FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00017358 3 COMMITTEE NAME **OFFICE USE ONLY** Combined Law Enforcement Assns. Of Texas PAC Date Received **ELECTRONICALLY FILED** 01/05/2024 COMMITTEE ADDRESS / PO BOX; APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 400 West 14th Street Suite 100 Change of Address Austin, TX 78701 Date Hand-delivered or Date Postmarked MS / MRS / MR **FIRST CAMPAIGN** MI **TREASURER** Receipt # Amount Mr. Charles B. NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Wilkison CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 400 W. 14th St. STREET **ADDRESS** Suite 100 (Residence or Business) Austin, TX 78701 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 400 W. 14th St. MAILING **ADDRESS** Suite 100 Change of Address Austin, TX 78701 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (512) 495-9111 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY X January 5 April 5 July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 August 5 November 5 March 5 September 5 December 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 11/26/2023 12/25/2023

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

2 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Combined Law Enforce	ement Assns. Of Texas	PAC	0001735	8
.4 COMMITTEE ACTIVITY	1. Candidates	A. Supported Jill Dutton		
7.011111	(Identify by name or, if applicable, classify by party.)			
(Attach lists on plain		B. Opposed		
paper to complete this report if necessary.)				
	2. Measures	A. Supported		
	(Describe by date and location of election and nature of issue.)			
		B. Opposed		
		B. Opposed		
	3. Officeholders			
	Assisted (Identify by name or, if			
	applicable, classify by party.)			
5 CONTRIBUTION		POLITICAL CONTRIBUTIONS (OTHER THAN		
TOTALS		OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY)	\$	0.00
	-	qualifies for the higher itemization threshold		
	2. TOTAL POLITICA	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	99.64
EVDENDITUDE	`			
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	D POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	I EYDENDITUDES		
	- TOTAL TOLINOA	E EXI ENDITONES	\$	3,500.00
CONTRIBUTION	5. TOTAL POLITICAL (CONTRIBUTIONS MAINTAINED AS OF THE LAST	DAY .	
BALANCE	OF THE REPORTIN	G PERIOD	\$	62,296.00
OUTSTANDING		AMOUNT OF ALL OUTSTANDING LOANS AS OF		
LOAN TOTALS	LAST DAY OF THE	REPORTING PERIOD	\$	0.00
.6 AFFIDAVIT			<u> </u>	
		I swear, or affirm, under penalty of pe true and correct and includes all infor	erjury, that the mation requir	accompanying report is ed to be reported by me
		under Title 15, Election Code.		
		Mr. Charle	s B. Wilkisoı	า
		Signature of Ca		
		o.g. ata o o. oa	pa.g oaa	
AFFIX NOTARY	/ STAMP / SEAL ABOVE			
Sworn to and subscribed	thefore me by the said	, t	his the	day
		which, witness my hand and seal of office.		auy
		·		
Signature of officer ac	dministering oath	Printed name of officer administering oath	Title of of	ficer administering oath

MONTHLY FILING GPAC REPORT: PURPOSE

FORM MPAC **ADDENDUM**

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2 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
combined Law Enforceme	ent Assns. Of Texas F	PAC		00017358	
4 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Rep. Briscoe Cain State Repre	sentative	
(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.)	, ,			
COMMITTEE	1. Candidates	A. Supported	Rep. Kronda Thimesch State F	Representative	
ACTIVITY	(Identify by name or, if applicable, classify by party.)				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	Measures (Describe by date and location of election and nature of issue.)	A. Supported			
	nauto of losser,	B. Opposed			
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE	1. Candidates		Rep. Jacey Jetton State Repre	eentative	
ACTIVITY	(Identify by name or, if applicable, classify by party.)		Nep. Jacey Jellon Julie Nop. 3	Senauve	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted				
	(Identify by name or, if				

MONTHLY FILING GPAC REPORT: PURPOSE

FORM MPAC **ADDENDUM**

					Page 4 01 10
L2 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Combined Law Enforcem	ent Assns. Of Texas I	PAC		00017358	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Brent Hagenbuch State Senator	r	
(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.)				
COMMITTEE	Candidates	1	Rep. Ellen Troxclair State Repre	ocontativo	
ACTIVITY	(Identify by name or, if applicable, classify by party.)		Rep. Ellen Hoxciali State Repit	esenialive	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Rep. Cole Hefner State Represe	entative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	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.)				

MONTHLY FILING GPAC REPORT: PURPOSE

FORM MPAC **ADDENDUM**

12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Combined Law Enforceme	nt Assns. Of Texas F	PAC		00017358	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Rep. Matt Shaheen State Repr	esentative	
(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.)				
COMMITTEE	Candidates		Dan Dustin Durreus Ctata Dan	va a a satativa	
ACTIVITY	(Identify by name or, if applicable, classify by party.)		Rep. Dustin Burrows State Rep	oresentative	
(Attach lists on plain paper to complete this report if necessary.)		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.)				
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Rep. Lacey Hull State Represe	ntative	
(Attach lists on plain paper to complete this report if necessary.)		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.)	1			

SUBTOTALS - MPAC

FORM MPAC **COVER SHEET PG 3**

Filer ID 00017358	SUBTOTAL \$. AMOUNT 0.00
00017358	\$	0.00
	\$	0.00
	\$	
		0.00
	\$	0.00
	\$	
ON OR	\$	99.64
IZATION	\$	
	\$	
GANIZATION	\$	
	\$	0.00
	\$	3,500.00
	\$	0.00
S	\$	0.00
	\$	0.00
S	\$	
TURNED	\$	
	DN OR IZATION GANIZATION S TURNED	S S S S S S S S S S S S S S S S S S S

PLE	DGED CONTRIBU	TIONS				SCHEDULE B	
Т	he Instruction Guide ex	plains how to compl	ete this form.	1	Total pages Sche Sch: 1/1 Rpt: 7		
2 FILER NAME Combined Law Enforcement Assns. Of Texas PAC					3 Filer ID (Ethics Commission Filers) 00017358		
1	OF UNITEMIZED PLED				\$	0.00	
5 Date 6 Full name of pledgor out-of-state PAC (IE		out-of-state PAC (ID#	t:) 8	Amount of pledge (\$)	9 In-kind description (If applicable)	
	7 Pledgor Address;	City; State; Zip Code	9				
10 Dringing	aggunation / Joh titla (Sag Instru	untions\	11 5 (0]		tside of Texas. Complete Schedule T.	
10 Principai	occupation / Job title (See Instru	actions)	11 Employer (See Inst	tructi	ons)		

NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C2

	1 Total pages Schedule C2:				
The Instruction Guide explains how to complete this form.	Sch: 1/1 Rpt: 8/10				
2 FILER NAME	3 Filer ID (Ethics Commission Filers)				
Combined Law Enforcement Assns. Of Texas PAC	00017358				
4 Date 5 Corporation / Labor Organization name	7 Amount of 8 In-kind contribution contribution(\$) description				
12/01/2023 Combined Law Enforcement Associations of Texas	\$99.64 Admin				
6 Corporation / Labor Organization address; City; State; Zip Code	7.6				
Austin TV 70701					
Austin, TX 78701	Check if travel outside of Texas. Complete Schedule T.				

	LOANS					SCH	EDULE E
	The Instruction	on Guide explains how to	o complete this f	orm.	1	ages Schedule E: L/1 Rpt: 9/10	
	FILER NAME Combined Law I	Enforcement Assns. Of Texa	s PAC		3 Filer ID (Ethics Commission Filers) 00017358		
4	TOTAL OF UN	IITEMIZED LOANS		1		\$	0.00
5	Date of loan	7 Name of lender	out-of-state PA	C (ID#:		9 Loan Amour	nt (\$)
	Is lender a financial institution?	8 Lender address; City	/; State;	Zip Code		10 Interest Rate	
						11 Maturity Dat	e
12	Principal occupation	on / Job title (See Instructions)		13 Employer (See Instruction	ıs)	-	
14	Description of Coll None	ateral		15 Check if personal funds w	ere deposite	ed into political acc (See Instruc	
	GUARANTOR INFORMATION	17 Name of guarantor		<u> </u>		19 Amount Gua	aranteed (\$)
	not applicable	18 Guarantor address; City	/; State;	Zip Code			
20	Principal occupation	on		21 Employer (See Instruction	is)		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
orean oura rayment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 1/1 Rpt: 10/10	Combined Law Enforcement Assns. Of Texas PAC 00017358
4 Date	5 Payee name
12/11/2023	Chavez, Norma
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,500.00	824 Bolivia St
, _,	
Expenditure from corporate funds	El Paso, TX 79903
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
LAI LIIDITORE	Candidate/Officeholder/Political Committee
	Political Contribution
9 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/08/2023	Neave-Criado, Victoria (Rep.)
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box472773
·	
Expenditure from corporate funds	Garland, TX 75047
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Political Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
'	