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

#### FORM MPAC COVER SHEET PG 1

The MPAC Instruction Guide explains how to complete this form.     1     Filer ID (Ethics Commission Filers) 00063860     2     Total pages filed:       3     COMMITTEE NAME Cedar Park Police Association Political Action Committee     6     OFFICE USE ONLY       Date Received ELECTRONICALLY FILED	
Cedar Park Police Association Political Action Committee	
Cedar Park Police Association Political Action Committee	
ELECTRONICALLY FILED	
02/15/2024	
4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP	
ADDRESS 911 Quest Pkwy.	
Change of Address Cedar Park, TX 78613	
5 CAMPAIGN MS / MRS / MR FIRST MI	
TREASURER Mr. Christophor W Receipt # Amount	
NAME INIT. Christopher W.	
Date Processed	
NICKNAME LAST SUFFIX	
Nichols Date Imaged	
6 CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE	
TREASURER 911 Quest Pkwy	
SIREET	
ADDRESS (Residence or Business)	
Cedar Park, TX 78613	
7 CAMPAIGN STREET ADDRESS OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE	
TREASURER MAILING 911 Quest Pkwy	
ADDRESS	
Change of Address Cedar Park, TX 78613	
8 CAMPAIGN AREA CODE PHONE NUMBER EXTENSION	
TREASURER	
PHONE (512) 415-9726	
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	
X   February 5   May 5   August 5   November 5	
March 5 June 5 September 5 December 5	
11 PERIOD       Month       Day       Year       Month       Day       Year         COVERED       12/20/2022       THROUGH       01/20/2024       01/20/2024	
12/26/2023 01/25/2024	
GO TO PAGE 2	
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#### MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

# FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Cedar Park Police Asso	ciation Political Action	Committee	00063860	
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	POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA		\$	
	(OTHER THAN PLEI	DGES, LOANS, OR GUARANTEES OF LOANS)	φ	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 G PERIOD	DAY \$	2,038.78
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF 1 REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT				
		I swear, or affirm, under penalty of pe true and correct and includes all inform under Title 15, Election Code.		
		Mr. Christoph	ner W. Nichols	5
		Signature of Car		
AFFIX NOTARY	STAMP / SEAL ABOVE			
		, tł	nis the	day
of	, 20, to certify v	vhich, witness my hand and seal of office.		
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title of offic	er 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

17 COMMITT Cedar Pa	(Ethics Comr	nission Filers)		
19 SCHEDUL NAME OF	SUBTOTAL AMOUNT			
1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS			\$	0.00
2. X	2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS			0.00
3. X	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	0.00
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABC ORGANIZATION	DR	\$	
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$	
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	SANIZATION	\$	
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	2	\$	
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	12. X SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS		\$	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**

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The Instruction Guide explains how to complete this form.			1 Total pages Schedule B: Sch: 1/1 Rpt: 4/5						
2	FILER NAME	Ē			3	Filer ID	(Ethics C	Commission Filers)	
	Cedar Park	Police Association Political	Action Committee			00063860			
4	TOTAL OF	UNITEMIZED PLEDGE	S			\$			0.00
5	Date	6 Full name of pledgor	out-of-state PAC (ID#:_	)		Amount of pledge (\$)	9	In-kind description (If applicable)	
		7 Pledgor Address;	City; State; Zip Code			Check if trave	I I I I el outside d	of Texas. Complete Sch	edule T.
<b>10</b> Principal occupation / Job title (See Instructions)			11 Employer (See Instru	ctior	าร)				

LOANS		SCHE	DULE E
The Instruction Guide explains how to complete this form.	ages Schedule E: /1 Rpt: 5/5		
2 FILER NAME Cedar Park Police Association Political Action Committee	3 Filer ID 00063	Ethics Commis 860	sion Filers)
<sup>4</sup> TOTAL OF UNITEMIZED LOANS	1	\$	0.00
5 Date of loan 7 Name of lender out-of-state PAC (ID#:		) 9 Loan Amoun	ıt (\$)
6 Is lender a financial institution? 8 Lender address; City; State; Zip Code		10 Interest Rate	
			5
12 Principal occupation / Job title (See Instructions)     13 Employer (See Instruction)	s)		
14 Description of Collateral     15 Check if personal funds w       None	ere deposite	d into political acc (See Instruct)	
Instant   Instant     16   GUARANTOR     17   Name of guarantor     INFORMATION		19 Amount Gua	ranteed (\$)
not applicable <b>18</b> Guarantor address; City; State; Zip Code			
20 Principal occupation   21 Employer (See Instruction	s)	1	