

CORRECTION/AMENDMENT AFFIDAVIT FOR POLITICAL COMMITTEE

FORM COR-PAC

1 Filer ID (Ethics Commission Filers) 00056207	2 Total pages filed: 28	OFFICE USE ONLY	
3 COMMITTEE NAME Wichita Falls Fire PAC	Date Received ELECTRONICALLY FILED 07/17/2023		
4 TREASURER NAME McCarthy, Clay (Mr.)	Date Hand-delivered or Date Postmarked		
5 ORIGINAL REPORT TYPE	<input type="checkbox"/> January 15	<input type="checkbox"/> Runoff	Receipt #
	<input checked="" type="checkbox"/> July 15	<input type="checkbox"/> 10th day after campaign treasurer resignation	
	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Dissolution report	Date Processed
	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Other (specify) _____	Date Imaged
6 ORIGINAL PERIOD COVERED	Month Day Year 01/01/2023	THROUGH	Month Day Year 06/30/2023

7 EXPLANATION OF CORRECTION
 I missed one of the non-political expenditures on the original report. We purchased a one-year subscription for cyber security in May of this year. I added the missing expenditure for the amount of \$34.09 to this corrected report.

8 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check the box next to any and all applicable statements:

Semiannual reports: I swear or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

Mr. Clay McCarthy

 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

**Remember To Attach Any Part Of The Campaign Finance Report Form
Needed To Report And Explain Corrections**

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) 00056207	2 Total pages filed: 28
3 COMMITTEE NAME Wichita Falls Fire PAC		OFFICE USE ONLY	
		Date Received ELECTRONICALLY FILED 07/17/2023	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address		ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1209 Oakhurst Dr Wichita Falls, TX 76302	
		Date Hand-delivered or Date Postmarked	
		Receipt #	Amount
		Date Processed	
		Date Imaged	
5 CAMPAIGN TREASURER NAME		MS / MRS / MR FIRST MI Mr. Clay NICKNAME LAST SUFFIX McCarthy	
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)		STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1209 Oakhurst Dr. Wichita Falls, TX 76302	
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address		STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1209 Oakhurst Dr. Wichita Falls, TX 76302	
8 CAMPAIGN TREASURER PHONE		AREA CODE PHONE NUMBER EXTENSION (940) 224-9331	
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 11/07/2023 <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	

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GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Wichita Falls Fire PAC	13 Filer ID (Ethics Commission Filers) 00056207
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 6,225.54
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	\$ 108,717.83
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. Clay McCarthy

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

SUBTOTALS - GPAC

17 COMMITTEE NAME Wichita Falls Fire PAC		18 Filer ID (Ethics Commission Filers) 00056207
19 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 6,225.54
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 909.09
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: 1/22 Rpt: 5/28
2 FILER NAME Wichita Falls Fire PAC		3 Filer ID (Ethics Commission Filers) 00056207
4 Date 06/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ABERNATHY, JACOB <hr/> 6 Contributor address; City; State; Zip Code Archer City, TX 76351	7 Amount of Contribution (\$) \$65.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, Pete <hr/> Contributor address; City; State; Zip Code Crowell, TX 79227	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, AUSTIN <hr/> Contributor address; City; State; Zip Code Iowa Park, TX 76367	Amount of Contribution (\$) \$65.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALSUP, MICHAEL <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76310	Amount of Contribution (\$) \$65.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ASHLOCK, Jody <hr/> Contributor address; City; State; Zip Code Lakeside City, TX 76308	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/22 Rpt: 6/28
2 FILER NAME Wichita Falls Fire PAC		3 Filer ID (Ethics Commission Filers) 00056207
4 Date 06/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BABER, Darren <hr/> 6 Contributor address; City; State; Zip Code Burkburnett, TX 76354	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BACHMAN, Derek <hr/> Contributor address; City; State; Zip Code Henrietta, TX 76365	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEREND, Craig <hr/> Contributor address; City; State; Zip Code Windthorst, TX 76389	Amount of Contribution (\$) \$180.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERRY, Joshua <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76305	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLEVINS, Blake <hr/> Contributor address; City; State; Zip Code Henrietta, TX 76365	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/22 Rpt: 7/28
2 FILER NAME Wichita Falls Fire PAC		3 Filer ID (Ethics Commission Filers) 00056207
4 Date 06/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWERS, Derrick <hr/> 6 Contributor address; City; State; Zip Code Wichita Falls, TX 76302	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWLES, DAVID <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76308	Amount of Contribution (\$) \$52.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWMAN, MICHAEL <hr/> Contributor address; City; State; Zip Code Petrolia, TX 76377	Amount of Contribution (\$) \$16.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRADLEY, JONATHAN <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76310	Amount of Contribution (\$) \$32.50
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWNING, BILLY <hr/> Contributor address; City; State; Zip Code Henrietta, TX 76365	Amount of Contribution (\$) \$26.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/22 Rpt: 8/28
2 FILER NAME Wichita Falls Fire PAC		3 Filer ID (Ethics Commission Filers) 00056207
4 Date 06/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURCHETT, Jared <hr/> 6 Contributor address; City; State; Zip Code Burkburnett, TX 76354	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHILDS, Kelvin <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76310	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COATS, Kurtis <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76310	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLEMAN, GARRETT <hr/> Contributor address; City; State; Zip Code Iowa Park, TX 76367	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COTTON, Darrell <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76309	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/22 Rpt: 9/28
2 FILER NAME Wichita Falls Fire PAC		3 Filer ID (Ethics Commission Filers) 00056207
4 Date 06/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CULLEY, Jason <hr/> 6 Contributor address; City; State; Zip Code Wichita Falls, TX 76308	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlton, Dustin <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76302	Amount of Contribution (\$) \$65.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carroll, John <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76308	Amount of Contribution (\$) \$32.50
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEEB, Bruce <hr/> Contributor address; City; State; Zip Code Burkburnett, TX 76354	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOWNS, Rusty <hr/> Contributor address; City; State; Zip Code Kamay, TX 76369	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/22 Rpt: 10/28
2 FILER NAME Wichita Falls Fire PAC		3 Filer ID (Ethics Commission Filers) 00056207
4 Date 06/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNCAN, James <hr/> 6 Contributor address; City; State; Zip Code Henrietta, TX 76365	7 Amount of Contribution (\$) \$120.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLEDGE, Randall <hr/> Contributor address; City; State; Zip Code Petroliia, TX 76377	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ENGLISHBEE, Mark <hr/> Contributor address; City; State; Zip Code Lakeside City, TX 76308	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIELDS, Thelbert <hr/> Contributor address; City; State; Zip Code Burkburnett, TX 76354	Amount of Contribution (\$) \$26.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREELAND, Scotty <hr/> Contributor address; City; State; Zip Code Electra, TX 76360	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/22 Rpt: 11/28
2 FILER NAME Wichita Falls Fire PAC		3 Filer ID (Ethics Commission Filers) 00056207
4 Date 06/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GORDY, TANNER	7 Amount of Contribution (\$) \$65.00
	6 Contributor address; City; State; Zip Code Wichita Falls, TX 76310	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOWEN, James	Amount of Contribution (\$) \$24.00
	Contributor address; City; State; Zip Code Wichita Falls, TX 76310	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GROVES, JUSTIN	Amount of Contribution (\$) \$65.00
	Contributor address; City; State; Zip Code Wichita Falls, TX 76310	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HADDERTON, BEAU	Amount of Contribution (\$) \$180.00
	Contributor address; City; State; Zip Code Wichita Falls, TX 76302	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAISTEN, BLAKE	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Wichita Falls, TX 76308	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/22 Rpt: 12/28
2 FILER NAME Wichita Falls Fire PAC		3 Filer ID (Ethics Commission Filers) 00056207
4 Date 06/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILLARD, Terry <hr/> 6 Contributor address; City; State; Zip Code Wichita Falls, TX 76310	7 Amount of Contribution (\$) \$120.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILLNER, Raymond <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76302	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOFF, Kirkland <hr/> Contributor address; City; State; Zip Code Dean, TX 76305	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLLAND, Rick <hr/> Contributor address; City; State; Zip Code Burkburnett, TX 76354	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUGHES, Donald <hr/> Contributor address; City; State; Zip Code Lakeside City, TX 76308	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/22 Rpt: 13/28
2 FILER NAME Wichita Falls Fire PAC		3 Filer ID (Ethics Commission Filers) 00056207
4 Date 06/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HURLEY, Michael <hr/> 6 Contributor address; City; State; Zip Code Iowa Park, TX 76367	7 Amount of Contribution (\$) \$18.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JEFFERS, BENJAMIN <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76310	Amount of Contribution (\$) \$65.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, Derek <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76305	Amount of Contribution (\$) \$26.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, Jeremy <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76308	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, Ryan <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76310	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/22 Rpt: 14/28
2 FILER NAME Wichita Falls Fire PAC		3 Filer ID (Ethics Commission Filers) 00056207
4 Date 06/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEENER, CARL <hr/> 6 Contributor address; City; State; Zip Code Windthorst, TX 76389	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLY, Michael <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76310	Amount of Contribution (\$) \$260.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KERR, Craig <hr/> Contributor address; City; State; Zip Code Holliday, TX 76366	Amount of Contribution (\$) \$65.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANCASTER, STEPHEN <hr/> Contributor address; City; State; Zip Code Iowa Park, TX 76367	Amount of Contribution (\$) \$65.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINDEMAN, Corey <hr/> Contributor address; City; State; Zip Code Lakeside City, TX 76308	Amount of Contribution (\$) \$26.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/22 Rpt: 15/28
2 FILER NAME Wichita Falls Fire PAC		3 Filer ID (Ethics Commission Filers) 00056207
4 Date 06/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTISCHNIG, JOHN	7 Amount of Contribution (\$) \$13.00
6 Contributor address; City; State; Zip Code Holliday, TX 76366		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAWSON, Edward	Amount of Contribution (\$) \$32.50
Contributor address; City; State; Zip Code Wichita Falls, TX 76302		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAYS, Trent	Amount of Contribution (\$) \$60.00
Contributor address; City; State; Zip Code Wichita Falls, TX 76310		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCARTHY, Clay	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Wichita Falls, TX 76302		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCORD, JUSTIN	Amount of Contribution (\$) \$26.00
Contributor address; City; State; Zip Code Wichita Falls, TX 76302		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/22 Rpt: 16/28
2 FILER NAME Wichita Falls Fire PAC		3 Filer ID (Ethics Commission Filers) 00056207
4 Date 06/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MELTON, Cody <hr/> 6 Contributor address; City; State; Zip Code Wichita Falls, TX 76308	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEZA, Genaro <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76308	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, Bradley <hr/> Contributor address; City; State; Zip Code Henrietta, TX 76365	Amount of Contribution (\$) \$39.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORGAN, KEVIN <hr/> Contributor address; City; State; Zip Code Iowa Park, TX 76367	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, Joe <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76310	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/22 Rpt: 17/28
2 FILER NAME Wichita Falls Fire PAC		3 Filer ID (Ethics Commission Filers) 00056207
4 Date 06/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORTON, KEITH <hr/> 6 Contributor address; City; State; Zip Code Wichita Falls, TX 76305	7 Amount of Contribution (\$) \$50.04
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOSS, DJ <hr/> Contributor address; City; State; Zip Code Iowa Park, TX 76367	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOULTON, Charles <hr/> Contributor address; City; State; Zip Code Iowa Park, TX 76367	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MYATT, Rickey <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76302	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICHOLS, Barry <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76302	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/22 Rpt: 18/28
2 FILER NAME Wichita Falls Fire PAC		3 Filer ID (Ethics Commission Filers) 00056207
4 Date 06/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICHOLS, Jarrod	7 Amount of Contribution (\$) \$65.00
6 Contributor address; City; State; Zip Code Iowa Park, TX 76367		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLIVER, JEREMY	Amount of Contribution (\$) \$26.00
Contributor address; City; State; Zip Code Wichita Falls, TX 76310		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORDONEZ, Daniel	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Wichita Falls, TX 76309		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PESTERFIELD, Brice	Amount of Contribution (\$) \$60.00
Contributor address; City; State; Zip Code Wichita Falls, TX 76310		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERSEN, Tracey	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Burkburnett, TX 76354		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/22 Rpt: 19/28
2 FILER NAME Wichita Falls Fire PAC		3 Filer ID (Ethics Commission Filers) 00056207
4 Date 06/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMSEY, William <hr/> 6 Contributor address; City; State; Zip Code Byers, TX 76357	7 Amount of Contribution (\$) \$130.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RANGEL, Fernando <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76305	Amount of Contribution (\$) \$65.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RASCHKE, Jarred <hr/> Contributor address; City; State; Zip Code Iowa Park, TX 76367	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAUB, LANCE <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76310	Amount of Contribution (\$) \$26.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHIE, Cary <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76309	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/22 Rpt: 20/28
2 FILER NAME Wichita Falls Fire PAC		3 Filer ID (Ethics Commission Filers) 00056207
4 Date 06/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RITCHIE, Randal <hr/> 6 Contributor address; City; State; Zip Code Lakeside City, TX 76308	7 Amount of Contribution (\$) \$70.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAMPLEY, Calvin <hr/> Contributor address; City; State; Zip Code Iowa Park, TX 76367	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHREIBER, Dustin <hr/> Contributor address; City; State; Zip Code Scotland, TX 76379	Amount of Contribution (\$) \$65.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHWEIGER, Chris <hr/> Contributor address; City; State; Zip Code Iowa Park, TX 76367	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHWEIGER, DAKOTA <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76308	Amount of Contribution (\$) \$39.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/22 Rpt: 21/28
2 FILER NAME Wichita Falls Fire PAC		3 Filer ID (Ethics Commission Filers) 00056207
4 Date 06/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHWEIGER, JAY <hr/> 6 Contributor address; City; State; Zip Code Iowa Park, TX 76367	7 Amount of Contribution (\$) \$78.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEEL, Shawn <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76305	Amount of Contribution (\$) \$65.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEYMORE, Minton <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76310	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHELTON, Russell <hr/> Contributor address; City; State; Zip Code Iowa Park, TX 76367	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHORT, Paul <hr/> Contributor address; City; State; Zip Code Byers, TX 76357	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/22 Rpt: 22/28
2 FILER NAME Wichita Falls Fire PAC		3 Filer ID (Ethics Commission Filers) 00056207
4 Date 06/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHUGART, Mathew <hr/> 6 Contributor address; City; State; Zip Code Wichita Falls, TX 76309	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SKELTON, Travis <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76302	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SKJELSTAD, Patrick <hr/> Contributor address; City; State; Zip Code Iowa Park, TX 76367	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, Anthony <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76309	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEVENS, Jeremiah <hr/> Contributor address; City; State; Zip Code Iowa Park, TX 76367	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/22 Rpt: 23/28
2 FILER NAME Wichita Falls Fire PAC		3 Filer ID (Ethics Commission Filers) 00056207
4 Date 06/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUTHERLAND, Stuart	7 Amount of Contribution (\$) \$60.00
6 Contributor address; City; State; Zip Code Wichita Falls, TX 76310		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schlegel, Bennie	Amount of Contribution (\$) \$65.00
Contributor address; City; State; Zip Code Lakeside City, TX 76308		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, Kyle	Amount of Contribution (\$) \$60.00
Contributor address; City; State; Zip Code Wichita Falls, TX 76302		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOMISON, Billy	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Iowa Park, TX 76367		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRESSLER, Keith	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Wichita Falls, TX 76310		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/22 Rpt: 24/28
2 FILER NAME Wichita Falls Fire PAC		3 Filer ID (Ethics Commission Filers) 00056207
4 Date 06/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TUMEY, Greg <hr/> 6 Contributor address; City; State; Zip Code Wichita Falls, TX 76309	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WADE, ROBERT <hr/> Contributor address; City; State; Zip Code Burkburnett, TX 76354	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WASHBURN, DANIEL <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76302	Amount of Contribution (\$) \$26.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITELEY, Dustin <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76302	Amount of Contribution (\$) \$65.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITELEY, Robert <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76301	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/22 Rpt: 25/28
2 FILER NAME Wichita Falls Fire PAC		3 Filer ID (Ethics Commission Filers) 00056207
4 Date 06/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, David <hr/> 6 Contributor address; City; State; Zip Code Iowa Park, TX 76367	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOMACK, Brent <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76302	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOOD, Doyle <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76310	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WRIGHT, BRANDON <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76302	Amount of Contribution (\$) \$65.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WRIGHT, DAVID <hr/> Contributor address; City; State; Zip Code Archer City, TX 76351	Amount of Contribution (\$) \$65.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/22 Rpt: 26/28
2 FILER NAME Wichita Falls Fire PAC		3 Filer ID (Ethics Commission Filers) 00056207
4 Date 06/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YORK, Robert	7 Amount of Contribution (\$) \$70.00
	6 Contributor address; City; State; Zip Code Wichita Falls, TX 76308	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Wichita Falls

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 1/2 Rpt:	2 FILER NAME Wichita Falls Fire PAC	3 Filer ID (Ethics Commission Filers) 00056207
4 Date 06/07/2023	5 Payee name Chelsea Plaza LLC	
6 Amount (\$) 75.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 909 8th Street Wichita Falls, TX 76301	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	(b) Description (See instructions regarding type of information required.) Rental expense
Date 05/05/2023	Payee name Chelsea Plaza LLC	
Amount (\$) 75.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 909 8th Street Wichita Falls, TX 76301	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	(b) Description (See instructions regarding type of information required.) Rental Expense
Date 04/07/2023	Payee name Chelsea Plaza LLC	
Amount (\$) 75.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 909 8th Street Wichita Falls, TX 76301	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	(b) Description (See instructions regarding type of information required.) Rental Expense
Date 03/07/2023	Payee name Chelsea Plaza LLC	
Amount (\$) 75.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 909 8th Street Wichita Falls, TX 76301	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	(b) Description (See instructions regarding type of information required.) Office Rental Expense

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 2/2 Rpt:	2 FILER NAME Wichita Falls Fire PAC	3 Filer ID (Ethics Commission Filers) 00056207
4 Date 03/03/2023	5 Payee name Crouch & Associates Inc.	
6 Amount (\$) 75.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 1715 9th St Wichita Falls, TX 76301-5002	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) CPA - Tax Filing
Date 01/13/2023	Payee name Martin Luther King Center	
Amount (\$) 500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1100 Smith Wichita Falls, TX 76301	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Donation	(b) Description (See instructions regarding type of information required.) MLK Prayer Breakfast Donation to center.
Date 05/24/2023	Payee name McCarthy, Clay (Mr.)	
Amount (\$) 34.09 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1209 Oakhurst Dr Wichita Falls, TX 76302	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Reimbursement for Cyber Security subscription	(b) Description (See instructions regarding type of information required.) File Transfer for reimbursement of one year subscription for cyber security