### MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

# FORM MPAC **COVER SHEET PG 1**

			1 Filer ID			
Tł	ne MPAC Instruction	2 Total pages filed: 5				
3	COMMITTEE NAME 00083229			OFFICE USE ONLY		
	Northwest Tarrant	Progressives				
				Date Received ELECTRONICALLY FILED 06/02/2024		
4	COMMITTEE	ADDRESS / PO BOX; APT / SUITE #;	CITY; STATE; ZIP			
	ADDRESS	PO BOX 79334				
	Change of Address	Saginaw, TX 76179		Date Hand-delivered or Date Postmarked		
5	CAMPAIGN	MS / MRS / MR FIRST	Μ			
	TREASURER	Richard 1	-	Receipt # Amount		
	NAME					
				Date Processed		
		NICKNAME LAST	S	JFFIX		
		Layne		Date Imaged		
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #; CITY;	STATE; ZIP CODE		
	TREASURER	1190 N. Cardinal Road				
	STREET ADDRESS					
	(Residence or Business)	A-10 TX 76020				
		Azle, TX 76020				
7	CAMPAIGN TREASURER	STREET ADDRESS OR PO BOX;	APT / SUITE #; CITY;	STATE; ZIP CODE		
	MAILING	1190 N. Cardinal Road				
	ADDRESS					
	Change of Address	Azle, TX 76020				
8	CAMPAIGN	AREA CODE PHONE NUMBER	EXTENSION			
	TREASURER	(017) 001 0011				
	PHONE	(817) 681-8844				
9	REPORT TYPE		10th day after campaign			
		X Monthly	treasurer termination	Dissolution (Attach PAC-DR)		
10	MONTHLY					
	REPORT FILING	January 5 April	5 July 5	October 5		
	DEADLINE	February 5 May	5 August 5	November 5		
		March 5 X June	5 Septembe	r 5 December 5		
11		Month Day Year	THROUGH	onth Day Year		
	COVERED	04/26/2024	0	5/25/2024		
	GO TO PAGE 2					
	Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V4.1.0.d378aba0					
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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)	
Northwest Tarrant Progressives 000			00083229	)	
14 COMMITTEE ACTIVITY	1. 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			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M check here if this report	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00	
	2. TOTAL POLITICA (OTHER THAN PLEI	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	38.42	
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00	
	4. TOTAL POLITICA	L EXPENDITURES	\$	111.00	
CONTRIBUTION BALANCE	5. TOTAL POLITICAL C OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	1,390.60	
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	THE \$	0.00	
16 AFFIDAVIT					
I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.					
	Richard T. Layne				
	Signature of Campaign Treasurer				
AFFIX NOTARY STAMP / SEAL ABOVE					
Sworn to and subscribed before me, by the said day			day		
of, 20, to certify which, witness my hand and seal of office.					
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title of offi	cer administering oath	
Forms provided by Texas E	thics Commission	www.ethics.state.tx.us		Version V4.1.0.d378aba0	

### FORM MPAC COVER SHEET PG 3

3 of 5

17 COMMITTEE NAME 18 Filer ID (			(Ethics Commission Filers)	
Northwest Tarrant Progressives 00083229				
	19 SCHEDULE SUBTOTALS			
NAME O	FSCHEDULE		SUBTOTAL AMOUNT	
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		<b>\$</b> 38.42	
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
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 ORG.	ANIZATION	\$	
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$	
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR C	ORGANIZATION	\$	
9.	SCHEDULE E: LOANS		\$	
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	<b>\$</b> 111.00	
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 CONTRIBUTIO	DNS	\$	
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	

**SUBTOTALS - MPAC** 

MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/5
2 FILER NAME Northwest Tarrant Progressives	<b>3</b> Filer ID (Ethics Commission Filers) 00083229
4 Date 5 Full name of contributor out-of-state PAC (ID#:)   05/06/2024 Horgan, Warren   6 Contributor address; City; State; Zip Code	7 Amount of Contribution (\$) \$38.42
Fort Worth, TX 76179     8 Principal occupation / Job title (See Instructions) retired   9 Employer (See Instructions)	6)

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

	EXPENDITURE CATEGO	DRIES FOR BOX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Fees Food/Beverage Expense y - Gift/Awards/Memorials Expense al Committee Legal Services	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
	The Instruction Guide explains	· · · · · · · · · · · · · · · · · · ·	
1 Total pages Schedule F1: Sch: 1/1 Rpt: 5/5	2 FILER NAME Northwest Tarrant Progressives	1	3 Filer ID (Ethics Commission Filers) 00083229
-			
4 Date 05/16/2024	5 Payee name USPS		
6 Amount (\$)	7 Payee address; City; State	e; Zip Code	
\$111.00	101 Belmont St		
Expenditure from	Saginaw TX 76170		
corporate funds	Saginaw, TX 76179		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this so Fees	Check if travel ou	utside of Texas. Complete Schedule T. TX, officeholder living expense x 6 months
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Office sought	Office held