

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC
COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00087022	2 Total pages filed: 121
3 COMMITTEE NAME Cy-Fair Professional Firefighters Political Action Committee		OFFICE USE ONLY	
		Date Received ELECTRONICALLY FILED 07/16/2023	
		Date Hand-delivered or Date Postmarked	
		Receipt #	Amount
		Date Processed	
		Date Imaged	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 10710 Telge Rd Houston, TX 77095		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mr. Nicholas NICKNAME LAST SUFFIX Rand		
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 11030 Foxbriar Ln Beaumont, TX 77705		
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 10710 Telge Rd Houston, TX 77095		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (713) 305-7665		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff		
10 PERIOD COVERED	Month Day Year Month Day Year 01/01/2023 THROUGH 06/30/2023		
11 ELECTION	ELECTION DATE ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special		

GO TO PAGE 2

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Cy-Fair Professional Firefighters Political Action Committee	13 Filer ID (Ethics Commission Filers) 00087022
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14 COMMITTEE ACTIVITY <small>(Attach lists on plain paper to complete this report if necessary.)</small>	1. Candidates <small>(Identify by name or, if applicable, classify by party.)</small>	A. Supported
		B. Opposed
	2. Measures <small>(Describe by date and location of election and nature of issue.)</small>	A. Supported
		B. Opposed
	3. Officeholders Assisted <small>(Identify by name or, if applicable, classify by party.)</small>	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0.00
	<input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold		
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	5,531.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	5,531.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

16 AFFIDAVIT

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

Mr. Nicholas Rand
Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

SUBTOTALS - GPAC**FORM GPAC**
COVER SHEET PG 3
3 of 121

17 COMMITTEE NAME Cy-Fair Professional Firefighters Political Action Committee		18 Filer ID (Ethics Commission Filers) 00087022
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 5,531.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/118 Rpt: 4/121
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 06/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abodeeb, Ahmad	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code TX		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abodeeb, Ahmad	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abodeeb, Ahmad	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abodeeb, Ahmad	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abodeeb, Ahmad	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/118 Rpt: 5/121
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 04/19/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abodeeb, Ahmad <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 04/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abodeeb, Ahmad <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 03/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abodeeb, Ahmad <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Albright, Andrew <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Albright, Andrew <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/118 Rpt: 6/121
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 05/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Albright, Andrew <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnold, Katrina <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnold, Katrina <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnold, Katrina <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnold, Katrina <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 05/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnold, Katrina <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 04/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnold, Katrina <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayala, Alexa <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayala, Alexa <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayala, Alexa <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 05/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayala, Alexa <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayala, Alexa <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 04/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayala, Alexa <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 04/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayala, Alexa <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 03/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayala, Alexa <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/118 Rpt: 9/121
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 06/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Bryan <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Bryan <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Bryan <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becker, Cierra <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becker, Cierra <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/118 Rpt: 10/121
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 05/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becker, Cierra <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becker, Cierra <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becker, Cierra <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 04/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becker, Cierra <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 04/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becker, Cierra <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/118 Rpt: 11/121
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 03/22/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becker, Cierra <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 03/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becker, Cierra <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 02/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becker, Cierra <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 02/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becker, Cierra <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 01/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becker, Cierra <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/118 Rpt: 12/121
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 01/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becker, Cierra <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Books, Brandon <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Books, Brandon <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Books, Brandon <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bornowski, Kyle <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/118 Rpt: 13/121
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 06/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bornowski, Kyle <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bornowski, Kyle <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bornowski, Kyle <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bornowski, Kyle <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 04/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bornowski, Kyle <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/118 Rpt: 14/121
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 04/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bornowski, Kyle	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code TX		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 03/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bornowski, Kyle	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 03/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bornowski, Kyle	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 02/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bornowski, Kyle	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 02/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bornowski, Kyle	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/118 Rpt: 15/121
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 01/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bornowski, Kyle <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 01/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bornowski, Kyle <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowers, Braxton <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowers, Braxton <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowers, Braxton <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/118 Rpt: 16/121
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 05/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowers, Braxton	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code TX		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowers, Braxton	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 04/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowers, Braxton	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 04/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowers, Braxton	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 03/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowers, Braxton	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/118 Rpt: 17/121
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 03/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowers, Braxton <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 02/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowers, Braxton <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 02/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowers, Braxton <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 01/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowers, Braxton <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 01/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowers, Braxton <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/118 Rpt: 18/121
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 06/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brewer, Jason <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buonarosa, Nicholas <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buonarosa, Nicholas <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buonarosa, Nicholas <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buonarosa, Nicholas <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/118 Rpt: 19/121
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 05/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buonarosa, Nicholas <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 04/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buonarosa, Nicholas <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 04/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buonarosa, Nicholas <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 03/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buonarosa, Nicholas <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 03/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buonarosa, Nicholas <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/118 Rpt: 20/121
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 02/22/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buonarosa, Nicholas <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 02/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buonarosa, Nicholas <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 01/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buonarosa, Nicholas <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 01/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buonarosa, Nicholas <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cardenas, Carlos <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/118 Rpt: 21/121
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 06/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cardenas, Carlos	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code TX		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cardenas, Carlos	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Russell	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Russell	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Russell	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/118 Rpt: 22/121
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 05/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Russell <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Russell <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 04/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Russell <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 04/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Russell <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 03/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Russell <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/118 Rpt: 23/121
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 03/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Russell <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 02/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Russell <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 02/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Russell <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 01/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Russell <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 01/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Russell <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/118 Rpt: 24/121
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 06/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chavez, Alex <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chavez, Alex <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chavez, Alex <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choma, Jonathan <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choma, Jonathan <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/118 Rpt: 25/121
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 05/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choma, Jonathan <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choma, Jonathan <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choma, Jonathan <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 04/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choma, Jonathan <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 04/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choma, Jonathan <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/118 Rpt: 26/121
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 03/22/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choma, Jonathan <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 03/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choma, Jonathan <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 02/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choma, Jonathan <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 02/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choma, Jonathan <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 01/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choma, Jonathan <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/118 Rpt: 27/121
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 01/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choma, Jonathan	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code TX		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christiansen, Blaine	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christiansen, Blaine	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christiansen, Blaine	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Derden, Ashely	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/118 Rpt: 28/121
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 06/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Derden, Ashely <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Derden, Ashely <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Derden, Ashely <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Derden, Ashely <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 04/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Derden, Ashely <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/118 Rpt: 29/121
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 04/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Derden, Ashely <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 03/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Derden, Ashely <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 03/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Derden, Ashely <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diaz, Roberto <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diaz, Roberto <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/118 Rpt: 30/121
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 05/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diaz, Roberto	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code TX		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diaz, Roberto	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diaz, Roberto	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 04/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diaz, Roberto	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 04/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diaz, Roberto	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/118 Rpt: 31/121
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 03/22/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diaz, Roberto <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 03/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diaz, Roberto <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dornak, Blake <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dornak, Blake <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dornak, Blake <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/118 Rpt: 32/121
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 05/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dornak, Blake	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code TX		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dornak, Blake	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 04/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dornak, Blake	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 04/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dornak, Blake	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 03/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dornak, Blake	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/118 Rpt: 33/121
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 03/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dornak, Blake	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code TX		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duckworth, Tyler	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duckworth, Tyler	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duckworth, Tyler	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elaffouri, Zachariah	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 06/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fillmore, Christopher <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fillmore, Christopher <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fillmore, Christopher <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
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Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fillmore, Christopher <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/118 Rpt: 35/121
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
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Date 04/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fillmore, Christopher <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 03/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fillmore, Christopher <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 03/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fillmore, Christopher <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 02/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fillmore, Christopher <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/118 Rpt: 36/121
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 02/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fillmore, Christopher <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 01/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fillmore, Christopher <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 01/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fillmore, Christopher <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flannelly, Connor <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flannelly, Connor <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/118 Rpt: 37/121
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
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8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flannelly, Connor <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flannelly, Connor <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 04/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flannelly, Connor <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 04/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flannelly, Connor <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/118 Rpt: 38/121
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 03/22/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flannelly, Connor <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 03/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flannelly, Connor <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 02/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flannelly, Connor <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 02/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flannelly, Connor <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 01/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flannelly, Connor <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/118 Rpt: 39/121
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 01/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flannelly, Connor	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code TX		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fromholz, Mitchell	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fromholz, Mitchell	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fromholz, Mitchell	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia Carabantes, Marylin	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/118 Rpt: 40/121
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 06/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia Carabantes, Marilyn <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia Carabantes, Marilyn <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia Carabantes, Marilyn <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia Carabantes, Marilyn <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 04/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia Carabantes, Marilyn <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/118 Rpt: 41/121
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 04/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia Carabantes, Marylin <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 03/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia Carabantes, Marylin <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gore, Caleb <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gore, Caleb <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gore, Caleb <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/118 Rpt: 42/121
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 06/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Gregg <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Gregg <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Gregg <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Gregg <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Gregg <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/118 Rpt: 43/121
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 04/19/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Gregg <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$10.00
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Date 03/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Gregg <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, Rafael <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, Rafael <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/118 Rpt: 44/121
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 05/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, Rafael <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, Rafael <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, Rafael <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 04/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, Rafael <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 04/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, Rafael <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/118 Rpt: 45/121
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 03/22/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, Rafael	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code TX		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 03/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, Rafael	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 02/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, Rafael	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 02/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, Rafael	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 01/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, Rafael	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/118 Rpt: 46/121
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 01/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, Rafael	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code TX		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holmes, Erin	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holmes, Erin	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holmes, Erin	Amount of Contribution (\$) \$10.00
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 05/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holmes, Erin <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$10.00
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8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hybert-Bice, Nicholas <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
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Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Travis	Amount of Contribution (\$) \$20.00
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, William	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kanewske, Cohen <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kanewske, Cohen <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kanewske, Cohen <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 50/118 Rpt: 53/121
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Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 51/118 Rpt: 54/121
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 03/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kanewske, Cohen <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 02/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kanewske, Cohen <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, William <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 52/118 Rpt: 55/121
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 05/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, William <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$5.00
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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 53/118 Rpt: 56/121
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 06/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lanzas, Mauricio <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$5.00
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Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lanzas, Mauricio <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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Date 01/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lanzas, Mauricio	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laws, Roshun	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laws, Roshun	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 57/118 Rpt: 60/121
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 05/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laws, Roshun <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leauge, Cory <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leauge, Cory <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leauge, Cory <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leauge, Cory <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 05/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leauge, Cory <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$5.00
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Date 04/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leauge, Cory <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 03/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leauge, Cory <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 03/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leauge, Cory <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

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4 Date 02/22/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leauge, Cory <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lieder, Nicole <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lieder, Nicole <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
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4 Date 05/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lieder, Nicole <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 04/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lieder, Nicole <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maher, Jordan <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maher, Jordan <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maher, Jordan <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
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4 Date 06/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maloney, Joshua <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maloney, Joshua <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$15.00
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8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 01/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maloney, Joshua <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 01/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maloney, Joshua <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMahan, Jonathan <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMahan, Jonathan <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

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8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcniel, Patrick <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcniel, Patrick <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcniel, Patrick <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcniel, Patrick <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 65/118 Rpt: 68/121
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 06/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Levi <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Levi <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Levi <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moon, Christopher <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moon, Christopher <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

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Date 05/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moon, Christopher <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
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Date 04/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moon, Christopher <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
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4 Date 06/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muse, Joseph <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muse, Joseph <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
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Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
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Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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4 Date 04/19/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muse, Joseph <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$10.00
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Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
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Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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4 Date 06/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neblett, Marco <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$10.00
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Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nilsen, Gjermund <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nilsen, Gjermund <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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4 Date 05/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nilsen, Gjermund <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$5.00
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Date 03/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nilsen, Gjermund <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 02/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nilsen, Gjermund <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ocasio, Joel <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ocasio, Joel <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 72/118 Rpt: 75/121
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 05/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ocasio, Joel <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$5.00
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Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ocasio, Joel <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
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Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

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Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Andy <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Andy <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

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Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plengemeyer, Kyle <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plengemeyer, Kyle <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$15.00
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Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rand, Nicholas <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rand, Nicholas <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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Date 01/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rand, Nicholas <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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4 Date 06/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Jason <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Jason <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
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Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Michael <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 86/118 Rpt: 89/121
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 04/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Michael <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 03/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Michael <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 03/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Michael <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 02/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Michael <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
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Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

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4 Date 01/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Michael <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 01/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Michael <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sayago, Jesus <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sayago, Jesus <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sayago, Jesus <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
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4 Date 05/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sayago, Jesus	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code TX		
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Date 05/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sayago, Jesus	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
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Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 04/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sayago, Jesus	Amount of Contribution (\$) \$5.00
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Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

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2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 06/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwab, Curt <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwab, Curt <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwab, Curt <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwab, Curt <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwab, Curt <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

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4 Date 06/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seguerra, Joshua <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$10.00
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Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seguerra, Joshua <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
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Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherrod, Jacob <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherrod, Jacob <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

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Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skow, Bryce <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skow, Bryce <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
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Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevens, Darci <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

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Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sturgis, Casey <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sturgis, Casey <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

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8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swonke, Shaun <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swonke, Shaun <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swonke, Shaun <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tapia, Samuel <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

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Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thetford, Zachary <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thetford, Zachary <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thetford, Zachary <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$15.00
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 101/118 Rpt: 104/121
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Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thudium, Patrick <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
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Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Velazquez, Brittany <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
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Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vorheier, Joshua <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
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Date 01/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weingart, Colin	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weldon, Tyler	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weldon, Tyler	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weldon, Tyler	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 116/118 Rpt: 119/121
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 05/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weldon, Tyler <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 05/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weldon, Tyler <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 04/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weldon, Tyler <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 04/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weldon, Tyler <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 03/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weldon, Tyler <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 117/118 Rpt: 120/121
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 03/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weldon, Tyler <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 02/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weldon, Tyler <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 02/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weldon, Tyler <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 01/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weldon, Tyler <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 01/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weldon, Tyler <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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