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) 00015731 3 COMMITTEE NAME **OFFICE USE ONLY** Brotherhood of Locomotive Engineers and Trainmen Date Received **ELECTRONICALLY FILED** 03/05/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 215 West Side Dr #400 Change of Address Decatur, TX 76234 Date Hand-delivered or Date Postmarked MS / MRS / MR **CAMPAIGN FIRST** MI **TREASURER** Receipt # Amount Mr. Scott NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Piekarski CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 215 West Side Dr STREET **ADDRESS** #400 (Residence or Business) Decatur, TX 76234 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 1509 Evan Dr MAILING **ADDRESS** Change of Address Denton, TX 76207 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (940) 595-7976 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 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 01/26/2024 02/25/2024

Forms provided by Texas Ethics Commission

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MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

COMMITTEE NAME Brotherhood of Locomo COMMITTEE ACTIVITY	otive Engineers and Tra	inmen	3 Filer ID 00015731	(Ethics Commission Filers)
COMMITTEE			00015731	
	1. Candidates			
ACTIVITY		A. Supported		
	(Identify by name or, if applicable, classify by party.)			
(A44				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
report ii necessary.)				
	2. Measures	A. Supported		
	(Describe by date and location			
	of election and nature of issue.)			
		B. Opposed		
	Officeholders Assisted	Ana Hernandez State Represer	ntative	
	(Identify by name or, if applicable, classify by party.)			
CONTRIBUTION		POLITICAL CONTRIBUTIONS (OTHER THAN		
TOTALS		OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY)	\$	544.00
	X check here if this report	qualifies for the higher itemization threshold		
		L CONTRIBUTIONS	\$	944.00
	`	DGES, LOANS, OR GUARANTEES OF LOANS)		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	5 750 00
				5,750.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL O	CONTRIBUTIONS MAINTAINED AS OF THE LAST D 3 PERIOD	AY \$	6,109.73
OUTSTANDING	6. TOTAL PRINCIPAL	AMOUNT OF ALL OUTSTANDING LOANS AS OF TH	iE _	
LOAN TOTALS	LAST DAY OF THE F	REPORTING PERIOD	\$	0.00
AFFIDAVIT	•		•	
		I swear, or affirm, under penalty of perjitrue and correct and includes all inform under Title 15, Election Code.		
		Mr. Scott I		
		Signature of Cam	paigii rreasi	лег
AFFIX NOTARY	STAMP / SEAL ABOVE			
Sworn to and subscribed	before me, by the said	, thi	s the	day
of	_, 20, to certify v	which, witness my hand and seal of office.		

MONTHLY FILING GPAC REPORT: PURPOSE

FORM MPAC **ADDENDUM**

2 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
rotherhood of Locomotiv	e Engineers and Trai	nmen		00015731	
COMMITTEE ACTIVITY	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	A. Supported			
	(Describe by date and location of election and nature of issue.)				
		B. Opposed			
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Erin Gamez State Representativ	ve	
COMMITTEE	1. Candidates	A. Supported			
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			
		B. Opposed			
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)		John Bucy State Representative		
COMMITTEE	1. Candidates	A. Supported			
ACTIVITY	(Identify by name or, if applicable, classify by party.)				
(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		Maryann Perez State Represen	tative	
	(Identify by name or, if applicable, classify by party.)				

MONTHLY FILING GPAC REPORT: PURPOSE

FORM MPAC **ADDENDUM**

2 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
rotherhood of Locomotiv	e Engineers and Trai	nmen		00015731	
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)				
(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			
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Venton Jones State Representa	ative	
COMMITTEE ACTIVITY	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			
	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.)		Yvonne Davis State Representa	ative	
COMMITTEE ACTIVITY	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			
	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.)		Armando Walle State Represen	tative	

MONTHLY FILING GPAC REPORT: PURPOSE

FORM MPAC **ADDENDUM**

2 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
otherhood of Locomotiv	e Engineers and Trai	nmen		00015731	(=====)
COMMITTEE ACTIVITY	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			
	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.)		Christina Morales State Represe	entative	
COMMITTEE ACTIVITY	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			
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Carol Alvarado State Represent	ative	
COMMITTEE ACTIVITY	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			
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Nathan Johnson State Senator		

SUBTOTALS - MPAC

FORM MPAC **COVER SHEET PG 3**

					0 01 13
17 CO	MMITTE	EE NAME	18 Filer ID	(Eth	ics Commission Filers)
Bro	otherho	od of Locomotive Engineers and Trainmen	00015731		
	HEDULI ME OF			SUBTOTAL AMOUNT	
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	944.00
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 LABOURGANIZATION)R	\$	
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$	
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$	
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	\$	5,750.00
11.	X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00
12.	X	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	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	\$	
				•	

	MONET	ARY POLITICAL C		SCHEDUL	SCHEDULE A1		
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 1/1 Rpt: 7/13	
2	FILER NAME Brotherhood	of Locomotive Engineers and	Trainmen		3	Filer ID (Ethics Commission 00015731	n Filers)
4	Date 5 Full name of contributor out-of-state PAC (ID#:) Bohelski, Joseph 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$50.00		
8	Principal occu	Haslet, TX 76052					
0	Locomotive	pation / Job title (See Instructions) Engineer	9	Employer (See Instructions Union Pacific RR	>)		
	Date 02/05/2024	Full name of contributor Dondero, William (Mr.) Contributor address; City; Sta)		Amount of Contribution (\$)	\$100.00
	Dringing aggr	Rockwall, TX 75087		Employer (Coo Instructions	<u></u>		
	Principal occupation / Job title (See Instructions) Locomotive Engineer KCS RR				s)		
	Date 02/05/2024)		Amount of Contribution (\$)	\$50.00
		Amarillo, TX 79109					
	Principal occu Locomotive	pation / Job title (See Instructions) Engineer		Employer (See Instructions BNSF RR	s)		
	Date 02/05/2024	Full name of contributor Piekarski, Scott (Mr.) Contributor address; City; Sta Denton, TX 76207)		Amount of Contribution (\$)	\$100.00
	Principal occu Locomotive	pation / Job title (See Instructions) Engineer		Employer (See Instructions Union Pacfic RailRoad	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 02/05/2024 Wright, Benjamin Contributor address; City; State; Zip Code Decatur, TX 76234			Amount of Contribution (\$)	\$100.00		
	Principal occu Chairman T	pation / Job title (See Instructions) KSLB		Employer (See Instructions BLET	5)		
			1				

PLE	DGED CONTRIBU	TIONS		SCHEDULE	В
т	he Instruction Guide exp	1 Total pages Schedule B: Sch: 1/1 Rpt: 8/13			
2 FILER N				3 Filer ID (Ethics Commission Filers)	
	Brotherhood of Locomotive Engineers and Trainmen			00015731	
4 TOTAL	OF UNITEMIZED PLEDG	SES		\$	0.00
5 Date	6 Full name of pledgor	out-of-state PAC (ID#:) 8 Amount of pledge (\$) 9 In-kind description (If applicable)	
	7 Pledgor Address;	City; State; Zip C	ode		
				Check if travel outside of Texas. Complete Scho	edule T
10 Principal	occupation / Job title (See Instru	ctions)	11 Employer (See In	structions)	

	LOANS					SCHEDULE E
	The Instruction	on Guide explains ho	w to complete this f	orm.		ages Schedule E: /1 Rpt: 9/13
	FILER NAME Brotherhood of Locomotive Engineers and Trainmen				3 Filer ID 00015	(Ethics Commission Filers)
4	TOTAL OF UN	IITEMIZED LOANS			l .	\$ 0.00
5	Date of loan	7 Name of lender	out-of-state PA	C (ID#:		9 Loan Amount (\$)
	Is lender a financial institution?	8 Lender address;	City; State;	Zip Code		10 Interest Rate
						11 Maturity Date
12	Principal occupation	on / Job title (See Instruction	ns)	13 Employer (See Inst	ructions)	1
14	Description of Col	lateral		15 Check if personal for	unds were deposite	d into political account (See Instructions)
	GUARANTOR INFORMATION	17 Name of guarantor				19 Amount Guaranteed (\$)
j	not applicable	18 Guarantor address;	City; State;	Zip Code		
20	Principal occupation	on		21 Employer (See Inst	ructions)	

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

nt Solicitation/Fundraising Expense
e Transportation Equipment & Related Expense
Travel in District
OTHER (enter a category not listed above)

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
4 Takal manage Cabadala Edu	
1 Total pages Schedule F1:	
Sch: 1/4 Rpt: 10/13	Brotherhood of Locomotive Engineers and Trainmen 00015731
4 Date	5 Payee name
02/07/2024	Alvarado, Carol
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	PO Box 230842
Expenditure from corporate funds	Houston, TX 77223
8 PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Contributions/Donations Made By
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Primary Contribution
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	-i
Date	Douge name
	Payee name
02/01/2024	Bucy, John
Amount (\$)	Payee address; City; State; Zip Code
\$250.00	PO Box 536
Expenditure from	
corporate funds	Austin, TX 78767
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee
	Primary Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
02/01/2024	Davis, Yvonne (Mrs.)
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	PO Box 763368
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Expenditure from	Dallas, TX 75376
corporate funds	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Primary Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	•

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 2/4 Rpt: 11/13	Brotherhood of Locomotive Engineers and Trainmen 00015731
4 Date	5 Payee name
02/01/2024	Gamez, Erin
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$500.00	777 E. Harrison St
Expenditure from corporate funds	Brownsville, TX 78520
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Primary Contribution
O Company of the CNU V if alice at	Occasional (Office health and a second secon
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/01/2024	Hernandez, Ana
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 155538
Expenditure from corporate funds	Houston, TX 77220
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. Check if Avetic TV officeholder living greeners
	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Primary Contribution
	Timay Continuation
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
02/07/2024	Johnson, Nathan
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	PO Box 670994
Expenditure from corporate funds	Dallas, TX 75367
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Primary Contribution
	Filliary Continuation
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

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 Com

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services 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	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	
Sch: 3/4 Rpt: 12/13	Brotherhood of Locomotive Engineers and Trainmen 00015731
4 Date	5 Payee name
02/01/2024	Jones, Venton
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$500.00	1075 Griffin St. West
Expenditure from corporate funds	Dallas, TX 75215
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By Contributions/Donations Made By Contributions/Donations Made By
EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
	Primary Contributions
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1
Date	Payee name
02/07/2024	Morales, Christina
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	PO Box 6514
Expenditure from corporate funds	Houston, TX 77265
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
LAFENDITORE	Candidate/Officeholder/Political Committee
	Primary Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientale to beliefft C/O	•
Date	Payee name
02/01/2024	Perez, Maryann
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	PO Box 262432
Expenditure from corporate funds	Houston, TX 77207
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee
	Primary Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1

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	Gift/Awards/Memorials Expense Printing Expense Travel Out of District I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1: Sch: 4/4 Rpt: 13/13	
4 Date 02/07/2024 6 Amount (\$)	5 Payee name Walle, Armando 7 Payee address; City; State; Zip Code
\$500.00 Expenditure from corporate funds	4101 Washington Ave Houston, TX 77007
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Primary Contribution
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held