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) 00066217 3 COMMITTEE NAME **OFFICE USE ONLY** Nueces County Sheriffs Officer's Association PAC Date Received **ELECTRONICALLY FILED** 02/28/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 3122 Leopard Change of Address Corpus Christi, TX 78408 Date Hand-delivered or Date Postmarked MS / MRS / MR **CAMPAIGN FIRST** MI **TREASURER** Receipt # Amount Mr. Lance NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Cooper CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 3122 Leopard STREET **ADDRESS** (Residence or Business) Corpus Christi, TX 78408 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 3122 Leopard MAILING **ADDRESS** Change of Address Corpus Christi, TX 78408 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (361) 533-4868 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 April 5 July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 August 5 November 5 X March 5 September 5 December 5 June 5

GO TO PAGE 2

THROUGH

Month

01/26/2024

Day

Year

11 PERIOD

COVERED

Month

02/25/2024

Day

Year

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Nueces County Sheriffs O	fficer's Association F	PAC			000662	217
ACTIVITY (Ic	Candidates lentify by name or, if plicable, classify by party.)	A. Supported	Randy Baldera	s Nueces Cons	stable Pct	1
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	Measures	A. Supported				
(D	escribe by date and location election and nature of issue.)	''				
		B. Opposed				
(Ic	Officeholders Assisted lentify by name or, if plicable, classify by party.)					
5 CONTRIBUTION TOTALS	TOTAL UNITEMIZED PLEDGES, LOANS, CONTRIBUTIONS M check here if this report	OR GUARANT	EES OF LOANS, C ONICALLY))R	\$	0.00
2.	TOTAL POLITICA (OTHER THAN PLEI	L CONTRIBU	JTIONS		\$	0.00
EXPENDITURE 3.	TOTAL UNITEMIZED	D POLITICAL E	XPENDITURES		\$	0.00
4.	TOTAL POLITICA	AL EXPENDIT	URES		\$	1,000.00
CONTRIBUTION 5. BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD					19,964.07
OUTSTANDING 6. LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD					0.00
6 AFFIDAVIT					<u> </u>	
		t	swear, or affirm, u rue and correct and under Title 15, Elec	d includes all infor	erjury, that t mation requ	he accompanying report is uired to be reported by me
				Mr. Lan	ce Cooper	
		-		Signature of Ca		
AFFIX NOTARY ST	AMP / SEAL ABOVE					
Sworn to and subscribed be	fore me, by the said			, t	his the	day
of, 2						
Signature of officer admir	nistering oath	Printed name of	of officer administer	ing oath	Title of	officer administering oath

FORM MPAC MONTHLY FILING GPAC REPORT: PURPOSE **ADDENDUM** Page 3 of 6 12 COMMITTEE NAME 13 Filer ID (Ethics Commission Filers) Nueces County Sheriffs Officer's Association PAC 00066217 14 COMMITTEE 1. Candidates A. Supported Monty Allen Nueces Constable Pct 4 **ACTIVITY** (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 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

	4 of 6		
17 COMMITTEE NAME Nueces County Sheriffs Officer's Association PAC 18 Filer ID 00066217	(Ethics Commission Filers)		
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT		
SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$		
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$		
3. SCHEDULE B: PLEDGED CONTRIBUTIONS	\$		
4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$		
5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$		
6. SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$		
7. SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$		
8. SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$		
9. SCHEDULE E: LOANS	\$		
10. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 1,000.00		
11. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$		
12. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$		
13. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$		
14. X SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 4,000.00		
15. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$		

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Cor	mmittee	Legal Servic		:				Travel Out of Di OTHER (enter a	strict category not listed	l above)
1	Total pages Schedule F1:	2	FII FR NAME	=					3	Filer ID	(Ethics Comm	ission Filers)
	Sch: 1/1 Rpt: 5/6	_	Nueces Co		riffs Office	r's Associi	ation PA	vC		00066217	(======================================	,
4	Date	5	Payee name									
	02/12/2024		BALDERAS		<i>(</i>							
6	Amount (\$)	7	Payee addre		ty;	State;	Zip Cod	е				
	\$1,000.00		5401 Cross	gate S.								
Ш	Expenditure from corporate funds		Corpus Chi	risti, TX 7	8413							
8	PURPOSE	(a)	Category (S	ee Categories	listed at the to	p of this sched	ule) (b) Description	ı			
	OF EXPENDITURE		Contribution								plete Schedule T.	
	LAFENDITORE		Candidate/	Officeholo	der/Politica	al Commit	tee			, officeholder living		
								SUPPOR	T FOR	CONSTAB	LE	
9	Complete ONLY if direct	. (Candidate/Off	iceholder r	name	Off	ice soug	ht		Office h	eld	
	expenditure to benefit C/OI	+										
ı												

MADE FROM POLITICAL CONTRIBUTIONS SCHE						
		The Instruction Guide explains how to complete this form.				
1	Total pages Schedule I: Sch: 1/1 Rpt: 6/6	2 FILER NAME Nueces County Sheriffs Officer's Association PAC 3 Filer ID (Ethics Commission Filers) 00066217				
4	Date 02/14/2024	5 Payee name Corpus Christi Police Officer's Association				
6	Amount (\$) 4,000.00 Expenditure from corporate funds	7 Payee Address; City; State; Zip 3122 Leopard Corpus Christi, TX 78408				
8	PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense (b) Description (See instructions regarding type of information required.) Annual rent				