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) 00065735 3 COMMITTEE NAME **OFFICE USE ONLY** Abilene Fire Fighters Association Political Action Committee Date Received **ELECTRONICALLY FILED** 05/30/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** PO Box 6837 Change of Address Abilene, TX 79608 Date Hand-delivered or Date Postmarked MS / MRS / MR **CAMPAIGN FIRST** MI **TREASURER** Receipt # Amount Kegan NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Carey CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE TREASURER PO Box 6837 STREET **ADDRESS** (Residence or Business) Abilene, TX 79608 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** PO Box 6837 MAILING **ADDRESS** Change of Address Abilene, TX 79608 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (325) 669-8232 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 September 5 December 5 March 5 X June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 04/26/2024 05/25/2024

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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)			
Abilene Fire Fighters	0006573	35		
14 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.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M X check here if this report	O POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	720.00
	2. TOTAL POLITICA (OTHER THAN PLE	IL CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	1,160.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		
	4. TOTAL POLITICA	L EXPENDITURES	\$	0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL (OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	21,185.66
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	HE \$	0.00
16 AFFIDAVIT	<u>'</u>		<u>'</u>	
		I swear, or affirm, under penalty of per true and correct and includes all inforr under Title 15, Election Code.	rjury, that the nation requir	e accompanying report is red to be reported by me
		Kegan	Carey	
		Signature of Car	npaign Trea	surer
AFFIX NOTAF	RY STAMP / SEAL ABOVE			
Sworn to and subscribe	ed before me, by the said	, th	is the	day
of	, 20, to certify	which, witness my hand and seal of office.		
Signature of officer a	administering oath	Printed name of officer administering oath	Title of of	fficer administering oath

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

3 of 8

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17 CO	MMITTI	(Ethics Comm	ission Filers)		
Abi	ilene Fi				
	HEDUL ME OF	SUBTOTAL AMOUNT			
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	1,160.00
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 LABO ORGANIZATION)R	\$	
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORAL LABOR ORGANIZATION	ATION OR	\$	
6.		\$			
7.		\$			
8.		\$			
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.	Х	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	0.00
13.	Х	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
15.	X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	6.60

	MONEI	ARY POLITICAL C	ONTRIBUTION	is 		SCHEDULE	■ A1
	The Instruction Guide explains how to complete this form.				1	Total pages Schedule A1: Sch: 1/2 Rpt: 4/8	
2	FILER NAME Abilene Fire	Fighters Association Political A	Action Committee		3	Filer ID (Ethics Commission 00065735	Filers)
4	Date 04/26/2024	Full name of contributor ANDERSON, JASON (Mr.) Contributor address; City; States)	7	Amount of Contribution (\$)	\$40.00
		Abilene, TX 79605					
8	Principal occu FireFighter	upation / Job title (See Instructions)	9	Employer (See Instructions City of Abilene	s) 		
	Date 05/24/2024	Full name of contributor ANDERSON, JASON (Mr., Contributor address; City; Sta				Amount of Contribution (\$)	\$40.00
	Dringinal occi	Abilene, TX 79605 upation / Job title (See Instructions)	<u>, </u>	Employer (See Instructions	·, 		
	FireFighter	pation / Job tine (See mandons/s)	·	City of Abilene	·) _		
	Date 04/26/2024	Full name of contributor GALLAGHER, JOHN (Mr.) Contributor address; City; Sta	·			Amount of Contribution (\$)	\$40.00
		Abilene, TX 79603					
	Principal occu FireFighter	upation / Job title (See Instructions))	Employer (See Instructions City of Abilene	5)		
	Date 05/24/2024	Full name of contributor GALLAGHER, JOHN (Mr.) Contributor address; City; Sta	,)		Amount of Contribution (\$)	\$40.00
	Principal occu FireFighter	upation / Job title (See Instructions))	Employer (See Instructions City of Abilene	<u> </u>		
	Date 04/26/2024	Full name of contributor JOHNSON, KEVIN (Mr.) Contributor address; City; Sta	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$47.00
	Principal occu FireFighter	upation / Job title (See Instructions))	Employer (See Instructions City of Abilene	5)		

	MONET	ARY POLITICAL C	CONTRIBUTION	IS 		SCHEDULI	E A1
	The Instruction Guide explains how to complete this form.				1	Total pages Schedule A1: Sch: 2/2 Rpt: 5/8	
2	FILER NAME Abilene Fire	Fighters Association Political	Action Committee		3	Filer ID (Ethics Commission 00065735	r Filers)
4	Date 05/24/2024	5 Full name of contributor JOHNSON, KEVIN (Mr.)6 Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code)	7	Amount of Contribution (\$)	\$47.00
		Abilene, TX 79606					
8	Principal occu FireFighter	pation / Job title (See Instructions	9	Employer (See Instructions City of Abilene	s)		
	Date 04/26/2024	Full name of contributor KING, RYAN (Mr.) Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code)	•	Amount of Contribution (\$)	\$50.00
	Duinning Langu	Tuscola, TX 79562	<u>, </u>	Franksian (Cookastustian	<u></u>		
	FireFighter	pation / Job title (See Instructions		Employer (See Instructions City of Abilene	5)		
	Date 05/24/2024	Full name of contributor KING, RYAN (Mr.) Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code)		Amount of Contribution (\$)	\$50.00
		Tuscola, TX 79562					
	Principal occu FireFighter	pation / Job title (See Instructions	(i)	Employer (See Instructions City of Abilene	s)		
	Date 04/26/2024	Full name of contributor VALENTINE, GREGG (Mi Contributor address; City; St Abilene, TX 79606)		Amount of Contribution (\$)	\$43.00
	Principal occu FireFighter	pation / Job title (See Instructions)	Employer (See Instructions City of Abilene	5)		
	Date 05/24/2024	Full name of contributor VALENTINE, GREGG (Mi Contributor address; City; St Abilene, TX 79606			•	Amount of Contribution (\$)	\$43.00
	Principal occu FireFighter	pation / Job title (See Instructions)	Employer (See Instructions City of Abilene	<u>.</u> S)		
			1				

PLE	DGED CONTRIBUT	ΓIONS			SCH	EDULE B		
The Instruction Guide explains how to complete this form.				1 Total pages Schedule B: Sch: 1/1 Rpt: 6/8				
2 FILER NAME				3	Filer ID (Ethics Commission	Filers)		
	Fire Fighters Association Poli	tical Action Committee			00065735			
4 TOTAL	. OF UNITEMIZED PLEDG	ES			\$	0.00		
5 Date	6 Full name of pledgor	out-of-state PAC (ID#) 8		escription licable)		
	7 Pledgor Address;	City; State; Zip Code			 			
				_ L	Check if travel outside of Texas. C	omplete Schedule T.		
10 Principal	occupation / Job title (See Instruc	ctions)	11 Employer (See Ins	structi	ons)			

	LOANS					SCHEDU	JLE E
	The Instruction Guide explains how to complete this form.			1 Total pages Schedule E: Sch: 1/1 Rpt: 7/8			
2	FILER NAME Abilene Fire Figl	nters Association Political A	ction Committee		3 Filer ID (Ethics Commission Filer 00065735		
4	TOTAL OF UN	IITEMIZED LOANS				\$	0.00
5	Date of loan	7 Name of lender	out-of-state PA	C (ID#:		9 Loan Amount (\$)
6	Is lender a financial institution?	8 Lender address; Ci	ty; State;	Zip Code		10 Interest Rate	
						11 Maturity Date	
12	Principal occupation	on / Job title (See Instructions)		13 Employer (See Instruction	s)	•	
14	Description of Coll None	ateral		15 Check if personal funds w	ere deposite	d into political accoun (See Instructions	
16	GUARANTOR INFORMATION	17 Name of guarantor				19 Amount Guarant	teed (\$)
	not applicable	18 Guarantor address; Ci	ty; State;	Zip Code			
20	Principal occupation	on		21 Employer (See Instruction	s)	1	

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 8/8 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Abilene Fire Fighters Association Political Action Committee 00065735 5 Name of person from whom amount is received 8 Amount (\$) 04/30/2024 \$6.60 First Financial Bank 6 Address of person from whom amount is received; City; State; Zip Code Abilene, TX 79601 7 Purpose for which amount is received Check if political contribution returned to filer