#### 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) 00016291 3 COMMITTEE NAME **OFFICE USE ONLY** National Association of Social Workers/Texas Political Action For Candidate Election Date Received **ELECTRONICALLY FILED** 04/04/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 810 W. 11th St. Change of Address Austin, TX 78701-2010 Date Hand-delivered or Date Postmarked MS / MRS / MR **CAMPAIGN FIRST** MI **TREASURER** Receipt # Amount Mr. Will NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged **Francis** CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 810 W. 11th St. STREET **ADDRESS** (Residence or Business) Austin, TX 78701 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 810 W. 11th St. MAILING **ADDRESS** Change of Address Austin, TX 78701 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (512) 474-1454 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 X April 5 October 5 REPORT FILING July 5 **DEADLINE** February 5 May 5 August 5 November 5 September 5 December 5 March 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 02/26/2024 03/25/2024

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### MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

# FORM MPAC COVER SHEET PG 2

L2 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
National Association	of Social Workers/Texas	Political Action For Candidate Election	00016291	
4 COMMITTEE	1. Candidates	A. Supported		
ACTIVITY	(Identify by name or, if applicable, classify by party.)			
(Attach lists on plain paper to complete this		B. Opposed		
report if necessary.)				
	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.)			
L5 CONTRIBUTION TOTALS		D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR		
1017120	CONTRIBUTIONS N	MADE ELECTRONICALLY)	\$	0.00
		t qualifies for the higher itemization threshold AL CONTRIBUTIONS		
		EDGES, LOANS, OR GUARANTEES OF LOANS)	\$	0.00
EXPENDITURE				
TOTALS			\$	0.00
	4. TOTAL POLITICA	AL EXPENDITURES	\$	0.00
				0.00
CONTRIBUTION BALANCE		5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		
				7,628.55
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD			0.00
6 AFFIDAVIT				
		I swear, or affirm, under penalty of per	rium, that the	accompanying report is
		true and correct and includes all inforr	nation require	d to be reported by me
		under Title 15, Election Code.		
		Mr. Will	Francis	
		Signature of Car	npaign Treasu	urer
AFEN NOTA	DV CTAMP / CEAL ARCY			
AFFIX NOTA	RY STAMP / SEAL ABOVE			
Sworn to and subscrib	ped before me, by the said _	, th	is the	day
of	, 20, to certify	which, witness my hand and seal of office.		
Cignoture of officer	administoring anth	Drinted name of officer administering cath	Title of off	oor administories soth
Signature of officer	administering oath	Printed name of officer administering oath	riue or olli	cer administering oath

#### **SUBTOTALS - MPAC**

## FORM MPAC COVER SHEET PG 3

3 of !

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<b>17</b> CON	MITTI	(Ethics Commiss	sion Filers)			
National Association of Social Workers/Texas Political Action For Candidate Election 00016291						
19 SCHEDULE SUBTOTALS  NAME OF SCHEDULE					SUBTOTAL AMOUNT	
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS			\$	0.00	
2.	2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS			\$	0.00	
3.	3. X SCHEDULE B: PLEDGED CONTRIBUTIONS			\$	0.00	
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.	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.	Х	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00	
12.	Х	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	0.00	
13.	13. X SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD			\$	0.00	
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTI	ONS	\$		
15. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER			\$			
				•		

PLEI	DGED CONTRIBU	TIONS		SCH	EDULE B	
The Instruction Guide explains how to complete this form.				1 Total pages Schedule B: Sch: 1/1 Rpt: 4/5		
	2 FILER NAME			3 Filer ID (Ethics Commission Filers)		
	Association of Social Worke	rs/Texas Political Acti	on For Candidate	00016291		
4 TOTAL	TOTAL OF UNITEMIZED PLEDGES			\$	0.00	
<b>5</b> Date	6 Full name of pledgor out-of-state PAC (ID#:		D#:	8 Amount of 9 In-kind do pledge (\$) (If app	escription licable)	
	7 Pledgor Address;	City; State; Zip Co	de			
10 Dringing	occupation / Job title (See Instru	entions)	11 =	Check if travel outside of Texas. Co	omplete Schedule 1	
10 Pilitipai	occupation / Job title (See Instit	ictions)	11 Employer (See In	tructions)		

	LOANS					SCHEDULE E	
	The Instruction Guide explains how to complete this form.				1 Total pages Schedule E: Sch: 1/1 Rpt: 5/5		
2	FILER NAME  National Association of Social Workers/Texas Political Action For			r Candidate Election	3 Filer ID (Ethics Commission Filers) 00016291		
4	TOTAL OF UNITEMIZED LOANS				<b>.</b>	\$ 0.00	
5	Date of loan	of loan 7 Name of lender out-of-state PAC (ID#:		)	9 Loan Amount (\$)		
6	Is lender a financial institution?	8 Lender address; City;	State;	Zip Code		10 Interest Rate	
						11 Maturity Date	
12 Principal occupation / Job title (See Instructions) 13 Emplo				13 Employer (See Instructi	ons)		
14	Description of Coll	ateral		15 Check if personal funds were deposited into political account (See Instructions)			
16	GUARANTOR INFORMATION	17 Name of guarantor		<u> </u>		19 Amount Guaranteed (\$)	
	not applicable	18 Guarantor address; City;	State;	Zip Code			
20	Principal occupation	on		21 Employer (See Instructi	ons)		