

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC
COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00056207	2 Total pages filed: 31
3 COMMITTEE NAME Wichita Falls Fire PAC		OFFICE USE ONLY	
		Date Received ELECTRONICALLY FILED 07/15/2024	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address		ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1209 Oakhurst Dr Wichita Falls, TX 76302	
		Date Hand-delivered or Date Postmarked	
		Receipt #	Amount
		Date Processed	
		Date Imaged	
5 CAMPAIGN TREASURER NAME		MS / MRS / MR FIRST MI Mr. Clay NICKNAME LAST SUFFIX McCarthy	
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)		STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1209 Oakhurst Dr. Wichita Falls, TX 76302	
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address		STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1209 Oakhurst Dr. Wichita Falls, TX 76302	
8 CAMPAIGN TREASURER PHONE		AREA CODE PHONE NUMBER EXTENSION (940) 224-9331	
9 REPORT TYPE		<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff	
10 PERIOD COVERED		Month Day Year Month Day Year 01/01/2024 THROUGH 06/30/2024	
11 ELECTION		ELECTION DATE ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other 11/05/2024 <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	

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GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Wichita Falls Fire PAC	13 Filer ID (Ethics Commission Filers) 00056207
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
		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	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 6,033.04
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 3,227.33
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 55,828.57
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 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.

Mr. Clay McCarthy

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

SUBTOTALS - GPAC

17 COMMITTEE NAME Wichita Falls Fire PAC		18 Filer ID (Ethics Commission Filers) 00056207
19 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 6,033.04
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 3,227.33
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/22 Rpt: 4/31
2 FILER NAME Wichita Falls Fire PAC		3 Filer ID (Ethics Commission Filers) 00056207
4 Date 06/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ABERNATHY, JACOB <hr/> 6 Contributor address; City; State; Zip Code Archer City, TX 76351	7 Amount of Contribution (\$) \$65.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, Pete <hr/> Contributor address; City; State; Zip Code Crowell, TX 79227	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, AUSTIN <hr/> Contributor address; City; State; Zip Code Iowa Park, TX 76367	Amount of Contribution (\$) \$65.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALSUP, MICHAEL <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76310	Amount of Contribution (\$) \$65.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ASHLOCK, Jody <hr/> Contributor address; City; State; Zip Code Lakeside City, TX 76308	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/22 Rpt: 5/31
2 FILER NAME Wichita Falls Fire PAC		3 Filer ID (Ethics Commission Filers) 00056207
4 Date 06/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BABER, Darren <hr/> 6 Contributor address; City; State; Zip Code Burkburnett, TX 76354	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BACHMAN, Derek <hr/> Contributor address; City; State; Zip Code Henrietta, TX 76365	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEREND, Craig <hr/> Contributor address; City; State; Zip Code Windthorst, TX 76389	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERRY, Joshua <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76305	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLEVINS, Blake <hr/> Contributor address; City; State; Zip Code Henrietta, TX 76365	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/22 Rpt: 6/31
2 FILER NAME Wichita Falls Fire PAC		3 Filer ID (Ethics Commission Filers) 00056207
4 Date 06/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWERS, Derrick <hr/> 6 Contributor address; City; State; Zip Code Wichita Falls, TX 76302	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWLES, DAVID <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76308	Amount of Contribution (\$) \$52.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWMAN, MICHAEL <hr/> Contributor address; City; State; Zip Code Petrolia, TX 76377	Amount of Contribution (\$) \$26.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRADLEY, JONATHAN <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76310	Amount of Contribution (\$) \$55.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWNING, BILLY <hr/> Contributor address; City; State; Zip Code Henrietta, TX 76365	Amount of Contribution (\$) \$26.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/22 Rpt: 7/31
2 FILER NAME Wichita Falls Fire PAC		3 Filer ID (Ethics Commission Filers) 00056207
4 Date 06/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURCHETT, Jared <hr/> 6 Contributor address; City; State; Zip Code Burkburnett, TX 76354	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANTWELL, Ross <hr/> Contributor address; City; State; Zip Code Henrietta, TX 76365	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHILDS, Kelvin <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76310	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COATS, Kurtis <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76310	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLEMAN, GARRETT <hr/> Contributor address; City; State; Zip Code Iowa Park, TX 76367	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/22 Rpt: 8/31
2 FILER NAME Wichita Falls Fire PAC		3 Filer ID (Ethics Commission Filers) 00056207
4 Date 06/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COTTON, Darrell <hr/> 6 Contributor address; City; State; Zip Code Wichita Falls, TX 76309	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CULLEY, Jason <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76308	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlton, Dustin <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76302	Amount of Contribution (\$) \$65.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carroll, John <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76308	Amount of Contribution (\$) \$32.50
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOWLING, Baxter <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76308	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/22 Rpt: 9/31
2 FILER NAME Wichita Falls Fire PAC		3 Filer ID (Ethics Commission Filers) 00056207
4 Date 06/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOWNS, Rusty <hr/> 6 Contributor address; City; State; Zip Code Kamay, TX 76369	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNCAN, James <hr/> Contributor address; City; State; Zip Code Henrietta, TX 76365	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLEDGE, Randall <hr/> Contributor address; City; State; Zip Code Petrolia, TX 76377	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ENGLISHBEE, Mark <hr/> Contributor address; City; State; Zip Code Lakeside City, TX 76308	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIELDS, Thelbert <hr/> Contributor address; City; State; Zip Code Burkburnett, TX 76354	Amount of Contribution (\$) \$26.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/22 Rpt: 10/31
2 FILER NAME Wichita Falls Fire PAC		3 Filer ID (Ethics Commission Filers) 00056207
4 Date 06/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREELAND, Scotty	7 Amount of Contribution (\$) \$60.00
	6 Contributor address; City; State; Zip Code Electra, TX 76360	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GORDY, TANNER	Amount of Contribution (\$) \$65.00
	Contributor address; City; State; Zip Code Wichita Falls, TX 76310	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOWEN, James	Amount of Contribution (\$) \$24.00
	Contributor address; City; State; Zip Code Wichita Falls, TX 76310	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GROVES, JUSTIN	Amount of Contribution (\$) \$65.00
	Contributor address; City; State; Zip Code Wichita Falls, TX 76310	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HADDERTON, BEAU	Amount of Contribution (\$) \$130.00
	Contributor address; City; State; Zip Code Wichita Falls, TX 76302	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/22 Rpt: 11/31
2 FILER NAME Wichita Falls Fire PAC		3 Filer ID (Ethics Commission Filers) 00056207
4 Date 06/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAISTEN, BLAKE <hr/> 6 Contributor address; City; State; Zip Code Wichita Falls, TX 76308	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILLARD, Terry <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76310	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILLNER, Raymond <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76302	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOFF, Kirkland <hr/> Contributor address; City; State; Zip Code Dean, TX 76305	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLLAND, Rick <hr/> Contributor address; City; State; Zip Code Burkburnett, TX 76354	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/22 Rpt: 12/31
2 FILER NAME Wichita Falls Fire PAC		3 Filer ID (Ethics Commission Filers) 00056207
4 Date 06/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUGHES, Donald <hr/> 6 Contributor address; City; State; Zip Code Lakeside City, TX 76308	7 Amount of Contribution (\$) \$120.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HURLEY, Michael <hr/> Contributor address; City; State; Zip Code Iowa Park, TX 76367	Amount of Contribution (\$) \$18.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JEFFERS, BENJAMIN <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76310	Amount of Contribution (\$) \$65.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, Derek <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76305	Amount of Contribution (\$) \$26.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, Jeremy <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76308	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/22 Rpt: 13/31
2 FILER NAME Wichita Falls Fire PAC		3 Filer ID (Ethics Commission Filers) 00056207
4 Date 06/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, Ryan	7 Amount of Contribution (\$) \$60.00
6 Contributor address; City; State; Zip Code Wichita Falls, TX 76310		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEENER, CARL	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Windthorst, TX 76389		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLY, Michael	Amount of Contribution (\$) \$260.00
Contributor address; City; State; Zip Code Wichita Falls, TX 76310		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KERR, Craig	Amount of Contribution (\$) \$65.00
Contributor address; City; State; Zip Code Holliday, TX 76366		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANCASTER, STEPHEN	Amount of Contribution (\$) \$65.00
Contributor address; City; State; Zip Code Iowa Park, TX 76367		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/22 Rpt: 14/31
2 FILER NAME Wichita Falls Fire PAC		3 Filer ID (Ethics Commission Filers) 00056207
4 Date 06/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINDEMAN, Corey	7 Amount of Contribution (\$) \$26.00
6 Contributor address; City; State; Zip Code Lakeside City, TX 76308		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOGGIE, STEVEN	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Wichita Falls, TX 76308		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTISCHNIG, JOHN	Amount of Contribution (\$) \$13.00
Contributor address; City; State; Zip Code Holliday, TX 76366		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAWSON, Edward	Amount of Contribution (\$) \$32.50
Contributor address; City; State; Zip Code Wichita Falls, TX 76302		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAYS, Trent	Amount of Contribution (\$) \$60.00
Contributor address; City; State; Zip Code Wichita Falls, TX 76310		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/22 Rpt: 15/31
2 FILER NAME Wichita Falls Fire PAC		3 Filer ID (Ethics Commission Filers) 00056207
4 Date 06/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCARTHY, Clay <hr/> 6 Contributor address; City; State; Zip Code Wichita Falls, TX 76302	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCORD, JUSTIN <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76302	Amount of Contribution (\$) \$26.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MELTON, Cody <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76308	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEZA, Genaro <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76308	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, Bradley <hr/> Contributor address; City; State; Zip Code Henrietta, TX 76365	Amount of Contribution (\$) \$39.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/22 Rpt: 16/31
2 FILER NAME Wichita Falls Fire PAC		3 Filer ID (Ethics Commission Filers) 00056207
4 Date 06/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORGAN, KEVIN <hr/> 6 Contributor address; City; State; Zip Code Iowa Park, TX 76367	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, Joe <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76310	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORTON, KEITH <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76305	Amount of Contribution (\$) \$50.04
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOSS, DJ <hr/> Contributor address; City; State; Zip Code Iowa Park, TX 76367	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOULTON, Charles <hr/> Contributor address; City; State; Zip Code Iowa Park, TX 76367	Amount of Contribution (\$) \$28.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/22 Rpt: 17/31
2 FILER NAME Wichita Falls Fire PAC		3 Filer ID (Ethics Commission Filers) 00056207
4 Date 06/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MYATT, Rickey <hr/> 6 Contributor address; City; State; Zip Code Wichita Falls, TX 76302	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICHOLS, Barry <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76302	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICHOLS, Jarrod <hr/> Contributor address; City; State; Zip Code Iowa Park, TX 76367	Amount of Contribution (\$) \$65.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLIVER, JEREMY <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76310	Amount of Contribution (\$) \$26.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORDONEZ, Daniel <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76309	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/22 Rpt: 18/31
2 FILER NAME Wichita Falls Fire PAC		3 Filer ID (Ethics Commission Filers) 00056207
4 Date 06/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PESTERFIELD, Brice <hr/> 6 Contributor address; City; State; Zip Code Wichita Falls, TX 76310	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMSEY, William <hr/> Contributor address; City; State; Zip Code Byers, TX 76357	Amount of Contribution (\$) \$130.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RANGEL, Fernando <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76305	Amount of Contribution (\$) \$65.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RASCHKE, Jarred <hr/> Contributor address; City; State; Zip Code Iowa Park, TX 76367	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAUB, LANCE <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76310	Amount of Contribution (\$) \$26.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/22 Rpt: 19/31
2 FILER NAME Wichita Falls Fire PAC		3 Filer ID (Ethics Commission Filers) 00056207
4 Date 06/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHIE, Cary <hr/> 6 Contributor address; City; State; Zip Code Wichita Falls, TX 76309	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RITCHIE, Konner <hr/> Contributor address; City; State; Zip Code Lakeside City, TX 76308	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RITCHIE, Randal <hr/> Contributor address; City; State; Zip Code Lakeside City, TX 76308	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAMPLEY, Calvin <hr/> Contributor address; City; State; Zip Code Iowa Park, TX 76367	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHREIBER, Dustin <hr/> Contributor address; City; State; Zip Code Scotland, TX 76379	Amount of Contribution (\$) \$65.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/22 Rpt: 20/31
2 FILER NAME Wichita Falls Fire PAC		3 Filer ID (Ethics Commission Filers) 00056207
4 Date 06/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHWEIGER, Chris <hr/> 6 Contributor address; City; State; Zip Code Iowa Park, TX 76367	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHWEIGER, DAKOTA <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76308	Amount of Contribution (\$) \$39.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHWEIGER, JAY <hr/> Contributor address; City; State; Zip Code Iowa Park, TX 76367	Amount of Contribution (\$) \$78.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEEL, Shawn <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76305	Amount of Contribution (\$) \$65.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEYMORE, Minton <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76310	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/22 Rpt: 21/31
2 FILER NAME Wichita Falls Fire PAC		3 Filer ID (Ethics Commission Filers) 00056207
4 Date 06/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHELTON, Russell <hr/> 6 Contributor address; City; State; Zip Code Iowa Park, TX 76367	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHORT, Paul <hr/> Contributor address; City; State; Zip Code Byers, TX 76357	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHUGART, Mathew <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76309	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SKELTON, Travis <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76302	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SKJELSTAD, Patrick <hr/> Contributor address; City; State; Zip Code Iowa Park, TX 76367	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/22 Rpt: 22/31
2 FILER NAME Wichita Falls Fire PAC		3 Filer ID (Ethics Commission Filers) 00056207
4 Date 06/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, Anthony <hr/> 6 Contributor address; City; State; Zip Code Wichita Falls, TX 76309	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEVENS, Jeremiah <hr/> Contributor address; City; State; Zip Code Iowa Park, TX 76367	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUTHERLAND, Stuart <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76310	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schlegel, Bennie <hr/> Contributor address; City; State; Zip Code Lakeside City, TX 76308	Amount of Contribution (\$) \$130.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, Kyle <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76302	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/22 Rpt: 23/31
2 FILER NAME Wichita Falls Fire PAC		3 Filer ID (Ethics Commission Filers) 00056207
4 Date 06/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TIMMONS, Daniel <hr/> 6 Contributor address; City; State; Zip Code Graford, TX 76449	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOMISON, Billy <hr/> Contributor address; City; State; Zip Code Iowa Park, TX 76367	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRESSLER, Keith <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76310	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TUMEY, Greg <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76309	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WADE, ROBERT <hr/> Contributor address; City; State; Zip Code Burkburnett, TX 76354	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/22 Rpt: 24/31
2 FILER NAME Wichita Falls Fire PAC		3 Filer ID (Ethics Commission Filers) 00056207
4 Date 06/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WASHBURN, DANIEL <hr/> 6 Contributor address; City; State; Zip Code Wichita Falls, TX 76302	7 Amount of Contribution (\$) \$26.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITELEY, Dustin <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76302	Amount of Contribution (\$) \$65.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, David <hr/> Contributor address; City; State; Zip Code Iowa Park, TX 76367	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, Troy <hr/> Contributor address; City; State; Zip Code Iowa Park, TX 76367	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINKLES, Mason <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76305	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/22 Rpt: 25/31
2 FILER NAME Wichita Falls Fire PAC		3 Filer ID (Ethics Commission Filers) 00056207
4 Date 06/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOMACK, Brent	7 Amount of Contribution (\$) \$120.00
	6 Contributor address; City; State; Zip Code Wichita Falls, TX 76302	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOOD, Doyle	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code Wichita Falls, TX 76310	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WRIGHT, BRANDON	Amount of Contribution (\$) \$65.00
	Contributor address; City; State; Zip Code Wichita Falls, TX 76302	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WRIGHT, DAVID	Amount of Contribution (\$) \$65.00
	Contributor address; City; State; Zip Code Archer City, TX 76351	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YORK, Robert	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code Wichita Falls, TX 76308	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Wichita Falls

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
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
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 how to complete this form.

1 Total pages Schedule F1: Sch: 1/6 Rpt: 26/31	2 FILER NAME Wichita Falls Fire PAC	3 Filer ID (Ethics Commission Filers) 00056207
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4 Date 06/18/2024	5 Payee name Bradley, Jonathan (Mr.)
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6 Amount (\$) \$860.52 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 4801 Windsong Dr Wichita Falls, TX 76310
---	--

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Three Tablets purchased from petitioning.	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for tablets for the purpose of petitioning, and future polling/campaigning.
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/05/2024	Payee name Chelsea Plaza LLC
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Amount (\$) \$75.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 909 8th Street Wichita Falls, TX 76301
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rent
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/07/2024	Payee name Chelsea Plaza LLC
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Amount (\$) \$75.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 909 8th Street Wichita Falls, TX 76301
---	---

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rent
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
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 how to complete this form.

1 Total pages Schedule F1: Sch: 2/6 Rpt: 27/31	2 FILER NAME Wichita Falls Fire PAC	3 Filer ID (Ethics Commission Filers) 00056207
4 Date 03/07/2024	5 Payee name Chelsea Plaza LLC	
6 Amount (\$) \$75.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 909 8th Street Wichita Falls, TX 76301	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rent
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/05/2024	Payee name Chelsea Plaza LLC	
Amount (\$) \$75.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 909 8th Street Wichita Falls, TX 76301	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rent
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/07/2024	Payee name Chelsea Plaza LLC	
Amount (\$) \$75.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 909 8th Street Wichita Falls, TX 76301	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rent
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
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 how to complete this form.

1 Total pages Schedule F1: Sch: 3/6 Rpt: 28/31	2 FILER NAME Wichita Falls Fire PAC	3 Filer ID (Ethics Commission Filers) 00056207
4 Date 06/07/2024	5 Payee name Chelsea Plaza LLC	
6 Amount (\$) \$75.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 909 8th Street Wichita Falls, TX 76301	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rent
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/27/2024	Payee name Crouch & Associates Inc.	
Amount (\$) \$75.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1715 9th St Wichita Falls, TX 76301-5002	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CPA - Tax filings.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/24/2024	Payee name Dominos Pizza	
Amount (\$) \$75.92 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4518 Maplewood Ave Wichita Falls, TX 76308	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fed guys petitioning for signatures to add two ballots on upcoming election
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
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 how to complete this form.

1 Total pages Schedule F1: Sch: 4/6 Rpt: 29/31	2 FILER NAME Wichita Falls Fire PAC	3 Filer ID (Ethics Commission Filers) 00056207
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4 Date 05/27/2024	5 Payee name McCarthy, Clay (Mr.)
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6 Amount (\$) \$129.89	7 Payee address; City; State; Zip Code 1209 Oakhurst Dr Wichita Falls, TX 76302
<input type="checkbox"/> Expenditure from corporate funds	

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Internet Security Subscription	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for McAfee Security Subscription Service.
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/15/2024	Payee name The Deuce P-2
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Amount (\$) \$120.00	Payee address; City; State; Zip Code 1409 Lamar St Wichita Falls, TX 76301
<input type="checkbox"/> Expenditure from corporate funds	

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fed guys petitioning for signatures to add two ballots on upcoming election.
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/16/2024	Payee name The Deuce P-2
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Amount (\$) \$112.00	Payee address; City; State; Zip Code 1409 Lamar St Wichita Falls, TX 76301
<input type="checkbox"/> Expenditure from corporate funds	

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fed guys petitioning for signatures to add two ballots on upcoming election.
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
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 how to complete this form.

1 Total pages Schedule F1: Sch: 5/6 Rpt: 30/31	2 FILER NAME Wichita Falls Fire PAC	3 Filer ID (Ethics Commission Filers) 00056207
4 Date 06/18/2024	5 Payee name The Deuce P-2	
6 Amount (\$) \$400.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1409 Lamar St Wichita Falls, TX 76301	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fed guys petitioning for signatures to add two ballots on upcoming election.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/19/2024	Payee name The Deuce P-2	
Amount (\$) \$102.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1409 Lamar St Wichita Falls, TX 76301	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fed guys petitioning for signatures to add two ballots on upcoming election.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/21/2024	Payee name The Deuce P-2	
Amount (\$) \$701.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1409 Lamar St Wichita Falls, TX 76301	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fed guys petitioning for signatures to add two ballots on upcoming election.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
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 how to complete this form.

1 Total pages Schedule F1: Sch: 6/6 Rpt: 31/31	2 FILER NAME Wichita Falls Fire PAC	3 Filer ID (Ethics Commission Filers) 00056207
4 Date 06/22/2024	5 Payee name The Deuce P-2	
6 Amount (\$) \$100.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1409 Lamar St Wichita Falls, TX 76301	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fed guys petitioning for signatures to add two ballots on upcoming election.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/29/2024	Payee name The Deuce P-2	
Amount (\$) \$100.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1409 Lamar St Wichita Falls, TX 76301	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fed guys petitioning for signatures to add two ballots on upcoming election.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/27/2024	Payee name Wichita Falls Federal Credit Union	
Amount (\$) \$1.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2100 Seymour Hwy Wichita Falls, TX 76301	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Overdraft Transfer Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held