address; City; State; Zip Code</li> </ul>	)	7 Amount of Contribution (\$) \$10.
	тх		
8 Principal occu Firefigher	pation / Job title (See Instructions)	9 Employer (See Instructions Cyfair Fire Department H	
Date 06/14/2023	Full name of contributor out-of-state PAC (ID#: Seguerra, Joshua Contributor address; City; State; Zip Code TX		Amount of Contribution (\$) \$10.
Principal occu Firefigher	pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I	,
Date 05/31/2023	Full name of contributor out-of-state PAC (ID#: Seguerra, Joshua Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) \$10.
Principal occu Firefigher	TX pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I	
Date 06/28/2023	Full name of contributor out-of-state PAC (ID#: Sherrod, Jacob Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) \$5.
Principal occu Firefigher	TX pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I	
Date 06/14/2023	Full name of contributor out-of-state PAC (ID#: Sherrod, Jacob		Amount of Contribution (\$) \$5.0
0012	Contributor address; City; State; Zip Code		

The Instru	iction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 93/118 Rpt: 96/121
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
	fessional Firefighters Political Action Committee		00087022
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
05/31/2023			\$5.0
	6 Contributor address; City; State; Zip Code		
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	upation / Job title (See Instructions)	9 Employer (See Instructions	
Firefigher		Cyfair Fire Department	HCESD9
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
05/17/2023			\$5.0
	Contributor address; City; State; Zip Code		
	ТХ		
	upation / Job title (See Instructions)	Employer (See Instructions	
Firefigher		Cyfair Fire Department	HCESD9
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
05/03/2023	Sherrod, Jacob		\$5.0
	Contributor address; City; State; Zip Code		
	ТХ		
	upation / Job title (See Instructions)	Employer (See Instructions	
Firefigher		Cyfair Fire Department	HCESD9
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
04/19/2023	Sherrod, Jacob		\$5.0
	Contributor address; City; State; Zip Code		
	ТХ		
	upation / Job title (See Instructions)	Employer (See Instructions	•
Firefigher		Cyfair Fire Department	HCESD9
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
04/05/2023	Sherrod, Jacob		\$5.0
	Contributor address; City; State; Zip Code		
	ТХ		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)
Firefigher		Cyfair Fire Department	HCESD9
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The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 94/118 Rpt: 97/121	
2 FILER NAME			3 Filer ID (Ethics Commission Fil	lers)
	essional Firefighters Political Action Committee		00087022	
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
03/22/2023	Sherrod, Jacob			\$5.00
	6 Contributor address; City; State; Zip Code		1	
	ТХ			
	pation / Job title (See Instructions)	9 Employer (See Instructions		
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
06/28/2023	Skow, Bryce			\$10.00
[	Contributor address; City; State; Zip Code		1	
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	pation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
06/14/2023	Skow, Bryce			\$10.00
ĺ	Contributor address; City; State; Zip Code		1	
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	pation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
05/31/2023	Skow, Bryce			\$10.00
	Contributor address; City; State; Zip Code		1	
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	TX	<u> </u>		
	pation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department I	-	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
05/17/2023	Skow, Bryce			\$10.00
	Contributor address; City; State; Zip Code			
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Firefigher	pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I		
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<b>The Instruction Guide explains how to complete this form.</b> <b>2</b> FILER NAME	1 Total pages Schedule A1:
2 FILER NAME	Sch: 95/118 Rpt: 98/121
	3 Filer ID (Ethics Commission Filers)
Cy-Fair Professional Firefighters Political Action Committee	00087022
4 Date 5 Full name of contributor out-of-state PAC (ID#:	) 7 Amount of Contribution (\$)
05/03/2023 Skow, Bryce	\$10.00
6 Contributor address; City; State; Zip Code	
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	over (See Instructions)
Firefigher Cyfair	r Fire Department HCESD9
Date Full name of contributor out-of-state PAC (ID#:	) Amount of Contribution (\$)
04/19/2023 Skow, Bryce	\$10.00
Contributor address; City; State; Zip Code	
ТХ	
	over (See Instructions)
Firefigher Cyfair	r Fire Department HCESD9
Date Full name of contributor out-of-state PAC (ID#:	) Amount of Contribution (\$)
04/05/2023 Skow, Bryce	\$10.00
Contributor address; City; State; Zip Code	
TX	
	byer (See Instructions)
Firefigher Cyfair	r Fire Department HCESD9
Date Full name of contributor out-of-state PAC (ID#:	) Amount of Contribution (\$)
03/22/2023 Skow, Bryce	\$10.00
Contributor address; City; State; Zip Code	
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Principal occupation / Job title (See Instructions) Emplo	yer (See Instructions)
Principal occupation / Job title (See Instructions) Emplo Firefigher Cyfair	r Fire Department HCESD9
Principal occupation / Job title (See Instructions)     Emplo       Firefigher     Cyfair       Date     Full name of contributor	r Fire Department HCESD9) Amount of Contribution (\$)
Principal occupation / Job title (See Instructions)     Emplo       Firefigher     Cyfair       Date     Full name of contributor       03/08/2023     Skow, Bryce	r Fire Department HCESD9
Principal occupation / Job title (See Instructions)     Emplo       Firefigher     Cyfair       Date     Full name of contributor	r Fire Department HCESD9) Amount of Contribution (\$)
Principal occupation / Job title (See Instructions)     Emplo       Firefigher     Cyfair       Date     Full name of contributor       03/08/2023     Skow, Bryce	r Fire Department HCESD9) Amount of Contribution (\$)
Principal occupation / Job title (See Instructions)       Emplo         Firefigher       Cyfair         Date       Full name of contributor       out-of-state PAC (ID#:	r Fire Department HCESD9) Amount of Contribution (\$)
Principal occupation / Job title (See Instructions)       Emplo         Firefigher       Cyfair         Date       Full name of contributor       out-of-state PAC (ID#:	r Fire Department HCESD9 Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)       Emplo         Firefigher       Cyfair         Date       Full name of contributor       out-of-state PAC (ID#:	r Fire Department HCESD9) Amount of Contribution (\$)

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 96/118 Rpt: 99/121	
2 FILER NAME			3 Filer ID (Ethics Commission Filers	s)
Cy-Fair Profe	essional Firefighters Political Action Committee		00087022	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)	
02/22/2023	Skow, Bryce			10.00
	6 Contributor address; City; State; Zip Code		1	
	тх			
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	Σ)	
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
02/08/2023	Skow, Bryce			10.00
	Contributor address; City; State; Zip Code		•	
	Continuation address, City, State, Zip Code			
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Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> ج)	
Firefigher	,	Cyfair Fire Department I		
Date	Full name of contributor Out-of-state PAC (ID#:		Amount of Contribution (\$)	
01/25/2023	Full name of contributor out-of-state PAC (ID#: Skow, Bryce	)		10.00
01/20/2020			↓	.0.00
	Contributor address; City; State; Zip Code			
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Principal occu	pation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department I		
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Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	• • • •
01/11/2023	Skow, Bryce		τ¢	10.00
	Contributor address; City; State; Zip Code			
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Principal occu Firefigher	pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I		
Filelighei			1	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
06/28/2023	Stevens, Darci		\$	\$5.00
	Contributor address; City; State; Zip Code		]	
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-	pation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department I	HCESD9	

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 97/118 Rpt: 100/121	
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filer	rs)
	essional Firefighters Political Action Committee		00087022	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)	
06/14/2023	Stevens, Darci			\$5.00
	6 Contributor address; City; State; Zip Code			
	ТХ			
	pation / Job title (See Instructions)	9 Employer (See Instructions		
Firefigher		Cyfair Fire Department	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
05/31/2023	Stevens, Darci			\$5.00
	Contributor address; City; State; Zip Code			
	ТХ			
	pation / Job title (See Instructions)	Employer (See Instructions	,	
Firefigher		Cyfair Fire Department I	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
05/17/2023	Stevens, Darci		5	\$5.00
ľ	Contributor address; City; State; Zip Code		1	
Di interes	TX		<u> </u>	
Firefigher	pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I		
-				
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	<b>+- - - -</b>
06/28/2023	Sturgis, Casey			\$5.00
	Contributor address; City; State; Zip Code			
	тх			
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
Firefigher		Cyfair Fire Department I		
Date	Full name of contributor Out-of-state PAC (ID#:		Amount of Contribution (\$)	
06/14/2023	Sturgis, Casey	)		\$5.00
00/1 //2020	Contributor address; City; State; Zip Code			<b>\$0.00</b>
	Contributor address, City, State, Zip Code			
	тх			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	<u>ι</u> δ)	
Firefigher		Cyfair Fire Department I	HCESD9	

The Instruct	tion Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 98/118 Rpt: 101/121	
2 FILER NAME Cy-Fair Profes	ssional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022	)
05/31/2023	<ul> <li>Full name of contributor out-of-state PAC (ID#:</li> <li>Sturgis, Casey</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7 Amount of Contribution (\$) \$5	5.00
	ТХ			
8 Principal occupa Firefigher	ation / Job title (See Instructions)	9 Employer (See Instructions Cyfair Fire Department H		
Date 05/17/2023	Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) \$5	5.00
Principal occupa Firefigher	TX pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I		
Date 05/03/2023	Full name of contributor       out-of-state PAC (ID#:_         Sturgis, Casey       out-of-state PAC (ID#:_         Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) \$5	5.00
Principal occup	TX pation / Job title (See Instructions)	Employer (See Instructions	۶)	
Firefigher		Cyfair Fire Department H	HCESD9	
Date 04/19/2023	Full name of contributor out-of-state PAC (ID#: Sturgis, Casey Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) \$5	5.00
Dringing oppun	TX pation / Job title (See Instructions)	Employer (See Instructions	-	
Firefigher		Cyfair Fire Department H	,	
Date 04/05/2023	Full name of contributor out-of-state PAC (ID#:_ Sturgis, Casey Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) \$5	5.00
		Employer (See Instructions	Į	

The Instruction Guide explains how to complete this form.         Sch: 99/118 Rpt: 102/121           2         Filer NAME         3         Filer ID         (Ethics Commission Filers)           Cy-Fair Professional Firefighters Political Action Committee         3         O0087022         3           03/22/2023         5         Full name of contributor         one-d-state PAC (Dim)         7         Amount of Contribution (\$)           03/22/2023         5         Contributor address: City, State: Zip Code         7         Amount of Contribution (\$)           8         Principal occupation / Job title (See Instructions)         0         Pemployer (See Instructions)         Cyfair Fire Department HCESD9           Date         Swonke, Shaun         Contributor address; City, State; Zip Code         Amount of Contribution (\$)         \$5,0           Principal occupation / Job title (See Instructions)         Cyfair Fire Department HCESD9         Amount of Contribution (\$)         \$5,0           06/28/2023         Full name of contributor         out-of-state PAC (Dim)         Amount of Contribution (\$)         \$5,0           06/14/2023         Full name of contributor         Out-of-state PAC (Dim)         Amount of Contribution (\$)         \$5,0           06/14/2023         Swonke, Shaun         Contributor address; City, State; Zip Code         Amount o				1 Total pages Schedule A1:	
Cy-Fair Professional Firefighters Political Action Committee       00087022         4 Date       03/22/2023         5 Full name of contribution       ox-of-state PAC (DP:	The Instruc	ction Guide explains how to complete this f	iorm.	1 Total pages Schedule A1: Sch: 99/118 Rpt: 102/121	
4       Date       5       Full name of contributor       out-of-state PAC (ID#	2 FILER NAME			3 Filer ID (Ethics Commission Filers)	.)
03/22/2023       Sturgis, Casey       \$5.0         6       Contributor address; City; State; Zip Code       \$5.0         7x       Principal occupation / Job title (See Instructions)       \$9       Employer (See Instructions)         Cyfair Fire Department HCESD9       Amount of Contribution (\$)       \$5.0         Date       Full name of contributor       out-of-state PAC (10):       Amount of Contribution (\$)         Firefigher       Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Firefigher       Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (10):       Amount of Contribution (\$)         Swonke, Shaun       State; Zip Code       Amount of Contribution (\$)       \$5.0         Oaf/14/2023       Full name of contributor       out-of-state PAC (10):       Amount of Contribution (\$)         Tx       Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$5.0         Firefigher       Contributor address; City; State; Zip Code       Amount of Contribution (\$)       \$5.0         Date       Full name of contributor       out-of-state PAC (10):       Amount of Contribution (\$)       \$5.0         Date       Full name of contributor       out-of-state PAC (10):	Cy-Fair Profe	essional Firefighters Political Action Committee		00087022	
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6       Contributor address; City; State; Zip Code         TX       Principal occupation / Job title (See Instructions)         Firefigher       9         Date       Full name of contributor         06/28/2023       Swonke, Shaun         Contributor address; City; State; Zip Code       Amount of Contribution (S)         Firefigher       Contributor address; City; State; Zip Code         TX       Employer (See Instructions)         Firefigher       Cyfair Fire Department HCESD9         Date       Full name of contributor         Of/28/2023       Swonke, Shaun         Contributor address; City; State; Zip Code       Cyfair Fire Department HCESD9         Date       Full name of contributor       out-of-state PAC (Ibir:	03/22/2023			\$5	5.00
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The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 100/118 Rpt: 103/121
2 FILER NAME Cy-Fair Profe	essional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
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Cy-Fair Profe	essional Firefighters Political Action Committee		00087022
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Firefigher		Cyfair Fire Department	,
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06/28/2023	Thudium, Patrick		\$5.00
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	Contributor address; City; State; Zip Code			
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	upation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
04/19/2023	Thudium, Patrick			\$5.00
	Contributor address; City; State; Zip Code			
	TX	<u> </u>		
	upation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
06/28/2023			5	\$10.00
	Contributor address; City; State; Zip Code			
	Тх			
Principal occu		Employer (See Instructions	<u> </u> s)	
Firefigher		Cyfair Fire Department		
	Full name of contributor			
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	тх			
Principal occl	upation / Job title (See Instructions)	Employer (See Instructions	S)	
Firefigher		Cyfair Fire Department		
Firefigher Date 06/14/2023 Principal occu	Contributor address; City; State; Zip Code	Employer (See Instructions	HCESD9 Amount of Contribution (\$)	\$

The Instrue	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 104/118 Rpt: 107/121
2 FILER NAME Cy-Fair Profe	essional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
4 Date 05/31/2023	5 Full name of contributor out-of-state PAC (ID#: Torres, Marcos		7 Amount of Contribution (\$) 
	<ul> <li>6 Contributor address; City; State; Zip Code</li> <li>TX</li> </ul>		
8 Principal occu Firefigher	pation / Job title (See Instructions)	9 Employer (See Instructions Cyfair Fire Department I	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
05/17/2023	Torres, Marcos	/	\$10.
05/11/2020			ψ±ψ.
	Contributor address; City; State; Zip Code		
Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions	
Firefigher		Cyfair Fire Department I	,
_	<del>.   </del>	-	1
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
05/03/2023	Torres, Marcos		\$10.
	Contributor address; City; State; Zip Code		
Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u>
Firefigher		Cyfair Fire Department I	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
04/19/2023	Torres, Marcos Contributor address; City; State; Zip Code		\$10.
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Principal occu Firefigher	ipation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
04/05/2023	Torres, Marcos		\$10.
	Contributor address; City; State; Zip Code		
l'	ТХ		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	l.s)
Firefigher		Cyfair Fire Department I	
Thonghoi			

2 FILER NAME Cy-Fair Profession	Guide explains how to complete this for	orm.	1 Total pages Schedule A1: Sch: 105/118 Rpt: 108/121
Cy-Fair Profession			<b>3</b> Filer ID (Ethics Commission Filers)
	al Firefighters Political Action Committee		00087022
	Ill name of contributor out-of-state PAC (ID#: prres, Marcos	)	<ul><li>7 Amount of Contribution (\$)</li><li>\$10.</li></ul>
<b>6</b> Cc	ontributor address; City; State; Zip Code		
ст Л			
8 Principal occupation Firefigher	/ Job title (See Instructions)	9 Employer (See Instructions Cyfair Fire Department H	
Date Fu	Ill name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
03/08/2023 To	prres, Marcos		\$10.
	ntributor address; City; State; Zip Code		
			<u> </u>
	/ Job title (See Instructions)	Employer (See Instructions	
Firefigher		Cyfair Fire Department H	HCESD9
Date Fu	Ill name of contributor 🛛 🗌 out-of-state PAC (ID#:	)	Amount of Contribution (\$)
02/22/2023 To	orres, Marcos		\$10.
	ontributor address; City; State; Zip Code		
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Principal occupation Firefigher	/ Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department H	
Date Fu	Ill name of contributor 🔲 out-of-state PAC (ID#:	)	Amount of Contribution (\$)
02/08/2023 To	prres, Marcos	_	\$10.
Cc	ontributor address; City; State; Zip Code		
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	/ Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department H	
Principal occupation Firefigher	/ Job title (See Instructions)		
Principal occupation Firefigher Date Fu			HCESD9
Principal occupation Firefigher Date Fu 01/25/2023 To	Ill name of contributor out-of-state PAC (ID#:		HCESD9 Amount of Contribution (\$)
Principal occupation Firefigher Date Fu 01/25/2023 To	Ill name of contributor out-of-state PAC (ID#:_ orres, Marcos ontributor address; City; State; Zip Code		HCESD9 Amount of Contribution (\$)
Principal occupation Firefigher Date Fu 01/25/2023 To Co	Ill name of contributor out-of-state PAC (ID#:_ orres, Marcos ontributor address; City; State; Zip Code		HCESD9 Amount of Contribution (\$) \$10.

The Instruc	ction Guide explains how to complete this f	iorm.	1 Total pages Schedule A1: Sch: 106/118 Rpt: 109/121	
2 FILER NAME			3 Filer ID (Ethics Commission File	ers)
	essional Firefighters Political Action Committee		00087022	
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
01/11/2023	Torres, Marcos		\$	\$10.00
	6 Contributor address; City; State; Zip Code			
	ТХ			
	pation / Job title (See Instructions)	9 Employer (See Instructions		
Firefigher		Cyfair Fire Department	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
06/28/2023	Torres, Roy		\$	\$20.00
	Contributor address; City; State; Zip Code			
	ТХ			
	pation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
06/14/2023	Torres, Roy		\$	\$20.00
	Contributor address; City; State; Zip Code			
	TX	1		
	pation / Job title (See Instructions)	Employer (See Instructions	·	
Firefigher		Cyfair Fire Department	-	
Date	Full name of contributor Out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
05/31/2023	Torres, Roy		\$	\$20.00
	Contributor address; City; State; Zip Code			
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	pation / Job title (See Instructions)	Employer (See Instructions	·	
Firefigher		Cyfair Fire Department		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
05/17/2023	Torres, Roy			\$20.00
	Contributor address; City; State; Zip Code			
D is sized as an			<u> </u>	
	pation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department	HCESDy	

The Instruction Guide explains how to complete this form	1         Total pages Schedule A1:           Sch: 107/118 Rpt: 110/121
2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Cy-Fair Professional Firefighters Political Action Committee	00087022
4 Date     5 Full name of contributor     out-of-state PAC (ID#:	) <b>7</b> Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code	
TX	
	Employer (See Instructions) Cyfair Fire Department HCESD9
Date Full name of contributor out-of-state PAC (ID#:	) Amount of Contribution (\$)
04/19/2023 Torres, Roy	\$20.00
Contributor address; City; State; Zip Code	
	Employer (See Instructions) Cyfair Fire Department HCESD9
	-
Date Full name of contributor out-of-state PAC (ID#:	) Amount of Contribution (\$)
04/05/2023 Torres, Roy Contributor address; City; State; Zip Code	
	Employer (See Instructions) Cyfair Fire Department HCESD9
Date     Full name of contributor     out-of-state PAC (ID#:       03/22/2023     Torres, Roy	) Amount of Contribution (\$) \$20.00
03/22/2023 Torres, Roy Contributor address; City; State; Zip Code	\$20.00
03/22/2023 Torres, Roy Contributor address; City; State; Zip Code TX Principal occupation / Job title (See Instructions)	
03/22/2023 Torres, Roy Contributor address; City; State; Zip Code TX Principal occupation / Job title (See Instructions)	\$20.00 Employer (See Instructions)
03/22/2023       Torres, Roy         Contributor address; City; State; Zip Code         TX         Principal occupation / Job title (See Instructions)         Firefigher         Date         Full name of contributor         03/08/2023         Torres, Roy	\$20.00         Employer (See Instructions)         Cyfair Fire Department HCESD9        )       Amount of Contribution (\$)
03/22/2023       Torres, Roy         Contributor address; City; State; Zip Code         TX         Principal occupation / Job title (See Instructions)         Firefigher         Date         03/08/2023         Full name of contributor         Out-of-state PAC (ID#:	\$20.00         Employer (See Instructions)         Cyfair Fire Department HCESD9        )       Amount of Contribution (\$)

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 108/118 Rpt: 111/121	
2 FILER NAME Cy-Fair Profe	essional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Fil 00087022	lers)
4 Date 02/22/2023	<ul> <li>5 Full name of contributor out-of-state PAC (ID#:_ Torres, Roy</li> <li>6 Contributor address; City; State; Zip Code</li> </ul>		7 Amount of Contribution (\$)	\$20.00
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8 Principal occu Firefigher	pation / Job title (See Instructions)	9 Employer (See Instructions) Cyfair Fire Department H		
Date 02/08/2023	Contributor address; City; State; Zip Code	)	Amount of Contribution (\$)	\$20.00
Principal occu Firefigher	TX pation / Job title (See Instructions)	Employer (See Instructions) Cyfair Fire Department H	,	
Date 01/25/2023	Full name of contributor out-of-state PAC (ID#:_ Torres, Roy Contributor address; City; State; Zip Code	)	Amount of Contribution (\$)	\$20.00
	TX pation / Job title (See Instructions)	Employer (See Instructions)		
Firefigher		Cyfair Fire Department H		
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	
01/11/2023	Torres, Roy Contributor address; City; State; Zip Code	)		\$20.00
01/11/2023	Torres, Roy Contributor address; City; State; Zip Code			\$20.00
01/11/2023	Torres, Roy Contributor address; City; State; Zip Code	Employer (See Instructions) Cyfair Fire Department H	;)	\$20.00
01/11/2023 Principal occu	Torres, Roy Contributor address; City; State; Zip Code	Employer (See Instructions	;)	
01/11/2023 Principal occu Firefigher Date 06/28/2023	Torres, Roy Contributor address; City; State; Zip Code TX pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Velazquez, Brittany	Employer (See Instructions	s) HCESD9 Amount of Contribution (\$)	\$20.00

The Instruc	ction Guide explains how to complete this f	örm.	1 Total pages Schedule A1: Sch: 109/118 Rpt: 112/121
2 FILER NAME Cy-Fair Profe	essional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
06/14/2023	<ul> <li>Full name of contributor out-of-state PAC (ID#: Velazquez, Brittany</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7 Amount of Contribution (\$) \$5.00
	ТХ		
8 Principal occup Firefigher	pation / Job title (See Instructions)	9 Employer (See Instructions Cyfair Fire Department I	
Date 05/31/2023	Full name of contributor out-of-state PAC (ID#: Velazquez, Brittany Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) \$5.00
Principal occup Firefigher	pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I	
Date 05/17/2023	Full name of contributor out-of-state PAC (ID#: Velazquez, Brittany Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) \$5.00
Principal occur Firefigher	TX pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I	
Date 05/03/2023	Full name of contributor out-of-state PAC (ID#: Velazquez, Brittany Contributor address; City; State; Zip Code		Amount of Contribution (\$) 
Principal occur Firefigher	TX pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I	
Date 04/19/2023	Full name of contributor out-of-state PAC (ID#: Velazquez, Brittany Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) \$5.00
Principal occup Firefigher	pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I	

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 110/118 Rpt: 113/121	
2 FILER NAME			3 Filer ID (Ethics Commission File	ers)
Cy-Fair Profe	essional Firefighters Political Action Committee		00087022	
4 Date 04/05/2023	5 Full name of contributor out-of-state PAC (ID#:_ Velazquez, Brittany	)	7 Amount of Contribution (\$)	\$5.00
	6 Contributor address; City; State; Zip Code			
	TX	(2aa hastaatiaa		
8 Principal occup Firefigher	pation / Job title (See Instructions)	9 Employer (See Instructions Cyfair Fire Department H		
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
06/28/2023	Vorheier, Joshua		9	\$10.00
	Contributor address; City; State; Zip Code			
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	pation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department H	ICESD9	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
06/14/2023	Vorheier, Joshua Contributor address; City; State; Zip Code		9	\$10.00
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	pation / Job title (See Instructions)	Employer (See Instructions	,	
Principal occup Firefigher	Dation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I		
	Full name of contributor out-of-state PAC (ID#:		HCESD9 Amount of Contribution (\$)	\$10.00
Firefigher Date	Full name of contributor out-of-state PAC (ID#:		HCESD9 Amount of Contribution (\$)	\$10.00
Firefigher Date	Full name of contributor out-of-state PAC (ID#:		HCESD9 Amount of Contribution (\$)	\$10.00
Firefigher Date 05/31/2023	Full name of contributor out-of-state PAC (ID#:_ Vorheier, Joshua Contributor address; City; State; Zip Code		HCESD9 Amount of Contribution (\$) \$	\$10.00
Firefigher Date 05/31/2023 Principal occur	Full name of contributor out-of-state PAC (ID#:_ Vorheier, Joshua Contributor address; City; State; Zip Code	Cyfair Fire Department H	HCESD9 Amount of Contribution (\$) \$ \$ HCESD9 Amount of Contribution (\$)	
Firefigher Date 05/31/2023 Principal occup Firefigher Date	Full name of contributor       out-of-state PAC (ID#:_         Vorheier, Joshua       Contributor address; City; State; Zip Code         TX       TX         Dation / Job title (See Instructions)       out-of-state PAC (ID#:_         Full name of contributor       out-of-state PAC (ID#:_         Vorheier, Joshua       Out-of-state PAC (ID#:_	Cyfair Fire Department H	HCESD9 Amount of Contribution (\$) \$ \$ HCESD9 Amount of Contribution (\$)	
Firefigher Date 05/31/2023 Principal occur Firefigher Date 05/17/2023	Full name of contributor       out-of-state PAC (ID#:_         Vorheier, Joshua       Contributor address; City; State; Zip Code         TX       TX         Dation / Job title (See Instructions)       out-of-state PAC (ID#:_         Full name of contributor       out-of-state PAC (ID#:_         Vorheier, Joshua       Contributor address; City; State; Zip Code	Cyfair Fire Department H	HCESD9 Amount of Contribution (\$) \$ S) HCESD9 Amount of Contribution (\$) \$	\$10.00

The Instruc	ction Guide explains how to complete this f	örm.	1 Total pages Schedule A1: Sch: 111/118 Rpt: 114/121
2 FILER NAME	essional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 05/03/2023	<ul> <li>Full name of contributor out-of-state PAC (ID#:_ Vorheier, Joshua</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7 Amount of Contribution (\$) 
2. Drinsinglagen	TX		<u> </u>
8 Principal occup Firefigher	pation / Job title (See Instructions)	9 Employer (See Instructions Cyfair Fire Department I	
Date 04/19/2023	Full name of contributor out-of-state PAC (ID#: Vorheier, Joshua Contributor address; City; State; Zip Code TX	)	Amount of Contribution (\$) \$10.00
Principal occup Firefigher	pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I	
Date 04/05/2023	Full name of contributor out-of-state PAC (ID#:_ Vorheier, Joshua Contributor address; City; State; Zip Code		Amount of Contribution (\$) 
Principal occup Firefigher	TX pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I	•
Date 03/22/2023	Full name of contributor out-of-state PAC (ID#: Vorheier, Joshua Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) 
Principal occur Firefigher	TX pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I	
Date 03/08/2023	Full name of contributor out-of-state PAC (ID#: Vorheier, Joshua Contributor address; City; State; Zip Code TX	)	Amount of Contribution (\$) 
Principal occup Firefigher	pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I	

The Instruc				
	tion Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 112/118 Rpt: 115/121	
2 FILER NAME			3 Filer ID (Ethics Commission F	-ilers)
	ssional Firefighters Political Action Committee		00087022	
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
06/28/2023	Webber, Noel			\$10.00
ľ	6 Contributor address; City; State; Zip Code		ł	
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	pation / Job title (See Instructions)	9 Employer (See Instructions		
Firefigher		Cyfair Fire Department	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
06/14/2023	Webber, Noel			\$10.00
ľ	Contributor address; City; State; Zip Code		•	
	ТХ			
Principal occup	ation / Job title (See Instructions)	Employer (See Instructions	5)	
Firefigher		Cyfair Fire Department	HCESD9	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
05/31/2023	Webber, Noel			\$10.00
ŀ	Contributor address; City; State; Zip Code			
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	TX bation / Job title (See Instructions)	Employer (See Instructions		
Principal occup Firefigher		Employer (See Instructions Cyfair Fire Department I		
		Cyfair Fire Department		
Firefigher	Full name of contributor out-of-state PAC (ID#:_ Webber, Noel	Cyfair Fire Department	HCESD9	\$10.00
Firefigher Date	Full name of contributor out-of-state PAC (ID#:_ Webber, Noel	Cyfair Fire Department	HCESD9	\$10.00
Firefigher Date	Pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:	Cyfair Fire Department	HCESD9	\$10.00
Firefigher Date	Pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:	Cyfair Fire Department	HCESD9	\$10.00
Firefigher Date	Pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:	Cyfair Fire Department	HCESD9	\$10.00
Firefigher Date 05/17/2023	Full name of contributor out-of-state PAC (ID#:_ Webber, Noel Contributor address; City; State; Zip Code	Cyfair Fire Department I	HCESD9 Amount of Contribution (\$)	\$10.00
Firefigher Date 05/17/2023	Full name of contributor out-of-state PAC (ID#:_ Webber, Noel Contributor address; City; State; Zip Code	Cyfair Fire Department   )	HCESD9 Amount of Contribution (\$)	\$10.00
Firefigher Date 05/17/2023 Principal occup	Full name of contributor out-of-state PAC (ID#:_ Webber, Noel Contributor address; City; State; Zip Code	Cyfair Fire Department I	HCESD9 Amount of Contribution (\$)	\$10.00
Firefigher Date 05/17/2023 Principal occup Firefigher	Pation / Job title (See Instructions)         Full name of contributor       out-of-state PAC (ID#:_         Webber, Noel         Contributor address; City; State; Zip Code         TX         Pation / Job title (See Instructions)	Cyfair Fire Department I	HCESD9 Amount of Contribution (\$)	\$10.00
Firefigher Date 05/17/2023 Principal occup Firefigher Date	pation / Job title (See Instructions)         Full name of contributor       out-of-state PAC (ID#:_         Webber, Noel       Outributor address; City; State; Zip Code         TX       TX         pation / Job title (See Instructions)       Out-of-state PAC (ID#:_         Full name of contributor       out-of-state PAC (ID#:_	Cyfair Fire Department I	HCESD9 Amount of Contribution (\$)	
Firefigher Date 05/17/2023 Principal occup Firefigher Date	Pation / Job title (See Instructions)         Full name of contributor       out-of-state PAC (ID#:_         Webber, Noel         Contributor address; City; State; Zip Code         TX         Dation / Job title (See Instructions)         Full name of contributor         Out-of-state PAC (ID#:_         Weingart, Colin	Cyfair Fire Department I	HCESD9 Amount of Contribution (\$)	
Firefigher Date 05/17/2023 Principal occup Firefigher Date	Pation / Job title (See Instructions)         Full name of contributor       out-of-state PAC (ID#:_         Webber, Noel         Contributor address; City; State; Zip Code         TX         Dation / Job title (See Instructions)         Full name of contributor         Out-of-state PAC (ID#:_         Weingart, Colin	Cyfair Fire Department I	HCESD9 Amount of Contribution (\$)	
Firefigher Date 05/17/2023 Principal occup Firefigher Date	Pation / Job title (See Instructions)         Full name of contributor       out-of-state PAC (ID#:_         Webber, Noel         Contributor address; City; State; Zip Code         TX         Dation / Job title (See Instructions)         Full name of contributor         Out-of-state PAC (ID#:_         Weingart, Colin	Cyfair Fire Department I	HCESD9 Amount of Contribution (\$)	
Firefigher Date 05/17/2023 Principal occup Firefigher Date 06/28/2023	pation / Job title (See Instructions)         Full name of contributor       out-of-state PAC (ID#:_         Webber, Noel       Out-of-state PAC (ID#:_         Contributor address; City; State; Zip Code       TX         TX       Dation / Job title (See Instructions)         Full name of contributor       out-of-state PAC (ID#:_         Weingart, Colin       Contributor address; City; State; Zip Code	Cyfair Fire Department I	HCESD9 Amount of Contribution (\$)	

	tion Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 113/118 Rpt: 116/121	
2 FILER NAME Cy-Fair Profes	ssional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022	ş)
06/14/2023	<ul> <li>Full name of contributor out-of-state PAC (ID#:</li> <li>Weingart, Colin</li> <li>Contributor address; City; State; Zip Code</li> </ul>	)	7 Amount of Contribution (\$) \$5	\$5.00
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8 Principal occupa Firefigher	ation / Job title (See Instructions)	9 Employer (See Instructions Cyfair Fire Department H		
Date 05/31/2023	Full name of contributor out-of-state PAC (ID#: Weingart, Colin Contributor address; City; State; Zip Code	)	Amount of Contribution (\$)	\$5.00
Principal occupa Firefigher	ation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department H		
Date 05/17/2023	Full name of contributor out-of-state PAC (ID#:_ Weingart, Colin Contributor address; City; State; Zip Code	)	Amount of Contribution (\$)	\$5.00
	TX ation / Job title (See Instructions)	Employer (See Instructions		
Firefigher		Cyfair Fire Department H	HCESD9	
Date 05/03/2023	Full name of contributor out-of-state PAC (ID#: Weingart, Colin Contributor address; City; State; Zip Code	)	Amount of Contribution (\$)	\$5.00
Drinsipal against	TX	Employer (See Instructions		
Firefigher	ation / Job title (See Instructions)	Cyfair Fire Department H	,	
Date 04/19/2023	Full name of contributor out-of-state PAC (ID#: Weingart, Colin Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) \$5	5.00
1	ation / Job title (See Instructions)	Employer (See Instructions	<u>)</u> 3)	

ributor out-of-state PAC (ID#: ess; City; State; Zip Code Instructions)	9 Employer (See Instruction Cyfair Fire Department	HCESD9 Amount of Contribution (\$)	lers) \$5.00 \$5.00
Pess; City; State; Zip Code  Instructions)  Instructions  Pess; City; State; Zip Code  Instructions)  Instructions)  Instructions  Instructions Ins	9 Employer (See Instruction Cyfair Fire Department ) Employer (See Instruction	IS) HCESD9 Amount of Contribution (\$)	
rributor out-of-state PAC (ID#: ess; City; State; Zip Code Instructions)	Cyfair Fire Department	HCESD9 Amount of Contribution (\$)	\$5.00
rributor out-of-state PAC (ID#: ess; City; State; Zip Code Instructions)	Cyfair Fire Department	HCESD9 Amount of Contribution (\$)	\$5.00
Instructions)	Employer (See Instruction	 IIS)	\$5.00
ributor out-of-state PAC (ID#:			
		HCESD9	
ess; City; State; Zip Code	)	Amount of Contribution (\$)	\$5.00
Instructions)	Employer (See Instruction	s)	
	Cyfair Fire Department	HCESD9	
ributor out-of-state PAC (ID#: ess; City; State; Zip Code	)	Amount of Contribution (\$)	\$5.00
Instructions)	Employer (See Instruction		
		,	
	)	Amount of Contribution (\$)	\$5.00
		Cyfair Fire Department ributor	Cyfair Fire Department HCESD9

1 Total pages Schedule A1: Sch: 115/118 Rpt: 118/121	The Instruction Guide explains how to complete this fo
<b>3</b> Filer ID (Ethics Commission Filers)	FILER NAME
00087022	Cy-Fair Professional Firefighters Political Action Committee
) <b>7</b> Amount of Contribution (\$)	Date <b>5</b> Full name of contributor <b>Date</b> out-of-state PAC (ID#:
\$5.00	01/25/2023 Weingart, Colin
	6 Contributor address; City; State; Zip Code
	ТХ
ee Instructions)	
Department HCESD9	Firefigher
) Amount of Contribution (\$)	Date Full name of contributor out-of-state PAC (ID#:
\$5.00	01/11/2023 Weingart, Colin
	Contributor address; City; State; Zip Code
	ТХ
ee Instructions)	Principal occupation / Job title (See Instructions)
Department HCESD9	Firefigher
) Amount of Contribution (\$)	Date Full name of contributor out-of-state PAC (ID#:
\$5.00	06/28/2023 Weldon, Tyler
	Contributor address; City; State; Zip Code
	ТХ
ee Instructions)	Principal occupation / Job title (See Instructions)
Department HCESD9	Firefigher
) Amount of Contribution (\$)	Date Full name of contributor out-of-state PAC (ID#:
\$5.00	06/14/2023 Weldon, Tyler
	Contributor address; City; State; Zip Code
	ТХ
ee Instructions)	Principal occupation / Job title (See Instructions)
Department HCESD9	Firefigher
) Amount of Contribution (\$)	Date Full name of contributor out-of-state PAC (ID#:
\$5.00	05/31/2023 Weldon, Tyler
	Contributor address; City; State; Zip Code
	ТХ
ee Instructions)	Principal occupation / Job title (See Instructions)
Department HCESD9	Firefigher
Department HCESD9	Principal occupation / Job title (See Instructions) Firefigher Date 05/31/2023 Full name of contributor out-of-state PAC (ID#:

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 116/118 Rpt: 119/121	
2 FILER NAME Cy-Fair Profe	essional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Fi 00087022	lers)
05/17/2023	<ul> <li>5 Full name of contributor out-of-state PAC (ID#:_ Weldon, Tyler</li> <li>6 Contributor address; City; State; Zip Code</li> </ul>		7 Amount of Contribution (\$)	\$5.00
	TX			
8 Principal occup Firefigher	pation / Job title (See Instructions)	9 Employer (See Instructions Cyfair Fire Department H		
Date 05/03/2023	Full name of contributor out-of-state PAC (ID#:_ Weldon, Tyler Contributor address; City; State; Zip Code	)	Amount of Contribution (\$)	\$5.00
Principal occup Firefigher	pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department I		
Date 04/19/2023	Full name of contributor out-of-state PAC (ID#:_ Weldon, Tyler Contributor address; City; State; Zip Code	)	Amount of Contribution (\$)	\$5.00
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Principal occur	TX pation / Job title (See Instructions)	Employer (See Instructions	;)	
Principal occup Firefigher		Employer (See Instructions Cyfair Fire Department I	HCESD9	
		Cyfair Fire Department I		\$5.00
Firefigher Date 04/05/2023	Full name of contributor out-of-state PAC (ID#:_ Weldon, Tyler Contributor address; City; State; Zip Code	Cyfair Fire Department H	HCESD9 Amount of Contribution (\$)	\$5.00
Firefigher Date 04/05/2023	Full name of contributor out-of-state PAC (ID#:_ Weldon, Tyler Contributor address; City; State; Zip Code	Cyfair Fire Department I	HCESD9 Amount of Contribution (\$)	\$5.00
Firefigher Date 04/05/2023 Principal occur	Full name of contributor out-of-state PAC (ID#:_ Weldon, Tyler Contributor address; City; State; Zip Code	Cyfair Fire Department H	HCESD9 Amount of Contribution (\$)	\$5.00
Firefigher Date 04/05/2023 Principal occur Firefigher Date 03/22/2023	pation / Job title (See Instructions)         Full name of contributor       out-of-state PAC (ID#:_         Weldon, Tyler         Contributor address; City; State; Zip Code         TX         pation / Job title (See Instructions)         Full name of contributor         Out-of-state PAC (ID#:_         Weldon, Tyler	Cyfair Fire Department H	HCESD9 Amount of Contribution (\$)	

The Instruc	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 117/118 Rpt: 120/121	
2 FILER NAME Cy-Fair Profe	essional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers 00087022	5)
4 Date 03/08/2023	<ul> <li>5 Full name of contributor out-of-state PAC (ID#: Weldon, Tyler</li> <li>6 Contributor address; City; State; Zip Code</li> </ul>		7 Amount of Contribution (\$) \$	5.00
	TX			
8 Principal occup Firefigher	pation / Job title (See Instructions)	9 Employer (See Instructions Cyfair Fire Department H		
Date 02/22/2023	Full name of contributor out-of-state PAC (ID#:_ Weldon, Tyler Contributor address; City; State; Zip Code	)	Amount of Contribution (\$)	5.00
Principal occu Firefigher	pation / Job title (See Instructions)	Employer (See Instructions Cyfair Fire Department H		
Date 02/08/2023	Full name of contributor out-of-state PAC (ID#:_ Weldon, Tyler Contributor address; City; State; Zip Code	)	Amount of Contribution (\$)	5.00
	TX pation / Job title (See Instructions)	Employer (See Instructions		
Firefigher	,	Cyfair Fire Department H	HCESD9	
Date 01/25/2023	Full name of contributor out-of-state PAC (ID#:_ Weldon, Tyler Contributor address; City; State; Zip Code	· · ·	Amount of Contribution (\$)	5.00
Date 01/25/2023	Weldon, Tyler Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) \$	5.00
Date 01/25/2023	Weldon, Tyler Contributor address; City; State; Zip Code	· · ·	Amount of Contribution (\$) \$! )	5.00
Date 01/25/2023 Principal occu	Weldon, Tyler Contributor address; City; State; Zip Code	) ) Employer (See Instructions	Amount of Contribution (\$) \$ (*) HCESD9 Amount of Contribution (\$)	
Date 01/25/2023 Principal occur Firefigher Date 01/11/2023	Weldon, Tyler Contributor address; City; State; Zip Code TX pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Weldon, Tyler	) ) Employer (See Instructions	Amount of Contribution (\$) \$ -) HCESD9 Amount of Contribution (\$) \$	55.00

# MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 118/118 Rpt: 121/121 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Cy-Fair Professional Firefighters Political Action Committee 00087022 5 Full name of contributor Amount of Contribution (\$) 4 Date out-of-state PAC (ID#: 7 06/28/2023 \$10.00 West, Raime 6 Contributor address; City; State; Zip Code TΧ 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Cyfair Fire Department HCESD9 Firefigher Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/14/2023 \$10.00 West, Raime Contributor address; City; State; Zip Code TΧ Principal occupation / Job title (See Instructions) Employer (See Instructions) Firefigher Cyfair Fire Department HCESD9