MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM MPAC COVER SHEET PG 1

Th	e MPAC Instruction	2 Total pages filed:					
		5					
3				OFFICE USE ONLY			
	Temple Police Association Political Action Committee			Date Received ELECTRONICALLY FILED 02/07/2024			
4	COMMITTEE	ADDRESS / PO BOX; APT / SUITE #; C	ITY; STATE; ZIP				
	ADDRESS	PO Box 2147					
	—						
	Change of Address	Temple, TX 76503		Date Hand-delivered or Date Postmarked			
5	CAMPAIGN TREASURER	MS/MRS/MR FIRST	MI				
	NAME	Mr. Tom B.		Receipt # Amount			
				Date Processed			
		NICKNAME LAST	SUFFIX				
		Wolff		Date Imaged			
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #; CITY; ST	ATE; ZIP CODE			
	TREASURER STREET	227 Big Timber					
	ADDRESS						
	(Residence or Business)	Temple, TX 76502					
7	CAMPAIGN	STREET ADDRESS OR PO BOX;	APT / SUITE #; CITY; ST	ATE; ZIP CODE			
	TREASURER MAILING	PO Box 2147					
	ADDRESS						
	Change of Address	Temple, TX 76503					
8	CAMPAIGN	AREA CODE PHONE NUMBER	EXTENSION				
TREASURER PHONE (254) 913-6595							
9	REPORT TYPE	X Monthly	10th day after campaign treasurer termination	Dissolution (Attach PAC-DR)			
10	MONTHLY REPORT FILING	January 5 April 5	July 5	October 5			
	DEADLINE						
		February 5 May 5	August 5	November 5			
		X March 5 June 5	September 5	December 5			
11	PERIOD	Month Day Year	ROUGH	Day Year			
	COVERED	01/26/2024	02/25/3	2024			
	GO TO PAGE 2						
Foi	Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V3.5.1.9000c47f						

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME 13 File			13 Filer ID	(Ethics Commission Filers)		
Temple Police Association Political Action Committee 0008			00083591			
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 (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	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00		
	2. TOTAL POLITICA (OTHER THAN PLEI	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	0.00		
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 I G PERIOD	DAY \$	0.00		
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.						
		Mr. Tom	B. Wolff			
		Signature of Car	npaign Treasu	rer		
AFFIX NOTARY	AFFIX NOTARY STAMP / SEAL ABOVE					
Sworn to and subscribed before me, by the said, this the _				day		
of	, 20, to certify v	which, witness my hand and seal of office.				
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath						
Forms provided by Texas E	thics Commission	www.ethics.state.tx.us		Version V3.5.1.9000c47f		

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3 3 of 5

17 COMMITT	(Ethics Co	(Ethics Commission Filers)			
-	olice Association Political Action Committee	00083591			
19 SCHEDUL NAME OF	SUBT	SUBTOTAL AMOUNT			
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	0.00	
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00	
3. X	3. X SCHEDULE B: PLEDGED CONTRIBUTIONS				
4.	4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION				
5.	5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION				
6.	6. SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION				
7.	7. SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION				
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR	ORGANIZATION	\$		
9. X	SCHEDULE E: LOANS		\$	0.00	
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	0.00	
11. X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00	
12. X	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTI	ONS	\$	0.00	
13. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00	
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$		
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$		

PLEDGED CONTRIBUTIONS SCHEDULE **B** 1 Total pages Schedule B: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 4/5 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Temple Police Association Political Action Committee 00083591 4 \$ 0.00 TOTAL OF UNITEMIZED PLEDGES In-kind description 5 Date 6 Full name of pledgor out-of-state PAC (ID#: 8 Amount of 9 1 (If applicable) pledge (\$) 7 Pledgor Address; City; State; Zip Code Check if travel outside of Texas. Complete Schedule T 10 Principal occupation / Job title (See Instructions) 11 Employer (See Instructions)

LOANS		SC	HEDULE E
The Instruction Guide explains how to complete this form.	al pages Schedule n: 1/1 Rpt: 5/5		
2 FILER NAME Temple Police Association Political Action Committee	r ID (Ethics Com 983591	mission Filers)	
⁴ TOTAL OF UNITEMIZED LOANS	·	\$	0.00
5 Date of loan 7 Name of lender out-of-state PAC (ID#:) 9 Loan Am	ount (\$)
6 Is lender a financial institution? 8 Lender address; City; State; Zip Code		10 Interest F	
			Jale
12 Principal occupation / Job title (See Instructions) 13 Employer (See Instructions)	ons)		
14 Description of Collateral 15 Check if personal funds None	were depos	sited into political a (See Inst	
16 GUARANTOR 17 Name of guarantor INFORMATION 17 Name of guarantor		19 Amount C	Guaranteed (\$)
not applicable 18 Guarantor address; City; State; Zip Code			
20 Principal occupation 21 Employer (See Instruction)	ons)	I	