#### FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00016882 3 COMMITTEE NAME **OFFICE USE ONLY** El Paso Association of Fire Fighters, Local 51 Date Received **ELECTRONICALLY FILED** 02/26/2024 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 3112 Forney Dr., Ste. A Date Hand-delivered or Date Postmarked Change of Address El Paso, TX 79935 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Robles NAME NICKNAME LAST **SUFFIX** Efrain Jr. STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 3112 Forney Ln. STREET **ADDRESS** (Residence or Business) El Paso, TX 79935 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 3112 Forney Ln. MAILING **ADDRESS** El Paso, TX 79935 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (915) 598-8065 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 02/08/2024 02/24/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year χ Primary Runoff Other 03/05/2024 General Special

# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

# FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
El Paso Association o	of Fire Fighters, Local 51		00016882	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Ms. Norma Chavez Candidate 77	e for Texas Stat	e Representative Dist.
(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.)			
45 CONTRIBUTION		D DOUTION CONTRIBUTIONS (OTHER THAN	<u> </u>	
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS N	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY)  qualifies for the higher itemization threshold	\$	0.00
		AL CONTRIBUTIONS EDGES, LOANS, OR GUARANTEES OF LOANS)	\$	5,160.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZE	D POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	AL EXPENDITURES	\$	0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST IG PERIOD	DAY \$	161,075.22
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF TREPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT			<u> </u>	
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.		
		Mr Roble	es Efrain Jr.	
			mpaign Treasure	<u> </u>
AFFIX NOTA	RY STAMP / SEAL ABOVE	· ·	, ,	
Sworn to and subscrib	ed before me, by the said	, ti	his 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

### GENERAL-PURPOSE COMMITTEE REPORT:

### FORM GPAC ADDENDUM

							Page 3 of 6
					I	12 Filer ID	(Ethics Commission Filers)
Fire Fighters Local F	51						(Eurica Commission Filets)
1. Candidates	A. Supported	Mr. Jan	nes Mont	oya Candi	idate fo		strict Attorney
	B. Opposed						
2. Measures (Describe by date and location of election and nature of issue.)	A. Supported  B. Opposed						
3. Officeholders							
Assisted							
	1. Candidates (Identify by name or, if applicable, classify by party.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted	(Identify by name or, if applicable, classify by party.)  B. Opposed  2. Measures (Describe by date and location of election and nature of issue.)  B. Opposed  B. Opposed	1. Candidates (Identify by name or, if applicable, classify by party.)  B. Opposed  2. Measures (Describe by date and location of election and nature of issue.)  B. Opposed  3. Officeholders Assisted	1. Candidates (Identify by name or, if applicable, classify by party.)  B. Opposed  2. Measures (Describe by date and location of election and nature of issue.)  B. Opposed  A. Supported  A. Supported  A. Supported  A. Supported	1. Candidates (Identify by name or, if applicable, classify by party.)  B. Opposed  2. Measures (Describe by date and location of election and nature of issue.)  B. Opposed  A. Supported  B. Opposed  B. Opposed	Fire Fighters, Local 51  1. Candidates (Identify by name or, if applicable, classify by party.)  B. Opposed  2. Measures (Describe by date and location of election and nature of issue.)  B. Opposed  A. Supported  B. Opposed  A. Supported  B. Opposed	1. Candidates (Identify by name or, if applicable, classify by party.)  B. Opposed  2. Measures (Describe by date and location of election and nature of issue.)  B. Opposed  A. Supported  A. Supported  B. Opposed

### **SUBTOTALS - GPAC**

### FORM **GPAC**COVER SHEET PG 3

				-	4 of 6
		EE NAME ssociation of Fire Fighters, Local 51	<b>18</b> Filer ID 00016882	(Ethics Commission Fil	lers)
	HEDULI ME OF	SUBTOTAL AMO	UNT		
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		<b>\$</b> 5	,160.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.	X	SCHEDULE B: PLEDGED CONTRIBUTIONS		<b>\$</b> 3	3,500.00
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 ORGA	ANIZATION	\$	
7.		\$			
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR C	ORGANIZATION	\$	
9.		\$			
10.		SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$	
11.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
12.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$	
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	
ĺ					

MONET	ARY POLITICAL CONTRIBU	SCHEDULE A1			
The Instru	ction Guide explains how to complete th	1 Total pages Schedule A1: Sch: 1/1 Rpt: 5/6	lle A1:		
FILER NAME EL Paso Association of Fire Fighters, Local 51			3 Filer ID (Ethics Commission Filers) 00016882		
Date 02/16/2024	<u></u> -		7 Amount of Contribution (\$) \$5,160	.00	
	El Paso, TX 79936				
Principal occu	upation / Job title (See Instructions)	9 Employer (See Instruction	ns)		
	The Instru FILER NAME EI Paso Ass Date 02/16/2024	The Instruction Guide explains how to complete the FILER NAME  El Paso Association of Fire Fighters, Local 51  Date  5 Full name of contributor out-of-state PAC  El Paso Association of Firefighters Local 51  6 Contributor address; City; State; Zip Code	Date  O2/16/2024  5 Full name of contributor out-of-state PAC (ID#:) EI Paso Association of Firefighters Local 51  6 Contributor address; City; State; Zip Code  EI Paso, TX 79936	The Instruction Guide explains how to complete this form.  FILER NAME  EI Paso Association of Fire Fighters, Local 51  Date  02/16/2024  G Contributor address; City; State; Zip Code  1 Total pages Schedule A1: Sch: 1/1 Rpt: 5/6  3 Filer ID (Ethics Commission Filers) 00016882  7 Amount of Contribution (\$) \$5,160	

PLEDO	GED CONTRIBUT	IONS				SCHEDULE B	
The Instruction Guide explains how to complete this form.				1 Total pages Schedule B: Sch: 1/1 Rpt: 6/6			
2 FILER NAME El Paso Association of Fire Fighters, Local 51					Filer ID (Ethi	cs Commission Filers)	
4 TOTAL O	F UNITEMIZED PLEDGE	S			\$	0.00	
5 Date	6 Full name of pledgor Chavez, Norma (Ms.)	out-of-state PAC (ID#:			Amount of pledge (\$)	9 In-kind description (If applicable)	
02/08/2024	7 Pledgor Address;	City; State; Zip Code			\$2,500.00		
	El Paso, TX 79903				Check if travel outsi	de of Texas. Complete Schedule T.	
•	cupation / Job title (See Instructi for State Rep dist 77	ons)	11 Employer (See Instru	ctio	ns)		
5 Date	6 Full name of pledgor Montoya, James (Mr.)	out-of-state PAC (ID#:_	)		Amount of pledge (\$)	9 In-kind description (If applicable)	
02/08/2024	7 Pledgor Address;	City; State; Zip Code			\$1,000.00		
	El Paso, TX 79941				Check if travel outsi	de of Texas. Complete Schedule T.	
	cupation / Job title (See Instructi El Paso District Attorney	ons)	11 Employer (See Instru	ctio	ns)		