#### MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

## FORM MPAC COVER SHEET PG 1

Tł	ne MPAC Instruction (	2 Total pages filed: 7						
3	COMMITTEE NAME	00065735	OFFICE USE ONLY					
	Abilene Fire Fighte	rs Association Political Action Committee						
				Date Received				
				ELECTRONICALLY FILED				
				12/27/2023				
4	COMMITTEE	ADDRESS / PO BOX; APT / SUITE #; 0	CITY; STATE; ZIP					
	ADDRESS	PO Box 6837						
	Change of Address	Abilene, TX 79608		Date Hand-delivered or Date Postmarked				
5	CAMPAIGN	MS / MRS / MR FIRST	MI					
	TREASURER	Kegan		Receipt # Amount				
	NAME							
				Date Processed				
		NICKNAME LAST	SUFFIX					
		Carey		Date Imaged				
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #; CITY; STA	ATE; ZIP CODE				
	TREASURER STREET	PO Box 6837						
	ADDRESS							
	(Residence or Business)	Abilene, TX 79608						
Ļ	CAMPAIGN							
Ľ	TREASURER	STREET ADDRESS OR PO BOX;	APT / SUITE #; CITY; ST	ATE; ZIP CODE				
	MAILING	PO Box 6837						
	ADDRESS							
	Change of Address	Abilene, TX 79608						
8	CAMPAIGN	AREA CODE PHONE NUMBER	EXTENSION					
	TREASURER PHONE	(325) 669-8232						
	THOME	(323) 003 0232						
9	REPORT TYPE		10th day after campaign					
		X Monthly	L treasurer termination	Dissolution (Attach PAC-DR)				
10	MONTHLY							
	REPORT FILING	X January 5 April 5	July 5	October 5				
	DEADLINE	February 5 May 5	August 5	November 5				
		March 5 June 5	5 September 5	December 5				
11	PERIOD	Month Day Year	Month	Day Year				
	COVERED	11/26/2023	IROUGH 12/25/2					
			12,20,2					
	GO TO PAGE 2							
Fo	Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V3.5.1.f1b8c3f1							

## MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

## FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)			
Abilene Fire Fighters A	ssociation Political Actio	on Committee	00065735				
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported					
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed					
	2. Measures	A. Supported					
	(Describe by date and location of election and nature of issue.)						
		B. Opposed					
	3. Officeholders						
	Assisted (Identify by name or, if applicable, classify by party.)						
15 CONTRIBUTION		POLITICAL CONTRIBUTIONS (OTHER THAN					
TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	355.00			
	2. TOTAL POLITICA		\$	F7F 00			
	(OTHER THAN PLEI	DGES, LOANS, OR GUARANTEES OF LOANS)	<b>F</b>	575.00			
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00			
	4. TOTAL POLITICA	L EXPENDITURES	\$	0.00			
CONTRIBUTION BALANCE	5. TOTAL POLITICAL C OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	18,263.96			
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	THE \$	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.						
			n Carey				
		Signature of Ca	mpaign Treasu	irer			
AFFIX NOTARY STAMP / SEAL ABOVE							
Sworn to and subscribed	before me, by the said	, ti	nis the	day			
of	of, 20, to certify which, witness my hand and seal of office.						
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title of offic	cer administering oath			
Signature of onicer au	iotornig outri			se. aanmistering out			
Forms provided by Texas E	Ethics Commission	www.ethics.state.tx.us		Version V3.5.1.f1b8c3f1			

#### SUBTOTALS - MPAC

## FORM MPAC COVER SHEET PG 3

3 of 7

17 COMM	TTEE NAME	(Ethics Commission Filers)		
Abilen	Prire Fighters Association Political Action Committee			
	ULE SUBTOTALS DF SCHEDULE	SUBTOTAL AMOUNT		
1. 🔀	<b>\$</b> 575.	00		
2. 🛛	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 0.0	00
3. 🔀	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$ 0.0	00
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	R	\$	
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA LABOR ORGANIZATION	TION OR	\$	
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$	
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$	
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR C	RGANIZATION	\$	
9. 🗡	SCHEDULE E: LOANS	\$ 0.1	00	
10.	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 0.1	00	
11. 🔀	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.	00	
12. 🛛	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$ 0.	00
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 0.1	00
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	ONS	\$	
15. 🔉	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	<b>\$</b> 5.1	67

## MONETARY POLITICAL CONTRIBUTIONS

#### SCHEDULE A1

Th	ne Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/7	
2 FIL	FILER NAME			3 Filer ID (Ethics Commission Filers	s)
		Fighters Association Political Action Committee		00065735	5,
4 Da	ite	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
12	/22/2023	ANDERSON, JASON (Mr.)		\$4	10.00
		6 Contributor address; City; State; Zip Code			
		Abilene, TX 79605			
		pation / Job title (See Instructions)	9 Employer (See Instructions	3)	
Fir	reFighter		City of Abilene		
Da	ite	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
12	/22/2023	GALLAGHER, JOHN (Mr.)		\$4	10.00
		Contributor address; City; State; Zip Code			
		Abilene, TX 79603			
Pri	incipal occu	ipation / Job title (See Instructions)	Employer (See Instructions	3)	
Fir	reFighter		City of Abilene		
Da	ite	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
12	/22/2023	JOHNSON, KEVIN (Mr.)		\$4	17.00
		Contributor address; City; State; Zip Code			
		Abilene, TX 79606			
Pri	incipal occu	ipation / Job title (See Instructions)	Employer (See Instructions	3)	
Fir	reFighter		City of Abilene		
Da	ite	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
12	/22/2023	KING, RYAN (Mr.)		\$5	50.00
		Contributor address; City; State; Zip Code			
		Tuscola, TX 79562			
Pri	incipal occu	ipation / Job title (See Instructions)	Employer (See Instructions	;)	
Fir	reFighter		City of Abilene		
Da	ite	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
12	/22/2023	VALENTINE, GREGG (Mr.)		\$4	13.00
		Contributor address; City; State; Zip Code			
		Abilene, TX 79606			
Pri	incipal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)	
Fir	reFighter		City of Abilene		

## PLEDGED CONTRIBUTIONS

## SCHEDULE B

	The	Instruction Guide explains how to	complete this form.	1	Total pages Sch: 1/1 Rp		≥ B:	
2	FILER NAME	Ξ		3	Filer ID	(Ethics (	Commission Filers)	
	Abilene Fire	Fighters Association Political Action Cor	nmittee		00065735			
4	TOTAL OF	UNITEMIZED PLEDGES			\$			0.00
5	Date	6 Full name of pledgorout-of-state	PAC (ID#:)	8	Amount of pledge (\$)	9	In-kind description (If applicable)	
		7 Pledgor Address; City; State;	Zip Code		Check if trave	I I I I I I I I	of Texas. Complete Sch	iedule T.
10	Principal occ	upation / Job title (See Instructions)	11 Employer (See Instru	uctio	ons)			

LOANS		SCHEDULE E
The Instruction Guide explains how to complete this form.	iges Schedule E: 1 Rpt: 6/7	
2 FILER NAME Abilene Fire Fighters Association Political Action Committee	3 Filer ID 000657	(Ethics Commission Filers) 735
<sup>4</sup> TOTAL OF UNITEMIZED LOANS		\$ 0.00
5 Date of loan 7 Name of lender out-of-state PAC (ID#:	)	9 Loan Amount (\$)
6 Is lender a financial institution? 8 Lender address; City; State; Zip Code		10 Interest Rate
		<b>11</b> Maturity Date
12 Principal occupation / Job title (See Instructions)    13 Employer (See Instructions)	;)	
14 Description of Collateral  15 Check if personal funds we    None	ere deposited	l into political account (See Instructions)
IG  GUARANTOR  IT  Name of guarantor    INFORMATION  INFORMATION		19 Amount Guaranteed (\$)
not applicable <b>18</b> Guarantor address; City; State; Zip Code		
20 Principal occupation 21 Employer (See Instructions	3)	

# INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.						ages Schedule K: ./1 Rpt: 7/7
2 FILER NAME						0 (Ethics Commission Filers)
			hters Association Political Action Committee		00065	-
4	Date	5	Name of person from whom amount is received			8 Amount (\$)
	11/30/2023		First Financial Bank			\$5.67
		6	Address of person from whom amount is received; City; State; Zip Code			
			Abilene, TX 79601			
		7	Purpose for which amount is received	heck if politi	cal conti	ribution returned to filer
		I				