GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC COVER SHEET PG 1

Th	e GPAC Instruction	Guide explains how to complete this form.	1	Filer ID (Ethics Commission Filers) 00056207		2 Total pages filed: 31		
3	COMMITTEE NAME					OFFICE USE ONLY		
	Wichita Falls Fire F	PAC				Date Received		
						ELECTRONICALLY FILED 07/15/2024		
4	COMMITTEE	ADDRESS / PO BOX; APT / SUITE #; C	TY;	STATE; ZIP CO	DDE			
	ADDRESS	1209 Oakhurst Dr				Date Hand-delivered or Date Postmarked		
	Change of Address							
		Wichita Falls, TX 76302				Receipt # Amount		
						Date Processed		
						Date Imaged		
Ŀ								
5	CAMPAIGN TREASURER	MS/MRS/MR FIRST				MI		
	NAME	Mr. Clay						
		NICKNAME LAST McCarthy				SUFFIX		
		McCartity						
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE)		APT / SUITE #;	CITY;	STATE; ZIP CODE		
ľ	TREASURER	1209 Oakhurst Dr.		A 17 SOIL #,	CITT,			
	STREET ADDRESS							
	(Residence or Business)	Wichita Falls, TX 76302						
7	CAMPAIGN	STREET OR PO BOX;		APT / SUITE #;	CITY;	STATE; ZIP CODE		
ľ	TREASURER	1209 Oakhurst Dr.		ALL π ,	CITT,			
	MAILING ADDRESS	1209 Oakhuist Di.						
		Wights Falls TX 76202						
	Change of Address	Wichita Falls, TX 76302						
8	CAMPAIGN TREASURER	AREA CODE PHONE NUMBER	ΕX	TENSION				
	PHONE	(940) 224-9331						
L								
9	REPORT TYPE	January 15	80th	day before election		Dissolution (Attach PAC-DR)		
			8th d	ay before election		10th day after campaign treasurer		
		X July 15	Runo	ff	-	termination		
			turre					
10	PERIOD COVERED	Month Day Year		Month	Day	Year		
	OOVERED	01/01/2024	HR	OUGH 06/3	30/2024			
11	ELECTION	ELECTION DATE		ELECTION T				
		Month Day Year	Prim			Other		
		11/05/2024						
			Gen	eral Special				
⊢								
		GO	тΩ	PAGE 2				
	rms provided by Tex					Version V4.1.0.d378aba0		
rυ	ms provided by Te	xas Ethics Commission www.e	-u 110	cs.state.tx.us		VEISIUIT V4.1.U.U3/88080		

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Wichita Falls Fire PAC			0005620	7
14 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 (Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA	· · · · · · · · · · · · · · · · · · ·	\$	0.000.04
	(OTHER THAN PLE	DGES, LOANS, OR GUARANTEES OF LOANS)	\$	6,033.04
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	3,227.33
CONTRIBUTION BALANCE	5. TOTAL POLITICAL C OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	55,828.57
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT			I	
		I swear, or affirm, under penalty of pe true and correct and includes all inforr under Title 15, Election Code.		
			McCarthy	
		Signature of Car	npaign Treas	surer
AFFIX NOTARY	STAMP / SEAL ABOVE			
Sworn to and subscribed	before me, by the said	, tr	nis the	day
of	, 20, to certify w	which, witness my hand and seal of office.		
Signature of officer adr	ninistering oath	Printed name of officer administering oath	Title of of	ficer administering oath
Forms provided by Texas E	thics Commission	www.ethics.state.tx.us		Version V4.1.0.d378aba0

S	JBT		RM GPAC HEET PG 3		
			C	OVER 3	3 of 31
		EE NAME alls Fire PAC	18 Filer ID 00056207	(Ethics Co	mmission Filers)
		E SUBTOTALS SCHEDULE		SUB	FOTAL AMOUNT
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	6,033.04
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	DR	\$	
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	1	\$	
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR	ORGANIZATION	\$	
9.		SCHEDULE E: LOANS		\$	
10.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	3,227.33
11.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
12.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTI	ONS	\$	
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTI	ONS	\$	
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

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	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 1/22 Rpt: 4/31	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
_	Wichita Falls				00056207	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	06/30/2024	ABERNATHY, JACOB				\$65.00
	,	6 Contributor address; City; State; Zip Code		1		
	1					
	1					
	ļ	Archer City, TX 76351				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	;)		
	Firefighter	,	City of Wichita Falls			
_	Date	Full name of contributor out-of-state PAC (ID#:	·	Γ	Amount of Contribution (\$)	
	06/30/2024	ADAMS, Pete	,			\$60.00
	00,00,			ł		~~
	,	CUITITIDUTOR duriess, City, State, Lip Couc				
l	,					
	,	Crowell, TX 79227				
-	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ר</u>		
l	Firefighter		City of Wichita Falls	')		
⊨			<u> </u>	—	Amount of Contribution (\$)	
l	Date 06/30/2024	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	ФСЕ 00
l	06/30/2024	ALLEN, AUSTIN				\$65.00
	,	Contributor address; City; State; Zip Code				
	,					
	,	Dark TV 76967				
		Iowa Park, TX 76367	1 (2 la tratica	Ļ		
	-	upation / Job title (See Instructions)	Employer (See Instructions	;)		
L	Firefighter		City of Wichita Falls			
Γ	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	06/30/2024	ALSUP, MICHAEL				\$65.00
	,	Contributor address; City; State; Zip Code		1		
	,					
	,					
		Wichita Falls, TX 76310				
		upation / Job title (See Instructions)	Employer (See Instructions	;)		
	Firefighter		City of Wichita Falls			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	06/30/2024	ASHLOCK, Jody				\$60.00
	!	Contributor address; City; State; Zip Code		1		
	P					
	,					
	,	Lakeside City, TX 76308				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	ـــــــــــــــــــــــــــــــــــــ		
	Firefighter	, , , , , , , , , , , , , , , , , , , ,	City of Wichita Falls	,		
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	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 2/22 Rpt: 5/31	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Wichita Falls				00056207	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	06/30/2024	BABER, Darren				\$30.00
		6 Contributor address; City; State; Zip Code		1		
		Burkburnett, TX 76354				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Firefighter		City of Wichita Falls			
F	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	06/30/2024	BACHMAN, Derek				\$60.00
				\mathbf{I}		
		Henrietta, TX 76365				
⊢	Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Firefighter		City of Wichita Falls			
╞	Date	Full name of contributor out-of-state PAC (ID#:_		Γ	Amount of Contribution (\$)	
	06/30/2024	BEREND, Craig	/			\$120.00
	00/30/2024			-		Ψ120.00
		Contributor address; City; State; Zip Code				
		Windthorst, TX 76389				
\vdash	Princinal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ב)		
	Firefighter		City of Wichita Falls	,		
╞	_			1		
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	* 20.00
	06/30/2024	BERRY, Joshua				\$30.00
		Contributor address; City; State; Zip Code				
		Michita Falla TV 76205				
	Deineineleen	Wichita Falls, TX 76305				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Firefighter		City of Wichita Falls			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/30/2024	BLEVINS, Blake				\$60.00
		Contributor address; City; State; Zip Code		1		
		Henrietta, TX 76365				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Firefighter		City of Wichita Falls			
1						

	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 3/22 Rpt: 6/31	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Wichita Falls	Fire PAC			00056207	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	06/30/2024	BOWERS, Derrick				\$30.00
		6 Contributor address; City; State; Zip Code		1		
		Wichita Falls, TX 76302				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Firefighter		City of Wichita Falls			
⊨	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/30/2024	BOWLES, DAVID				\$52.00
				1		
		······································				
		Wichita Falls, TX 76308				
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>.</u> 5)		
	Firefighter		City of Wichita Falls			
╞	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	06/30/2024	BOWMAN, MICHAEL			Allount of Contribution (+)	\$26.00
	00,00,202.			-		Ψ20100
		Contributor address; City; State; Zip Code				
		Petrolia, TX 76377				
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ເ)		
	Firefighter		City of Wichita Falls	,		
⊨	_			<u> </u>	Amount of Contribution (ft)	
	Date 06/30/2024	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	ΦEE 00
	00/30/2024	BRADLEY, JONATHAN				\$55.00
		Contributor address; City; State; Zip Code				
		Wichita Falls, TX 76310				
L	Dringingl oppu			<u> </u>		
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Firefighter		City of Wichita Falls	-		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/30/2024	BROWNING, BILLY				\$26.00
		Contributor address; City; State; Zip Code]		
		Henrietta, TX 76365				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Firefighter		City of Wichita Falls			
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	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 4/22 Rpt: 7/31	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Wichita Falls	Fire PAC			00056207	
4	Date	5 Full name of contributor out-of-state PAC (ID#	:)	7	Amount of Contribution (\$)	
	06/30/2024	BURCHETT, Jared				\$30.00
		6 Contributor address; City; State; Zip Code				
		Burkburnett, TX 76354				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Firefighter		City of Wichita Falls			
	Date	Full name of contributor Out-of-state PAC (ID#	t:)		Amount of Contribution (\$)	
	06/30/2024	CANTWELL, Ross				\$1.00
	Contributor address; City; State; Zip Code					
		Henrietta, TX 76365				
⊢	Princinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ເ)		
	Firefighter		City of Wichita Falls	,,		
⊨	Date	Full name of contributor out-of-state PAC (ID#			Amount of Contribution (\$)	
	06/30/2024)		Amount of Contribution (\$)	\$30.00
	00/00/2024	Contributor address; City; State; Zip Code				400.00
		Wichita Falls, TX 76310				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Firefighter		City of Wichita Falls			
Γ	Date	Full name of contributor 🛛 out-of-state PAC (ID#	:)		Amount of Contribution (\$)	
	06/30/2024	COATS, Kurtis				\$60.00
		Contributor address; City; State; Zip Code				
	Deinsinglasse	Wichita Falls, TX 76310				
	Firefighter	pation / Job title (See Instructions)	Employer (See Instructions City of Wichita Falls	5)		
╘				_		
	Date	Full name of contributor Out-of-state PAC (ID#	··)		Amount of Contribution (\$)	¢20.00
	06/30/2024	COLEMAN, GARRETT				\$30.00
		Contributor address; City; State; Zip Code				
		Iowa Park, TX 76367				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	1 5)		
	Firefighter	· · ·	City of Wichita Falls			
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	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 5/22 Rpt: 8/31	
2	FILER NAME			3	Filer ID (Ethics Commission	ı Filers)
	Wichita Falls	S Fire PAC			00056207	
4	Date	5 Full name of contributor Out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	06/30/2024	COTTON, Darrell				\$60.00
		6 Contributor address; City; State; Zip Code		1		
Ļ		Wichita Falls, TX 76309		Ĺ		
8		upation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Firefighter		City of Wichita Falls	—		
	Date	Full name of contributor out-of-state PAC (ID#:	:)		Amount of Contribution (\$)	
	06/30/2024					\$60.00
		Contributor address; City; State; Zip Code				
		Wishita Falls TV 76200				
	Dringing occ	Wichita Falls, TX 76308 upation / Job title (See Instructions)	Employer (See Instructions			
	Firefighter		Employer (See Instructions City of Wichita Falls	5)		
⊨				—		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	# 25 00
	06/30/2024	Carlton, Dustin				\$65.00
		Contributor address; City; State; Zip Code				
		Wichita Falls, TX 76302				
\vdash	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Firefighter		City of Wichita Falls	-,		
╞	Date	Full name of contributor out-of-state PAC (ID#:		Τ	Amount of Contribution (\$)	
	06/30/2024	Carroll, John	/		Allount of Contribution (4)	\$32.50
	00,00,202.	Contributor address; City; State; Zip Code		•		402.00
		Continuation address, City, State, Zip Code				
		Wichita Falls, TX 76308				
┢	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Firefighter		City of Wichita Falls			
┢	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	06/30/2024	DOWLING, Baxter				\$1.00
		Contributor address; City; State; Zip Code		1		
		Wichita Falls, TX 76308				
		ipation / Job title (See Instructions)	Employer (See Instructions	3)		
	Firefighter		City of Wichita Falls			
			<u>.</u>			

	The Instru	ction Guide explains how to complete this f	iorm.	1	Total pages Schedule A1: Sch: 6/22 Rpt: 9/31	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Wichita Falls				00056207	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	06/30/2024	DOWNS, Rusty				\$60.00
	I	6 Contributor address; City; State; Zip Code		1		
		Kamay, TX 76369				
8		upation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Firefighter		City of Wichita Falls			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	06/30/2024	DUNCAN, James				\$120.00
	Contributor address; City; State; Zip Code			1		
		Henrietta, TX 76365				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Firefighter		City of Wichita Falls			
	Date	Full name of contributor Out-of-state PAC (ID#:_		Γ	Amount of Contribution (\$)	
	06/30/2024	ELLEDGE, Randall			-	\$60.00
	I	Contributor address; City; State; Zip Code		•		
		Petrolia, TX 76377				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)		
	Firefighter		City of Wichita Falls			
╞	Date	Full name of contributor out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	06/30/2024	ENGLISHBEE, Mark				\$60.00
	I	Contributor address; City; State; Zip Code		•		
		Lakeside City, TX 76308				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	ـــــــــــــــــــــــــــــــــــــ		
	Firefighter		City of Wichita Falls			
⊨	Date	Full name of contributor out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	06/30/2024	FIELDS, Thelbert				\$26.00
	••••	Contributor address; City; State; Zip Code		ł		7 -
		Burkburnett, TX 76354				
⊢	Principal occu	Jupation / Job title (See Instructions)	Employer (See Instructions	<u>لــــــــــــــــــــــــــــــــــــ</u>		
	Firefighter		City of Wichita Falls	,		
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	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 7/22 Rpt: 10/31	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Wichita Falls				00056207	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	06/30/2024	FREELAND, Scotty				\$60.00
	I	6 Contributor address; City; State; Zip Code		1		
		Electra, TX 76360				
8		upation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Firefighter		City of Wichita Falls			
	Date	Full name of contributor out-of-state PAC (ID#:		Γ	Amount of Contribution (\$)	
	06/30/2024	GORDY, TANNER				\$65.00
	1	Contributor address; City; State; Zip Code		1		
		Wichita Falls, TX 76310				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Firefighter		City of Wichita Falls			
	Date	Full name of contributor out-of-state PAC (ID#:	<u>.</u>)		Amount of Contribution (\$)	
	06/30/2024	GOWEN, James				\$24.00
	I	Contributor address; City; State; Zip Code		1		
		Wichita Falls, TX 76310				
		upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Firefighter		City of Wichita Falls			
	Date	Full name of contributor out-of-state PAC (ID#:		Γ	Amount of Contribution (\$)	
	06/30/2024	GROVES, JUSTIN				\$65.00
	1	Contributor address; City; State; Zip Code		1		
		Wichita Falls, TX 76310				
		upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Firefighter		City of Wichita Falls			
	Date	Full name of contributor out-of-state PAC (ID#:		Γ	Amount of Contribution (\$)	
	06/30/2024	HADDERTON, BEAU				\$130.00
	1	Contributor address; City; State; Zip Code		1		
		Wichita Falls, TX 76302				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Firefighter		City of Wichita Falls			

	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 8/22 Rpt: 11/31	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Wichita Falls	Fire PAC			00056207	
4	Date	5 Full name of contributor Out-of-state PAC (ID#	4:)	7	Amount of Contribution (\$)	
	06/30/2024	HAISTEN, BLAKE				\$30.00
	I	6 Contributor address; City; State; Zip Code		1		
Ļ	21.1.1	Wichita Falls, TX 76308		Ĺ		
8		ipation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Firefighter		City of Wichita Falls	_		
	Date	Full name of contributor out-of-state PAC (ID#	#:)		Amount of Contribution (\$)	
	06/30/2024					\$120.00
		Contributor address; City; State; Zip Code				
		Michita Falle TV 76210				
<u> </u>	Dringing oog	Wichita Falls, TX 76310	Employer (See Instructions	<u> </u>		
	Firefighter	ipation / Job title (See Instructions)	Employer (See Instructions City of Wichita Falls	5)		
				-		
	Date	Full name of contributor out-of-state PAC (ID#	#:)		Amount of Contribution (\$)	±100.00
	06/30/2024	HILLNER, Raymond				\$120.00
		Contributor address; City; State; Zip Code				
		Wichita Falls, TX 76302				
-	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ג)		
	Firefighter		City of Wichita Falls	,		
⊨	Date	Full name of contributor out-of-state PAC (ID#		Γ	Amount of Contribution (\$)	
	06/30/2024	HOFF, Kirkland	Ŧ)			\$25.00
	00/00/2025	Contributor address; City; State; Zip Code				Ψ20.00
		Contributor address, City, State, Zip Code				
		Dean, TX 76305				
	Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Firefighter		City of Wichita Falls	-		
⊨	Date	Full name of contributor out-of-state PAC (ID#			Amount of Contribution (\$)	
	06/30/2024	HOLLAND, Rick			.,	\$60.00
	I	Contributor address; City; State; Zip Code				
		Burkburnett, TX 76354				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Firefighter		City of Wichita Falls			

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	The Instru	ction Guide explains how to complete this t	form.	1	Total pages Schedule A1: Sch: 9/22 Rpt: 12/31	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Wichita Falls				00056207	
4	Date	5 Full name of contributor Out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	06/30/2024	HUGHES, Donald				\$120.00
		6 Contributor address; City; State; Zip Code		1		
		Lakeside City, TX 76308				
8		upation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Firefighter		City of Wichita Falls			
	Date	Full name of contributor out-of-state PAC (ID#:_	·)	Γ	Amount of Contribution (\$)	
	06/30/2024	HURLEY, Michael				\$18.00
		Contributor address; City; State; Zip Code		1		
		lowa Park, TX 76367				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Firefighter		City of Wichita Falls			
	Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>	Γ	Amount of Contribution (\$)	
	06/30/2024	JEFFERS, BENJAMIN				\$65.00
		Contributor address; City; State; Zip Code		1		
		Wichita Falls, TX 76310				
	-	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Firefighter		City of Wichita Falls			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	06/30/2024	JONES, Derek				\$26.00
		Contributor address; City; State; Zip Code		1		
		Wichita Falls, TX 76305				
		ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Firefighter		City of Wichita Falls			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	06/30/2024	JONES, Jeremy				\$60.00
		Contributor address; City; State; Zip Code		1		
		Wichita Falls, TX 76308	_			
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Firefighter		City of Wichita Falls			

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 10/22 Rpt: 13/31	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Wichita Falls				00056207	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	06/30/2024	JONES, Ryan				\$60.00
	I	6 Contributor address; City; State; Zip Code	1	1		
	I					
	I					
		Wichita Falls, TX 76310				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		_
	Firefighter		City of Wichita Falls			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	06/30/2024	KEENER, CARL				\$30.00
	I	Contributor address; City; State; Zip Code		1		
	I					
	I					
	I	Windthorst, TX 76389				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Firefighter		City of Wichita Falls			
F	Date	Full name of contributor out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	06/30/2024	KELLY, Michael			-	\$260.00
	I	Contributor address; City; State; Zip Code		•		
	I					
	I					
	I	Wichita Falls, TX 76310				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Firefighter		City of Wichita Falls			
⊨	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	06/30/2024	KERR, Craig				\$65.00
	I	Contributor address; City; State; Zip Code		•		
	I					
	I					
	I	Holliday, TX 76366				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ـــــــــــــــــــــــــــــــــــــ		
	Firefighter		City of Wichita Falls			
⊨	Date	Full name of contributor Out-of-state PAC (ID#:_	<u> </u>	Γ	Amount of Contribution (\$)	
	06/30/2024	LANCASTER, STEPHEN			· · · · · · · · · · · · · · · · · · ·	\$65.00
		Contributor address; City; State; Zip Code	·····	ł		7
	I					
	I					
	I	lowa Park, TX 76367				
⊢	Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions	<u>لــــــــــــــــــــــــــــــــــــ</u>		
	Firefighter		City of Wichita Falls	,		
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	The Instru	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 11/22 Rpt: 14/31	
2	FILER NAME			3	Filer ID (Ethics Commission	ı Filers)
	Wichita Falls				00056207	
4	Date	5 Full name of contributor out-of-state PAC (ID)	7	Amount of Contribution (\$)	
	06/30/2024	LINDEMAN, Corey				\$26.00
		6 Contributor address; City; State; Zip Code		1		
	ļ					
	ļ					
		Lakeside City, TX 76308				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Firefighter		City of Wichita Falls			
	Date	Full name of contributor Dut-of-state PAC (ID	D#:)	Γ	Amount of Contribution (\$)	
	06/30/2024	LOGGIE, STEVEN				\$1.00
		Contributor address; City; State; Zip Code		1		
	ļ					
	ļ					
		Wichita Falls, TX 76308				
		upation / Job title (See Instructions)	Employer (See Instructions	s)		
	Firefighter		City of Wichita Falls			
	Date	Full name of contributor out-of-state PAC (ID)#:)	Ī	Amount of Contribution (\$)	
	06/30/2024	MARTISCHNIG, JOHN				\$13.00
	1	Contributor address; City; State; Zip Code		1		
	ļ					
		Holliday, TX 76366				
		ipation / Job title (See Instructions)	Employer (See Instructions	s)		
	Firefighter		City of Wichita Falls			
	Date	Full name of contributor Dut-of-state PAC (ID)#:)	Γ	Amount of Contribution (\$)	
	06/30/2024	MAWSON, Edward				\$32.50
	ļ	Contributor address; City; State; Zip Code		1		
	ļ					
	ļ					
		Wichita Falls, TX 76302				
		ipation / Job title (See Instructions)	Employer (See Instructions	s)		
	Firefighter		City of Wichita Falls			
	Date	Full name of contributor 🔲 out-of-state PAC (ID)#:)	Γ	Amount of Contribution (\$)	
	06/30/2024	MAYS, Trent				\$60.00
	ļ	Contributor address; City; State; Zip Code		1		
	ļ					
	ļ					
		Wichita Falls, TX 76310				
		ipation / Job title (See Instructions)	Employer (See Instructions	s)		
	Firefighter		City of Wichita Falls			

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

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	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 13/22 Rpt: 16/31	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Wichita Falls				00056207	
4	Date	5 Full name of contributor Out-of-state PAC (ID#)	7	Amount of Contribution (\$)	
	06/30/2024	MORGAN, KEVIN				\$60.00
		6 Contributor address; City; State; Zip Code		1		
		Iowa Park, TX 76367				
8		upation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Firefighter		City of Wichita Falls			
	Date	Full name of contributor out-of-state PAC (ID#	:)	Γ	Amount of Contribution (\$)	
	06/30/2024	MORRIS, Joe				\$120.00
		Contributor address; City; State; Zip Code		1		
		Wichita Falls, TX 76310				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	<u>.</u> 5)		
	Firefighter		City of Wichita Falls			
F	Date	Full name of contributor out-of-state PAC (ID#	:)	Γ	Amount of Contribution (\$)	
	06/30/2024	MORTON, KEITH				\$50.04
		Contributor address; City; State; Zip Code		1		
		Wichita Falls, TX 76305				
	-	upation / Job title (See Instructions)	Employer (See Instructions	3)		
	Firefighter		City of Wichita Falls			
	Date	Full name of contributor out-of-state PAC (ID#)	Γ	Amount of Contribution (\$)	
	06/30/2024	MOSS, DJ				\$60.00
		Contributor address; City; State; Zip Code		1		
		Iowa Park, TX 76367				
		ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Firefighter		City of Wichita Falls			
F	Date	Full name of contributor out-of-state PAC (ID#)	Γ	Amount of Contribution (\$)	
	06/30/2024	MOULTON, Charles				\$28.00
		Contributor address; City; State; Zip Code		1		
		Iowa Park, TX 76367				
Γ		ipation / Job title (See Instructions)	Employer (See Instructions	3)		
	Firefighter		City of Wichita Falls			
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 14/22 Rpt: 17/31	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Wichita Falls				00056207	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	06/30/2024	MYATT, Rickey				\$60.00
		6 Contributor address; City; State; Zip Code		1		
		Wichita Falls, TX 76302				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	3)		
	Firefighter		City of Wichita Falls			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	06/30/2024	NICHOLS, Barry				\$50.00
		Contributor address; City; State; Zip Code		1		
		Wichita Falls, TX 76302				
		pation / Job title (See Instructions)	Employer (See Instructions	3)		
	Firefighter		City of Wichita Falls			
	Date	Full name of contributor out-of-state PAC (ID#:)	Ē	Amount of Contribution (\$)	
	06/30/2024	NICHOLS, Jarrod				\$65.00
		Contributor address; City; State; Zip Code		1		
		Iowa Park, TX 76367				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Firefighter		City of Wichita Falls			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	06/30/2024	OLIVER, JEREMY				\$26.00
		Contributor address; City; State; Zip Code		1		
		Wichita Falls, TX 76310				
		pation / Job title (See Instructions)	Employer (See Instructions	3)		
	Firefighter		City of Wichita Falls			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	06/30/2024	ORDONEZ, Daniel				\$30.00
		Contributor address; City; State; Zip Code		1		
		Wichita Falls, TX 76309				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Firefighter		City of Wichita Falls			
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	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 15/22 Rpt: 18/31	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Wichita Falls				00056207	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	06/30/2024	PESTERFIELD, Brice				\$60.00
		6 Contributor address; City; State; Zip Code				
		1				
		1				
		Wichita Falls, TX 76310				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	;)		
	Firefighter	1	City of Wichita Falls			
╞	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	06/30/2024	RAMSEY, William				\$130.00
		Contributor address; City; State; Zip Code				
		1				
		Byers, TX 76357				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	上 5)		
	Firefighter	· · · · · · · · · · · · · · · · · · ·	City of Wichita Falls			
⊨	Date	Full name of contributor out-of-state PAC (ID#:_	<u> </u>	_	Amount of Contribution (\$)	
	06/30/2024	RANGEL, Fernando	/		Allount of Contribution (*)	\$65.00
	001001202-1					ψ00.00
		Contributor address; City; State; Zip Code				
		1				
		Wichita Falls, TX 76305				
┝	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u>		
	Firefighter		City of Wichita Falls	9		
╞			<u> </u>	_		
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	* 24.00
	06/30/2024	RASCHKE, Jarred				\$24.00
		Contributor address; City; State; Zip Code				
		1				
┝	Dutantinal again	Iowa Park, TX 76367		Ĺ		
		upation / Job title (See Instructions)	Employer (See Instructions	;)		
L	Firefighter		City of Wichita Falls	_		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	_
	06/30/2024	RAUB, LANCE				\$26.00
		Contributor address; City; State; Zip Code				
		1				
		1				
		Wichita Falls, TX 76310				
		upation / Job title (See Instructions)	Employer (See Instructions	;)		
	Firefighter	,	City of Wichita Falls			

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	The Instru	ction Guide explains how to complete th	nis form.	1	Total pages Schedule A1: Sch: 16/22 Rpt: 19/31	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Wichita Falls	Fire PAC			00056207	
4	Date	5 Full name of contributor Dut-of-state PAC ((ID#:)	7	Amount of Contribution (\$)	
	06/30/2024	RICHIE, Cary				\$30.00
		6 Contributor address; City; State; Zip Code		"		
Ļ		Wichita Falls, TX 76309		Ĺ		
8		pation / Job title (See Instructions)	9 Employer (See Instructions	S)		
	Firefighter		City of Wichita Falls	_		
	Date	—	(ID#:)		Amount of Contribution (\$)	
	06/30/2024	RITCHIE, Konner				\$5.00
		Contributor address; City; State; Zip Code				
		Laliasida Ott TV 76200				
	Duin single age	Lakeside City, TX 76308	European (Cara Instruction)			
		ipation / Job title (See Instructions)	Employer (See Instructions	S)		
	Firefighter	<u>-</u>	City of Wichita Falls	_		
	Date	Full name of contributor out-of-state PAC ((ID#:)		Amount of Contribution (\$)	
	06/30/2024	RITCHIE, Randal				\$60.00
		Contributor address; City; State; Zip Code				
		Lakeside City, TX 76308				
┝	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>م</u>		
	Firefighter		City of Wichita Falls	5)		
╞		Full name of contributor Out-of-state PAC (Т	Amount of Contribution (\$)	
	Date 06/30/2024	SAMPLEY, Calvin	(ID#:)		Amount of Contribution (\$)	\$60.00
	00/30/2024					Φ00.00
		Contributor address; City; State; Zip Code				
		Iowa Park, TX 76367				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Firefighter	, , , , , , , , , , , , , , , , , , ,	City of Wichita Falls	-,		
╞	Date	Full name of contributor out-of-state PAC (Т	Amount of Contribution (\$)	
	06/30/2024	SCHREIBER, Dustin	(ID#)			\$65.00
	00/00/202	Contributor address; City; State; Zip Code		·		400.02
		Scotland, TX 76379				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Firefighter		City of Wichita Falls	-		
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	The Instru	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 17/22 Rpt: 20/31	
2	FILER NAME			3	Filer ID (Ethics Commission	ı Filers)
	Wichita Falls				00056207	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	06/30/2024	SCHWEIGER, Chris				\$60.00
	ļ	6 Contributor address; City; State; Zip Code	, , , , , , , , , , , , , , , , , , ,	1		
	ļ					
	ļ					
Ļ		Iowa Park, TX 76367	1	L		
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Firefighter		City of Wichita Falls	_		
	Date	Full name of contributor out-of-state PAC (ID#:	:)	Γ	Amount of Contribution (\$)	
	06/30/2024	SCHWEIGER, DAKOTA				\$39.00
	ļ	Contributor address; City; State; Zip Code]		
	ļ					
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	Di sinal assu	Wichita Falls, TX 76308		ŕ		
		ipation / Job title (See Instructions)	Employer (See Instructions	3)		
	Firefighter		City of Wichita Falls	—		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/30/2024	SCHWEIGER, JAY]		\$78.00
	ļ	Contributor address; City; State; Zip Code				
	ļ					
	ļ	lowa Park, TX 76367				
<u> </u>	Dringingl occu	ipation / Job title (See Instructions)	Employer (See Instructions	$\sum_{i=1}^{n}$		
	Firefighter		Employer (See Instructions City of Wichita Falls	5)		
╞	-		<u> </u>	—		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	* ~ 5 00
	06/30/2024	SEEL, Shawn				\$65.00
	ļ	Contributor address; City; State; Zip Code				
	ļ	Wichita Falls, TX 76305				
┝	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u>		
	Firefighter		City of Wichita Falls	"		
╞				_	to a superior (Φ)	
	Date 06/30/2024	Full name of contributor out-of-state PAC (ID#: SEYMORE, Minton)		Amount of Contribution (\$)	\$60.00
	00/30/2024			-		Φ00.00
	ļ	Contributor address; City; State; Zip Code				
	ļ	Wichita Falls, TX 76310				
⊢	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ار</u> ج)		
	Firefighter		City of Wichita Falls	,		
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	The Instru	ction Guide explains how to complete thi	is form.	1	Total pages Schedule A1: Sch: 18/22 Rpt: 21/31	
2	FILER NAME			3	Filer ID (Ethics Commission	1 Filers)
	Wichita Falls	Fire PAC			00056207	
4	Date	5 Full name of contributor Out-of-state PAC (II	D#:)	7	Amount of Contribution (\$)	
	06/30/2024	SHELTON, Russell				\$24.00
		6 Contributor address; City; State; Zip Code		1		
	Dringinal occu	Iowa Park, TX 76367	Employer (See Instruction)			
8	Firefighter	ipation / Job title (See Instructions)	9 Employer (See Instructions City of Wichita Falls	5)		
				—		
	Date		D#:)		Amount of Contribution (\$)	* CO 00
	06/30/2024					\$60.00
		Contributor address; City; State; Zip Code				
		Byers, TX 76357				
-	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	L s)		
	Firefighter		City of Wichita Falls	-,		
⊨	Date	Full name of contributor out-of-state PAC (II		Τ	Amount of Contribution (\$)	
	06/30/2024	SHUGART, Mathew	σπ,			\$60.00
	••••					Ŧ
		Wichita Falls, TX 76309				
	•	ipation / Job title (See Instructions)	Employer (See Instructions	s)		
	Firefighter		City of Wichita Falls			
	Date	Full name of contributor out-of-state PAC (II	D#:)	Γ	Amount of Contribution (\$)	
	06/30/2024	SKELTON, Travis				\$60.00
		Contributor address; City; State; Zip Code		1		
	Drive sized as as	Wichita Falls, TX 76302				
		ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Firefighter		City of Wichita Falls	—		
	Date	Full name of contributor out-of-state PAC (II	D#:)		Amount of Contribution (\$)	* 20.00
	06/30/2024	SKJELSTAD, Patrick				\$60.00
		Contributor address; City; State; Zip Code				
		lowa Park, TX 76367				
\vdash	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	L s)		
	Firefighter		City of Wichita Falls	2)		

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

 	 FILER NAME Wichita Falls Fire PAC Date Full name of contributor out-of- 06/30/2024 Full name of contributor out-of- TIMMONS, Daniel Contributor address; City; State; Zip Condition Graford, TX 76449 Principal occupation / Job title (See Instructions) Firefighter 	Iete this form. Sch: 20/22 Rpt: 23/31 3 Filer ID (Ethics Commission Filers) 00056207 ate PAC (ID#:) 7 Amount of Contribution (\$) \$1.00 Ie 9 Employer (See Instructions)
Wichita Fails Fire PAC 00056207 4 Date 5 Full name of contributor out-of-state PAC (D#) 7 Amount of Contribution (\$) \$1.0 06/30/2024 6 Contributor address; City, State; Zip Code 7 Amount of Contribution (\$) \$1.0 8 Principal occupation / 3ob title (See Instructions) 9 Employer (See Instructions) City of Wichita Fails 06/30/2024 Full name of contributor out-of-state PAC (D#) Amount of Contribution (\$) \$30.0 06/30/2024 Full name of contributor out-of-state PAC (D#) Amount of Contribution (\$) \$30.0 06/30/2024 Foul name of contributor out-of-state PAC (D#) Amount of Contribution (\$) \$30.0 Principal occupation / 3ob title (See Instructions) Employer (See Instructions) Employer (See Instructions) \$24.0 06/30/2024 Full name of contributor out-of-state PAC (D#	Wichita Falls Fire PAC 4 Date 5 Full name of contributor 06/30/2024 TIMMONS, Daniel 6 Contributor address; City; State; Zip Contributor Graford, TX 76449 8 Principal occupation / Job title (See Instructions) Firefighter	00056207 ate PAC (ID#:) 7 Amount of Contribution (\$) le 9 Employer (See Instructions)
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6 Contributor address; City: State: Zip Code Graford, TX 76449 9 Employer (See Instructions) 7 Principal occupation / Job title (See Instructions) 1 Date Full name of contributor	6 Contributor address; City; State; Zip Contributor address; City	9 Employer (See Instructions)
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Principal occupation / Job title (See Instructions) Firefighter Employer (See Instructions) City of Wichita Falls Date Full name of contributor out-of-state PAC (ID#) 06/30/2024 TRESSLER, Keith	Jours Dark TV 76267	
Firefighter City of Wichita Falls Date Full name of contributor	· · ·	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 06/30/2024 TRESSLER, Keith \$24.0 Contributor address; City; State; Zip Code \$24.0 Wichita Falls, TX 76310 Employer (See Instructions) Firefighter Full name of contributor out-of-state PAC (ID#:) Amount of Contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 06/30/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 06/30/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 06/30/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) \$60.0 Contributor address; City; State; Zip Code Wichita Falls, TX 76309 Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) \$70.0 O6/30/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) \$70.0 O6/30/2024 Full name of contributor out-of-state PAC (ID#:) </td <td></td> <td></td>		
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Contributor address; City; State; Zip Code Wichita Falls, TX 76310 Principal occupation / Job title (See Instructions) Firefighter Date 06/30/2024 TUMEY, Greg Contributor address; City; State; Zip Code Wichita Falls, TX 76309 Principal occupation / Job title (See Instructions) Firefighter Of/30/2024 Wichita Falls, TX 76309 Principal occupation / Job title (See Instructions) Firefighter Date 06/30/2024 Wichita Falls, TX 76309 Principal occupation / Job title (See Instructions) Firefighter City of Wichita Falls Date 06/30/2024 WADE, ROBERT Contributor address; City; State; Zip Code Burkburnett, TX 76354 Principal occupation / Job title (See Instructions) Employer (See Instructions) State; Zip Code Burkburnett, TX 76354		
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Principal occupation / Job title (See Instructions) Employer (See Instructions) Firefighter City of Wichita Falls Date Full name of contributor out-of-state PAC (ID#:) 06/30/2024 TUMEY, Greg Amount of Contribution (\$) Contributor address; City; State; Zip Code Vichita Falls, TX 76309 Amount of Contributions) Principal occupation / Job title (See Instructions) Employer (See Instructions) \$60.0 Firefighter Contributor address; City; State; Zip Code Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) \$70.0 Of/30/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 06/30/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 06/30/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 06/30/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) Burkburnett, TX 76354 Functional occupation / Job title (See Instructions) Employer (See Instructions)		
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Firefighter City of Wichita Falls Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 06/30/2024 TUMEY, Greg S60.0 Contributor address; City; State; Zip Code S60.0 Wichita Falls, TX 76309 Wichita Falls, TX 76309 Principal occupation / Job title (See Instructions) Employer (See Instructions) Firefighter City of Wichita Falls Date Full name of contributor out-of-state PAC (ID#:) O6/30/2024 Full name of contributor out-of-state PAC (ID#:) Of/30/2024 Burkburnett, TX 76354 Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions)		Employer (Cap Instructiona)
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06/30/2024 TUMEY, Greg \$60.0 Contributor address; City; State; Zip Code \$60.0 Wichita Falls, TX 76309 Wichita Falls, TX 76309 Principal occuztion / Job title (See Instructions) Employer (See Instructions) Firefighter City of Wichita Falls Date Full name of contributor out-of-state PAC (ID#:) 06/30/2024 WADE, ROBERT Contributor address; City; State; Zip Code Amount of Contribution (\$) Burkburnett, TX 76354 \$70.0 Principal occupation / Job title (See Instructions) Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions)		
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Principal occupation / Job title (See Instructions) Employer (See Instructions) Firefighter City of Wichita Falls Date Full name of contributor out-of-state PAC (ID#:) 06/30/2024 WADE, ROBERT \$70.0 Contributor address; City; State; Zip Code Burkburnett, TX 76354 Principal occupation / Job title (See Instructions) Employer (See Instructions)		
Principal occupation / Job title (See Instructions) Employer (See Instructions) Firefighter City of Wichita Falls Date Full name of contributor out-of-state PAC (ID#:) 06/30/2024 WADE, ROBERT \$70.0 Contributor address; City; State; Zip Code Burkburnett, TX 76354 Principal occupation / Job title (See Instructions) Employer (See Instructions)	Wichita Falls TX 76309	
Firefighter City of Wichita Falls Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 06/30/2024 WADE, ROBERT \$70.0 Contributor address; City; State; Zip Code \$70.0 Burkburnett, TX 76354 Employer (See Instructions)		Employer (Soo Instructions)
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06/30/2024 WADE, ROBERT \$70.0 Contributor address; City; State; Zip Code \$70.0 Burkburnett, TX 76354 Employer (See Instructions)		
Contributor address; City; State; Zip Code Burkburnett, TX 76354 Principal occupation / Job title (See Instructions) Employer (See Instructions)		
Burkburnett, TX 76354 Principal occupation / Job title (See Instructions) Employer (See Instructions)		
Principal occupation / Job title (See Instructions) Employer (See Instructions)	Contributor address; City; State; Zip Co	e
Principal occupation / Job title (See Instructions) Employer (See Instructions)		
Principal occupation / Job title (See Instructions) Employer (See Instructions)	Burkhurnett TX 76354	
		Employer (See Instructions)
	Fincipal occupation / Job title (See Instructions)	City of Wichita Falls

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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 21/22 Rpt: 24/31	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Wichita Falls				00056207	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	06/30/2024	WASHBURN, DANIEL				\$26.00
		6 Contributor address; City; State; Zip Code		1		
	=	Wichita Falls, TX 76302		Ĺ		
8		upation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Firefighter		City of Wichita Falls	—		
	Date)		Amount of Contribution (\$)	
	06/30/2024	WHITELEY, Dustin				\$65.00
		Contributor address; City; State; Zip Code]		
	Dringing ogg	Wichita Falls, TX 76302				
		upation / Job title (See Instructions)	Employer (See Instructions	3)		
L	Firefighter		City of Wichita Falls	—		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	± - 0 00
	06/30/2024	WILLIAMS, David				\$60.00
		Contributor address; City; State; Zip Code				
		Iowa Park, TX 76367				
┝	Drincinal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Firefighter		City of Wichita Falls	5)		
╞				—		
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	ቀ1 00
	06/30/2024	WILLIAMS, Troy				\$1.00
		Contributor address; City; State; Zip Code				
		lowa Park, TX 76367				
⊢	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ار</u>		
	Firefighter		City of Wichita Falls	"		
╞	Date	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	
	06/30/2024	Full name of contributor out-of-state PAC (ID#: WINKLES, Mason)		Affiount of Continuation (φ)	\$1.00
		Contributor address; City; State; Zip Code		ł		Ψ1.00
		Contributor address; City, State, Zip Code				
		Wichita Falls, TX 76305				
┝	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ار</u> ج)		
	Firefighter		City of Wichita Falls	"		
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The Instruction Guide explains how to complete this form.					Total pages Schedule A1: Sch: 22/22 Rpt: 25/31	
2	2 FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Wichita Falls	Fire PAC			00056207	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	06/30/2024	WOMACK, Brent				\$120.00
		6 Contributor address; City; State; Zip Code				
		Wichita Falls, TX 76302				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Firefighter		City of Wichita Falls			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	06/30/2024	WOOD, Doyle				\$60.00
		Contributor address; City; State; Zip Code				
\vdash	Duin singl oppu	Wichita Falls, TX 76310	Englisher (Cas Instructions	Ĺ		
	Firefighter	pation / Job title (See Instructions)	Employer (See Instructions City of Wichita Falls	5)		
╘				-		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	ቀናር በበ
	06/30/2024	WRIGHT, BRANDON				\$65.00
	Contributor address; City; State; Zip Code					
		Wichita Falls, TX 76302				
\vdash			Employer (See Instructions	L;)		
	Firefighter		City of Wichita Falls			
╞	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/30/2024	WRIGHT, DAVID				\$65.00
		Contributor address; City; State; Zip Code				
		Archer City, TX 76351				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Firefighter		City of Wichita Falls			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	06/30/2024	YORK, Robert				\$60.00
	Contributor address; City; State; Zip Code					
	Wights Falls TV 70200					
\vdash	Wichita Falls, TX 76308					
	Firefighter	pation / Job title (See Instructions)	Employer (See Instructions City of Wichita Falls	5)		
\vdash	Filelighter					

EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Fees Office Overhea Food/Beverage Expense Polling Expens y - Gift/Awards/Memorials Expense Printing Expens	se Travel Out of District /Contract Labor OTHER (enter a category not listed above)			
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)			
Sch: 1/6 Rpt: 26/31	Wichita Falls Fire PAC	00056207			
4 Date	5 Payee name				
06/18/2024	Bradley, Jonathan (Mr.)				
6 Amount (\$)	7 Payee address; City; State; Zip Code				
\$860.52	4801 Windsong Dr				
Expenditure from corporate funds	Wichita Falls, TX 76310				
8 PURPOSE OF		Description			
EXPENDITURE	Three Tablets purchased from petitioning.	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
		Reimbursement for tablets for the purpose of petitioning, and future polling/campaigning.			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH				
Date	Payee name				
01/05/2024	Chelsea Plaza LLC				
Amount (\$)	Payee address; City; State; Zip Code				
\$75.00	909 8th Street				
Expenditure from corporate funds	Wichita Falls, TX 76301				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Rent			
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought H	Office held			
Date	Date Payee name				
02/07/2024	Chelsea Plaza LLC				
Amount (\$)	Payee address; City; State; Zip Code				
\$75.00	909 8th Street				
Expenditure from corporate funds	Wichita Falls, TX 76301				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Rent			
Complete <u>ONLY</u> if direct expenditure to benefit C/O	I Candidate/Officeholder name Office sought H	Office held			

EXPENDITURE CATEGORIES FOR BOX 8(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		EXPENDITORE (Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exp Legal Services The Instruction Guide	Loan Re Office O Polling E pense Printing I Salaries/	payment/Reimbursement verhead/Rental Expense Expense Wages/Contract Labor	Transportation Travel in Distric Travel Out of D	
1 Total pages Schedule F1:	2 FILER NAM	E			3 Filer ID	(Ethics Commission Filers)
Sch: 2/6 Rpt: 27/31		- Ils Fire PAC			00056207	(
4 Date	5 Payee nam	9				
03/07/2024	Chelsea P	laza LLC				
6 Amount (\$)	7 Payee addr	ess; City;	State; Zip C	ode		
\$75.00	909 8th St	reet				
Expenditure from corporate funds	Wichita Fa	lls, TX 76301				
8 PURPOSE OF EXPENDITURE		See Categories listed at the to rhead/Rental Exper			l outside of Texas. Cor n, TX, officeholder livin	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ficeholder name	Office so	ught	Office h	eld
Date	Payee nam	e				
04/05/2024	Chelsea P	laza LLC				
Amount (\$)	Payee addr	ess; City;	State; Zip C	ode		
\$75.00	909 8th St	-				
Expenditure from corporate funds	Wichita Fa	lls, TX 76301				
PURPOSE OF EXPENDITURE		See Categories listed at the to rhead/Rental Exper			l outside of Texas. Cor n, TX, officeholder livin	
Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ficeholder name	Office so	ught	Office h	eld
Date Payee name						
05/07/2024	Chelsea P					
Amount (\$)	Payee addr	ess; City;	State; Zip C	ode		
\$75.00	909 8th St	reet				
Expenditure from corporate funds	Wichita Fa	lls, TX 76301		_		
PURPOSE OF EXPENDITURE		See Categories listed at the to rhead/Rental Exper			l outside of Texas. Cor n, TX, officeholder livin	
Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ficeholder name	Office so	ught	Office h	eld

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

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Of Food/Beverage Expense Po Gift/Awards/Memorials Expense Pri	an Repayment/Reimbursement ice Overhead/Rental Expense lling Expense laries/Wages/Contract Labor to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Sch: 4/6 Rpt: 29/31	Wichita Falls Fire PAC		00056207
4 Date	5 Payee name		
05/27/2024	McCarthy, Clay (Mr.)		
6 Amount (\$)	7 Payee address; City; State; Z	ip Code	
\$129.89	1209 Oakhurst Dr		
Expenditure from corporate funds	Wichita Falls, TX 76302		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule		
OF EXPENDITURE	Internet Security Subscription		outside of Texas. Complete Schedule T.
			n, TX, officeholder living expense
		Service.	ent for McAfee Security Subscription
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI		e sought	Office held
Date	Payee name		
06/15/2024	The Deuce P-2		
Amount (\$)	Payee address; City; State; Z	in Code	
\$120.00	1409 Lamar St		
φ120.00	1409 Lamai St		
Expenditure from corporate funds	Wichita Falls, TX 76301		
PURPOSE	(a) Category (See Categories listed at the top of this schedule	e) (b) Description	
OF EXPENDITURE	Food/Beverage Expense		outside of Texas. Complete Schedule T.
			n, TX, officeholder living expense
		Fed guys per on upcoming	titioning for signatures to add two ballots election.
Complete ONLY if direct	Candidate/Officeholder name Offic	e sought	Office held
expenditure to benefit C/OI			
Date	Payee name		
06/16/2024	The Deuce P-2		
Amount (\$)	Payee address; City; State; Z	in Code	
\$112.00	1409 Lamar St		
φττς.00			
Expenditure from corporate funds	Wichita Falls, TX 76301		
PURPOSE	(a) Category (See Categories listed at the top of this schedule	e) (b) Description	
OF EXPENDITURE	Food/Beverage Expense		outside of Texas. Complete Schedule T.
			n, TX, officeholder living expense
		Fed guys pet on upcoming	titioning for signatures to add two ballots
Complete <u>ONLY</u> if direct expenditure to benefit C/OI		e sought	Office held

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Overh Food/Beverage Expense Polling Expe /- Gift/Awards/Memorials Expense Printing Exp	ense Travel Out of District ges/Contract Labor OTHER (enter a category not listed above)	
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)	
Sch: 5/6 Rpt: 30/31	Wichita Falls Fire PAC	00056207	
4 Date	5 Payee name		
06/18/2024	The Deuce P-2		
6 Amount (\$)	7 Payee address; City; State; Zip Code	e	
\$400.00	1409 Lamar St		
Expenditure from corporate funds	Wichita Falls, TX 76301		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b) Description	
OF EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.	
-		Check if Austin, TX, officeholder living expense	
		Fed guys petitioning for signatures to add two ballots on upcoming election.	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	I Candidate/Officeholder name Office sougl H	nt Office held	
Date	Payee name		
06/19/2024	The Deuce P-2		
Amount (\$)	Payee address; City; State; Zip Cod	9	
\$102.00	1409 Lamar St		
Expenditure from corporate funds	Wichita Falls, TX 76301		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (Food/Beverage Expense	 Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fed guys petitioning for signatures to add two ballots on upcoming election. 	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sougl H	nt Office held	
Date	Payee name		
06/21/2024	The Deuce P-2		
Amount (\$)	Payee address; City; State; Zip Cod	2	
\$701.00	1409 Lamar St		
Expenditure from corporate funds	Wichita Falls, TX 76301		
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b) Description	
OF EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Fed guys petitioning for signatures to add two ballots on upcoming election.	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sougl H	nt Office held	

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