#### FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00080704 3 COMMITTEE NAME **OFFICE USE ONLY** Mission Fire Fighters Committee for Responsible Gov Date Received **ELECTRONICALLY FILED** 07/15/2024 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** PO Box 1284 Date Hand-delivered or Date Postmarked Change of Address Mission, TX 78572 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Michael E. NAME NICKNAME LAST **SUFFIX** Silva STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 2118 E. 27th St. STREET **ADDRESS** (Residence or Business) Mission, TX 78574 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 2118 E. 27th St. MAILING **ADDRESS** Mission, TX 78574 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (956) 467-9465 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Х Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 01/01/2024 06/30/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special **GO TO PAGE 2**

## GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

# FORM **GPAC** COVER SHEET PG 2

			-		
2 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Mission Fire Fighters C	Committee for Responsi	ble Gov		00080704	4
4 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 Magauras	A. Supported			
	Measures     (Describe by date and location	A. Supported			
	of election and nature of issue.)				
		B. Opposed			
	Officeholders     Assisted				
	Assisted (Identify by name or, if applicable, classify by party.)				
L5 CONTRIBUTION			NTRIBUTIONS (OTHER THAN		
TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M			\$	0.00
			ner itemization threshold		
	2. TOTAL POLITICA			\$	12,140.00
	(OTHER THAN PLE	EDGES, LOANS, C	OR GUARANTEES OF LOANS)		12,140.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	D POLITICAL EXF	PENDITURES	\$	0.00
	4. TOTAL POLITICA	AL EXPENDITU	RES	\$	11,077.46
CONTRIBUTION BALANCE	5. TOTAL POLITICAL ( OF THE REPORTIN		MAINTAINED AS OF THE LAST	DAY \$	8,961.16
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL A LAST DAY OF THE		OUTSTANDING LOANS AS OF TRIOD	THE \$	0.00
L6 AFFIDAVIT	l				
O AFFIDAVII		true	wear, or affirm, under penalty of pe e and correct and includes all infor der Title 15, Election Code.		
				ael E. Silva	
			Signature of Ca	mpaign Treas	urer
AFFIX NOTARY	/ STAMP / SEAL ABOVE				
Sworn to and subscribed	d before me, by the said		, ti	his the	day
	, 20, to certify \				
Signature of officer ac	dministering oath	Printed name of o	officer administering oath	Title of off	icer administering oath

### **SUBTOTALS - GPAC**

# FORM GPAC COVER SHEET PG 3

3 of 28

			3 of 28			
	18 Filer ID	(Ethics Commis	ssion Filers)			
e Fighters Committee for Responsible Gov	00080704					
		SUBTOTA	AL AMOUNT			
SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	12,140.00			
SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00			
3. X SCHEDULE B: PLEDGED CONTRIBUTIONS						
	)R	\$				
	ATION OR	\$				
SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$				
		\$				
SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR	ORGANIZATION	\$				
SCHEDULE E: LOANS		\$	0.00			
SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	11,077.46			
SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00			
SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTI	ONS	\$	0.00			
SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00			
SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$				
	RETURNED	\$				
	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION  SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION  SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION  SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION  SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR OF SCHEDULE E: LOANS  SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION  SCHEDULE F2: UNPAID INCURRED OBLIGATIONS  SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION  SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD  SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	e Fighters Committee for Responsible GoV  SUBTOTALS CHEDULE  SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS  SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS  SCHEDULE B: PLEDGED CONTRIBUTIONS  SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION  SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION  SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION  SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION  SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION  SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION  SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS  SCHEDULE F2: UNPAID INCURRED OBLIGATIONS  SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS  SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD  SCHEDULE F4: EXPENDITURES FROM POLITICAL CONTRIBUTIONS  SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS  SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED	E FIGHTERS COMMITTEE FOR RESPONSIBLE GOV  SUBTOTALS CHEDULE  SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS  \$  SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS  \$  SCHEDULE B: PLEDGED CONTRIBUTIONS  \$  SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION  \$  SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION  \$  SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION  \$  SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION  \$  SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION  \$  SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION  \$  SCHEDULE E: LOANS  \$  SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS  \$  SCHEDULE F2: UNPAID INCURRED OBLIGATIONS  \$  SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS  \$  SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD  \$  SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD  \$  SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD  \$  SCHEDULE F5: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS  \$  SCHEDULE F5: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS RETURNED			

	MONEI	ARY POLITICAL CO	NIRIBUTIONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to	complete this form.	1	Total pages Schedule A1: Sch: 1/11 Rpt: 4/28	
2	FILER NAME	Eightors Committee for Dosponsil	olo Cov	3	Filer ID (Ethics Commission 00080704	n Filers)
_		Fighters Committee for Responsib		<u> </u>		
4	Date 06/30/2024	<ul><li>5 Full name of contributor</li></ul>	out of state ( NO ( Dir	_) <b>7</b>	Amount of Contribution (\$)	\$260.00
		Mission, TX 78572				
8	Principal occu Fire Fighter	pation / Job title (See Instructions)	9 Employer (See Instruct City Of Mission	ctions)		
	Date 06/30/2024	Full name of contributor	out-of-state PAC (ID#:		Amount of Contribution (\$)	\$260.00
		MIssion, TX 78572				
	Principal occu Fire Fighter	pation / Job title (See Instructions)	Employer (See Instruc City Of Mission	ctions)		
	Date 06/30/2024	Full name of contributor  Alvarez, Randy  Contributor address; City; State; 2	out-of-state PAC (ID#:		Amount of Contribution (\$)	\$260.00
		MIssion, TX 78572				
	Principal occu Fire Fighter	pation / Job title (See Instructions)	Employer (See Instruc City Of Mission	ctions)		
Date Full name of contributor out-of-state PAC (ID#: 06/30/2024 Bernal, Paul Contributor address; City; State; Zip Code  Mission, TX 78572			)	Amount of Contribution (\$)	\$325.00	
	Principal occu Fire Fighter	pation / Job title (See Instructions)	Employer (See Instruc City of Mission	ctions)		
	Date 06/30/2024	Cavazos, Frank  Contributor address; City; State; 2			Amount of Contribution (\$)	\$325.00
	Principal occu Fire Fighter	pation / Job title (See Instructions)	Employer (See Instruc	ctions)		
		Mission, TX 78572 pation / Job title (See Instructions)		ctions)		

	MONEI	ARY POLITICAL C	ONTRIBUTION	iS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 2/11 Rpt: 5/28	
2	FILER NAME Mission Fire	Fighters Committee for Respo	onsible Gov		3	Filer ID (Ethics Commission 00080704	n Filers)
4	Date 06/30/2024	Full name of contributor     Chaires, Frank     Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code		7	Amount of Contribution (\$)	\$325.00
	Deinainal assu	Mission , TX 78572	<u> </u>	Franksia (Can Instruction			
8	Fire Fighter	ıpation / Job title (See Instructions		Employer (See Instructions City Of Mission	5)		
	Date 06/30/2024	Full name of contributor Cruz, Randy Contributor address; City; St	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$25.00
	Principal occu	Mission, TX 78572  upation / Job title (See Instructions	)	Employer (See Instructions	 s)		
	Fire Fighter			City Of Mission			
	Date 06/30/2024	Full name of contributor  De La Garza, Manuel  Contributor address; City; St	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$130.00
		Mission, TX 78572					
	Principal occu Fire Fighter	ipation / Job title (See Instructions	)	Employer (See Instructions City of Mission	5)		
	Date 06/30/2024	Full name of contributor  De la Garza, Guillermo  Contributor address; City; St  Mission, TX 78572	out-of-state PAC (ID#:ate; Zip Code		•	Amount of Contribution (\$)	\$325.00
	Principal occu Fire Fighter	ipation / Job title (See Instructions	)	Employer (See Instructions City of Mission	5)		
	Date 06/30/2024	Full name of contributor Esquivel, Mauricio Contributor address; City; St Mission , TX 78572	out-of-state PAC (ID#:ate; Zip Code			Amount of Contribution (\$)	\$260.00
	Principal occu Fire Fighter	I pation / Job title (See Instructions	)	Employer (See Instructions City of Mission	5)		
			·				

	MONET	ARY POLITICAL CONTRIBUTI	ON	IS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 3/11 Rpt: 6/28	
2	FILER NAME Mission Fire	Fighters Committee for Responsible Gov			3	Filer ID (Ethics Commission 00080704	n Filers)
4	Date 06/30/2024	<ul> <li>Full name of contributor</li></ul>			7	Amount of Contribution (\$)	\$65.00
_	Delicalization	Mission , TX 78573	٦	Faralaga (Octobration			
8	Fire Fighter	pation / Job title (See Instructions)	9	Employer (See Instructions City Of Mission	5)		
	Date 06/30/2024	Full name of contributor out-of-state PAC (ID#Flores , Joey  Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$260.00
	Dringing age	Mission , TX 78573	_	Employer (See Instructions	<u></u>		
	Fire Fighter	pation / Job title (See Instructions)		Employer (See Instructions City Of Mission	5)		
	Date 06/30/2024	Full name of contributor out-of-state PAC (ID#Garcia, Frank  Contributor address; City; State; Zip Code	t:	)		Amount of Contribution (\$)	\$130.00
		Mission, TX 78572					
	Principal occu Fire Fighter	pation / Job title (See Instructions)		Employer (See Instructions City of Mission	s)		
	Date 06/30/2024	Full name of contributor out-of-state PAC (ID# Garcia , Juan Contributor address; City; State; Zip Code  Mission , TX 78572			•	Amount of Contribution (\$)	\$260.00
	Principal occu Fire Fighter	pation / Job title (See Instructions)		Employer (See Instructions City of Mission	<u>I</u> S)		
	Date 06/30/2024	Full name of contributor out-of-state PAC (ID# Garcia, Leroy Contributor address; City; State; Zip Code  Mission, TX 78572			•	Amount of Contribution (\$)	\$390.00
	Principal occu Fire Fighter	pation / Job title (See Instructions)		Employer (See Instructions City Of Mission	s)		

	MONEI	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 4/11 Rpt: 7/28	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
		Fighters Committee for Responsible Gov			00080704	
4	Date 06/30/2024	<ul> <li>Full name of contributor  uut-of-state PAC (ID#: Garcia, Pilar</li> <li>Contributor address; City; State; Zip Code</li> </ul>	)	7	Amount of Contribution (\$)	\$325.00
		Mission, TX 78572				
8	Principal occu Fire Fighter	pation / Job title (See Instructions)	9 Employer (See Instructions City Of Mission	5)		
	Date 06/30/2024	Full name of contributor  out-of-state PAC (ID#:_Garcia, Rudy  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$325.00
		Mission, TX 78572				
	Principal occu Fire Fighter	pation / Job title (See Instructions)	Employer (See Instructions City Of Mission	s)		
	Date 06/30/2024	Full name of contributor out-of-state PAC (ID#: Gloria, Alonzo Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$260.00
		Mission, TX 78572				
	Principal occu Fire Fighter	pation / Job title (See Instructions)	Employer (See Instructions City of Mission	5)		
	Date Full name of contributor out-of-state PAC (ID#:)  Gonzalez, Alex  Contributor address; City; State; Zip Code  Mission, TX 78572			Amount of Contribution (\$)	\$65.00	
	Principal occu Fire Fighter	pation / Job title (See Instructions)	Employer (See Instructions City of Mission	5)		
	Date 06/30/2024	Full name of contributor out-of-state PAC (ID#:_Granados, Alex  Contributor address; City; State; Zip Code  Mission , TX 78572			Amount of Contribution (\$)	\$130.00
	Principal occu Fire Fighter	pation / Job title (See Instructions)	Employer (See Instructions City of Mission	5)		

	MONEI	ARY POLITICAL CONT	RIBUTION	S		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to com	plete this form	n.	1	Total pages Schedule A1: Sch: 5/11 Rpt: 8/28	
2	FILER NAME Mission Fire	Fighters Committee for Responsible G	iov		3	Filer ID (Ethics Commission 00080704	n Filers)
4	Date 06/30/2024	Guerra, Frank	state PAC (ID#: ode	)	7	Amount of Contribution (\$)	\$65.00
8	Principal occu Fire Fighter	Mission, TX 78572 pation / Job title (See Instructions)	9	Employer (See Instructions City of Mission	)		
	Date 06/30/2024	Juarez, Beto  Contributor address; City; State; Zip C	state PAC (ID#:	)		Amount of Contribution (\$)	\$325.00
	Principal occu Fire Fighter	Mission, TX 78572 pation / Job title (See Instructions)		Employer (See Instructions City Of Mission	)		
	Date 06/30/2024	Full name of contributor out-of- Lavoie, Evan  Contributor address; City; State; Zip C	state PAC (ID#:			Amount of Contribution (\$)	\$260.00
	Deinsinal assu	Mission , TX 78572		Franks von (Cook kantus stiere			
	Fire Fighter	pation / Job title (See Instructions)		Employer (See Instructions City of Mission	)		
Date 06/30/2024  Full name of contributor out-of-state PAC (ID#: Leal, Roy  Contributor address; City; State; Zip Code  Mission, TX 78573				Amount of Contribution (\$)	\$130.00		
	Principal occu Fire Fighter	pation / Job title (See Instructions)		Employer (See Instructions City of Mission	)		
	Date 06/30/2024	Full name of contributor out-of- Lerma, Andres  Contributor address; City; State; Zip C	state PAC (ID#:	)		Amount of Contribution (\$)	\$65.00
	Principal occu Fire Fighter	pation / Job title (See Instructions)		Employer (See Instructions City Of Mission	)		
				<del></del>			

	MONEI	ARY POLITICAL (	CONTRIBUTION	NS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains hov	v to complete this fo	rm.	1	Total pages Schedule A1: Sch: 6/11 Rpt: 9/28	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
		Fighters Committee for Resp			L	00080704	
4 Date 06/30/2024		<ul><li>5 Full name of contributor</li><li>Longoria, Justin</li><li>6 Contributor address; City; S</li></ul>	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	\$130.00
		Mission, TX 78572					
8	Principal occu Fire Fighter	pation / Job title (See Instruction	s) 9	Employer (See Instructions City Of Mission	5)		
	Date 06/30/2024	Full name of contributor Lopez, Danny Contributor address; City; S	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$260.00
		Mission, TX 78572					
	Principal occu Fire Fighter	pation / Job title (See Instruction	s)	Employer (See Instructions City of Mission	s)		
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Т	Amount of Contribution (\$)	
	06/30/2024	Lopez, Eric	Unit-of-state PAC (ID#	<b></b>		Amount of Continuation (4)	\$390.00
		Contributor address; City; S	tate; Zip Code		-		
		Mission, TX 78572					
	Principal occu Fire Fighter	pation / Job title (See Instruction	s)	Employer (See Instructions City of Mission	5)		
06/30/2024		Full name of contributor Lopez, Robert  Contributor address; City; S  Mission, TX 78572	out-of-state PAC (ID#: tate; Zip Code			Amount of Contribution (\$)	\$325.00
	Principal occu Fire Fighter	pation / Job title (See Instruction	s)	Employer (See Instructions City of Mission	<u> </u> S)		
	Date 06/30/2024	Full name of contributor Loredo, Jessica	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$130.00
		Contributor address; City; S  Mission, TX 78572	tate; Zip Code		•		
	Principal occu Fire Fighter	pation / Job title (See Instruction	s)	Employer (See Instructions City of Mission	S)		

	MONET	ARY POLITICAL CO	NTRIBUTION	S		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to	complete this forn	n.	1	Total pages Schedule A1: Sch: 7/11 Rpt: 10/28	
2	FILER NAME Mission Fire	Fighters Committee for Responsi	ble Gov		3	Filer ID (Ethics Commission 00080704	n Filers)
4	Date 06/30/2024	Loza, Joey	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	\$260.00
_		Mission, TX 78572					
8	Fire Fighter	pation / Job title (See Instructions)		Employer (See Instructions City Of Mission	)		
	Date 06/30/2024	Full name of contributor Montalvo , Alex  Contributor address; City; State;	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$65.00
	Principal occur	Mission , TX 78572 pation / Job title (See Instructions)		Employer (See Instructions			
	Fire Fighter	pation / Job title (See Instructions)		City of Mission	)		
	Date 06/30/2024	Full name of contributor Montoya, Robert  Contributor address; City; State;	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$260.00
		Mission, TX 78572					
	Principal occu Fire Fighter	pation / Job title (See Instructions)		Employer (See Instructions City of Mission	)		
Date Full name of contributor out-of-state PAC (ID#:				Amount of Contribution (\$)	\$130.00		
	Principal occu Fire Fighter	pation / Job title (See Instructions)		Employer (See Instructions City Of Mission	)		
	Date 06/30/2024	Full name of contributor  Navarrete, Chris  Contributor address; City; State;  Mission, TX 78572	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$325.00
	Principal occu Fire Fighter	pation / Job title (See Instructions)		Employer (See Instructions City Of Mission	)		
			·				

	MONEI	ARY POLITICAL (	CONTRIBUTIO	NS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains hov	v to complete this fo	rm.	1	Total pages Schedule A1: Sch: 8/11 Rpt: 11/28	
2	FILER NAME Mission Fire	Fighters Committee for Resp	onsible Gov		3	Filer ID (Ethics Commission 00080704	n Filers)
4	Date 06/30/2024	<ul><li>5 Full name of contributor Oliva, Rudy</li><li>6 Contributor address; City; S</li></ul>	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$325.00
8	Principal occu Fire Fighter	MIssion, TX 78573 pation / Job title (See Instruction	s) <u> </u>	9 Employer (See Instructions City Of Mission	5)		
	Date 06/30/2024	Full name of contributor Olivarez, Desi Contributor address; City; S	out-of-state PAC (ID#: tate; Zip Code	)		Amount of Contribution (\$)	\$65.00
	Principal occu Fire Fighter	Mission, TX 78572 pation / Job title (See Instruction:	s)	Employer (See Instructions City of Mission	<u> </u> S)		
	Date 06/30/2024	Full name of contributor Osornio, Blas Contributor address; City; S	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$65.00
		Mission , TX 78572					
	Principal occu Fire Fighter	pation / Job title (See Instruction	s)	Employer (See Instructions City of Mission	s)		
06/30/2024 Rai		Full name of contributor Ramirez, Joey Contributor address; City; S	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$260.00
	Principal occu Fire Fighter	Mission , TX 78572 pation / Job title (See Instruction:	5)	Employer (See Instructions City of Mission	<u> </u> s)		
	Date 06/30/2024	Full name of contributor Reyes, Mark Contributor address; City; S Mission, TX 78572	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$325.00
	Principal occu Fire Fighter	pation / Job title (See Instruction:	s)	Employer (See Instructions City Of Mission	5)		

	MONEI	ARY POLITICAL (	CONTRIBUTION	NS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains hov	v to complete this fo	rm.	1	Total pages Schedule A1: Sch: 9/11 Rpt: 12/28	
2	FILER NAME Mission Fire	Fighters Committee for Resp	onsible Gov		3	Filer ID (Ethics Commission 00080704	n Filers)
4	Date 06/30/2024	<ul><li>5 Full name of contributor Reyna , Carlissa</li><li>6 Contributor address; City; S</li></ul>	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	\$260.00
8	Principal occu Fire Fighter	Mission , TX 78572 pation / Job title (See Instruction:	5) 9	Employer (See Instructions City of Mission	5)		
	Date 06/30/2024	Full name of contributor Rodriguez, Esquiel  Contributor address; City; S	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$65.00
	Principal occu Fire Fighter	Mission, TX 78572 pation / Job title (See Instructions	5)	Employer (See Instructions City of Mission	<u> </u> S)		
	Date 06/30/2024	Full name of contributor Rosales , Mauricio Contributor address; City; S	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$260.00
	Deinsinal assu	Mission, TX 78572	<u> </u>	Franks var (Caa kastuvationa	<u></u>		
	Fire Fighter	pation / Job title (See Instructions	5)	Employer (See Instructions City of Mission	>)		
Date Full name of contributor out-of-state PAC (ID#: 06/30/2024 Saenz, Joel  Contributor address; City; State; Zip Code  Mission , TX 78572			•	Amount of Contribution (\$)	\$325.00		
	Principal occu Fire Fighter	pation / Job title (See Instructions	5)	Employer (See Instructions City Of Mission	<u>I</u> S)		
	Date 06/30/2024	Full name of contributor Salinas, Homer Contributor address; City; S Mission, TX 78572	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$130.00
	Principal occu Fire Fighter	pation / Job title (See Instructions	5)	Employer (See Instructions City of Mission	5)		

	MONEI	ARY POLITICAL (	CONTRIBUTION	NS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 10/11 Rpt: 13/28	
2	FILER NAME	Fighters Committee for Resp	onsible Gov		3	Filer ID (Ethics Commission 00080704	n Filers)
_		5 Full name of contributor			<del> </del>		
4	Date 06/30/2024	Salinas, Jorge  Contributor address; City; S	out-of-state PAC (ID#:	)	' 	Amount of Contribution (\$)	\$65.00
		Mission, TX 78572					
8		pation / Job title (See Instructions	s) 9	Employer (See Instructions	5)		
	Fire Fighter			City of Mission			
	Date 06/30/2024	Full name of contributor Salinas, Omar Contributor address; City; S	out-of-state PAC (ID#:tate; Zip Code	)	•	Amount of Contribution (\$)	\$25.00
		Mission, TX 78572					
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	s)		
	Fire Fighter			City of Mission			
	Date Full name of contributor out-of-state PAC (ID#:		)		Amount of Contribution (\$)	\$325.00	
		Mission, TX 78572					
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	s)		
	Fire Fighter			City of MIssion			
Date Full name of contributor out-of-state PAC (ID#:_ 06/30/2024 Silva, Michael Contributor address; City; State; Zip Code				•	Amount of Contribution (\$)	\$325.00	
	Principal occu Fire Fighter	Mission, TX 78572-3612 pation / Job title (See Instructions	5)	Employer (See Instructions City of MIssion	<u>I</u> S)		
	Date 06/30/2024	Full name of contributor out-of-state PAC (ID#:)  Torres, Rick  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$130.00	
		Mission, TX 78572					
	Principal occu Fire Fighter	pation / Job title (See Instructions	5)	Employer (See Instructions City of Mission	5)		

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A		
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 11/11 Rpt: 14/28			
2	FILER NAME Mission Fire	Fighters Committee for Responsible Gov			3	Filer ID (Ethics Commission 00080704	n Filers)	
4	Date 06/30/2024  5 Full name of contributor out-of-state PAC (ID#:) Trevino , Tony  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$325.00			
_	Dringing Lagran	Mission , TX 78572	lo lo	Francis or (Con Instructions	<u></u>			
8	Fire Fighter	pation / Job title (See Instructions)	9	Employer (See Instructions City Of Mission	·)			
	Date 06/30/2024	Villalon, Robert	PAC (ID#:			Amount of Contribution (\$)	\$260.00	
	Dringing! goog	Mission, TX 78572		Employer (Con Instructions	<u>,                                     </u>			
	Fire Fighter	pation / Job title (See Instructions)		Employer (See Instructions City Of Mission	·)			
Date Full name of contributor out-of-state PAC (ID#:		)		Amount of Contribution (\$)	\$130.00			
		Mission, TX 78572						
	Principal occu Fire Fighter	pation / Job title (See Instructions)		Employer (See Instructions City of MIssion	5)			
	Date 06/30/2024	Villarreal, Juan	PAC (ID#:			Amount of Contribution (\$)	\$325.00	
	Principal occu Fire Fighter	pation / Job title (See Instructions)		Employer (See Instructions City Of Mission	5)			
	Date Full name of contributor out-of-state PAC (ID#:) 06/30/2024 Williams, Douglas Contributor address; City; State; Zip Code  Mission, TX 78572			Amount of Contribution (\$)	\$325.00			
	Principal occu Fire Fighter	pation / Job title (See Instructions)		Employer (See Instructions City of Mission	5)			
			<b>'</b>					

PLE	OGED CONTRIBU	TIONS			SCHED	ULE B
The Instruction Guide explains how to complete this form.				1	Total pages Schedule B: Sch: 1/1 Rpt: 15/28	
2 FILER NA		2		3	B Filer ID (Ethics Commission Filers)	
Δ	Fire Fighters Committee for F				00080704	
TOTAL	OF UNITEMIZED PLEDG	SES			\$	0.00
<b>5</b> Date	6 Full name of pledgor	out-of-state PAC (II	D#:	_) 8	Amount of pledge (\$) 9 In-kind descri	ption le)
	7 Pledgor Address;	City; State; Zip Co	de			
			T		Check if travel outside of Texas. Comple	ete Schedule T
<b>10</b> Principal	occupation / Job title (See Instru	ctions)	11 Employer (See In	struction	ons)	

	LOANS					SCHEDU	LE <b>E</b>
	The Instruction	on Guide explains how	to complete this f	orm.	1	ages Schedule E: /1 Rpt: 16/28	
	FILER NAME Mission Fire Figl	hters Committee for Respor	nsible Gov		3 Filer ID 00080	(Ethics Commission 704	Filers)
4	TOTAL OF UN	IITEMIZED LOANS			•	\$	0.00
5	Date of loan	7 Name of lender	out-of-state PA	C (ID#:		9 Loan Amount (\$)	
	Is lender a financial institution?	8 Lender address; Ci	ty; State;	Zip Code		10 Interest Rate	
						11 Maturity Date	
12	Principal occupation	on / Job title (See Instructions)		13 Employer (See Instruction	s)	•	
14	Description of Coll  None	ateral		15 Check if personal funds w	ere deposite	d into political account (See Instructions)	
	GUARANTOR INFORMATION	17 Name of guarantor				19 Amount Guarante	eed (\$)
	not applicable	<b>18</b> Guarantor address; Ci	ty; State;	Zip Code			
20	Principal occupation	on		21 Employer (See Instruction	s)	. <b>L</b>	

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 1/12 Rpt: 17/28	Mission Fire Fighters Committee for Responsible Gov 00080704
4 Date	5 Payee name
01/02/2024	7-11
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$72.03	2401 E GRIFFIN PKWY
- Evpanditura from	
Expenditure from corporate funds	MISSION , TX 78572
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Travel to Brownsville to meet with reps Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Fuel expense
	, do. o.poneo
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
02/12/2024	7-11
Amount (\$)	Payee address; City; State; Zip Code
\$85.75	2401 E GRIFFIN PKWY
φου.70	2401 L GRIFFIN FRWT
Expenditure from corporate funds	MISSION , TX 78572
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	travel back from Legislative conference
LXI LINDITORE	Check if Austin, TX, officeholder living expense
	Fuel
One of the ONE Wife diagram	On didn't lot for a bald on a superior of the same of
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/12/2024	Blacks BBQ
Amount (\$)	Payee address; City; State; Zip Code
\$88.01	936 TX-337
Expenditure from	
corporate funds	New Braunfels, TX 78130
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  Lunch Legislative Confernce
	Euron Edgislative Comernee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

imbursement Solicitation/Fundraising Expense
ntal Expense Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 2/12 Rpt: 18/28	Mission Fire Fighters Committee for Responsible Gov 00080704
4 Date	5 Payee name
03/11/2024	Buffalo Wings & rings
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$80.04	907 S Shary rd
Expenditure from	
corporate funds	Mission, TX 78574
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  Lunch with Mission Fire fighters
	Edition With Wilssion File lighters
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
02/20/2024	Chic Fil A
Amount (\$)	Payee address; City; State; Zip Code
\$213.75	2501 E Expressway
Expenditure from corporate funds	Mission, TX 78574
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Dinner for Union Meeting
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	<del>1</del>
Date	Payee name
02/09/2024	Courtyard Marriott
Amount (\$)	Payee address; City; State; Zip Code
\$712.35	750 I 35 N Frontage Rd
Expenditure from corporate funds	New Branfels , TX 78130
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Lodging for Legislative conference
	Loughly for Legislative contenence
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comm Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	l Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1: Sch: 3/12 Rpt: 19/28	2 FILER NAME3 Filer ID(Ethics Commission Filers)Mission Fire Fighters Committee for Responsible Gov00080704
4 Date	5 Payee name
06/12/2024	Delta Air
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$396.95	1030 Delta
Expenditure from	
corporate funds	Atlanta , GA 30354
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Transportation Equipment And Related
EXPENDITURE	Expense
	Air Travel to TSAFF board meeting
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1
Date	Payee name
01/12/2024	Exclusive Designs
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	2403 E Griffin Pkwy
\$1,000.00	2403 E Gillilli Pkwy
Expenditure from	
corporate funds	Mission, TX 78574
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Gift/Awards/Memorials Expense
_/	Check if Austin, TX, officeholder living expense
	PAC gifts
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialitate to benefit 6/01	'
Date	Payee name
04/11/2024	Floyds
Amount (\$)	Payee address; City; State; Zip Code
\$248.59	2290 I-10
Expenditure from	Beaumont , TX 77707
corporate funds	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Food/Beverage Expense
EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Lunch while at TSAFF political training
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	<b>y</b>

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Co Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	d Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
·	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 4/12 Rpt: 20/28	Mission Fire Fighters Committee for Responsible Gov 00080704
4 Date	5 Payee name
05/03/2024	Gamez , Erin (Rep.)
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$500.00	777 E Harrison
Expenditure from corporate funds	Brownsville , TX 78520
8 PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule)  Contributions/Donations Made By  (b) Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Check if Austin, TX, officeholder living expense
	Contribution
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/Ol	
Date	Payee name
03/07/2024	Gerlach , Marissa (Commissioner)
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	1207 Encanto Blvd
Expenditure from corporate funds	Mission, TX 78574
PURPOSE	
OF OF	(a) Category (See Categories listed at the top of this schedule)  Contributions/Donations Made By  Contributions/Donations Made By
EXPENDITURE	Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Candidate/Officeholder   Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Skeet Shoot fundraiser event
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
Data	
Date	Payee name
05/06/2024	Hayashi Hibachi
Amount (\$)	Payee address; City; State; Zip Code
\$250.37	5600 N. 10th
— Foresanditure Cons	
Expenditure from corporate funds	Mcallen , TX 78501
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Food/Beverage Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Lunch with Mission fire fighters
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	H

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political C

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing 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: 5/12 Rpt: 21/28	2 FILER NAME Mission Fire Fighters Committee for Responsible Gov  3 Filer ID (Ethics Commission Filers) 00080704
4 Date	5 Payee name
04/15/2024	J Wilsons
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$73.41	4190 Gladys Ave
- "	
Expenditure from corporate funds	beaumont , TX 77707
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Food/Beverage Expense
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Dinner TSAFF political training
9 Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
01/17/2024	Kumori Sushi
Amount (\$)	Payee address; City; State; Zip Code
\$73.78	3300 W Express
Ψ10.110	COOC VV EXPICES
Expenditure from corporate funds	Mcallen , TX 78501
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
	Lunch Meeting with Mission Fire fighters
2 1 2 2 1 1 2 1 1	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/08/2024	La Cosecha
Amount (\$)	Payee address; City; State; Zip Code
\$91.54	505n Business IH 35
Expenditure from corporate funds	New Branfels, TX 78130
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Lunch with mission Fire fighters/ Legislative
	conference
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
4 Tatal manua Calcadula E4.	,
1 Total pages Schedule F1: Sch: 6/12 Rpt: 22/28	2 FILER NAME  Mission Fire Fighters Committee for Responsible Gov  3 Filer ID (Ethics Commission Filers) 00080704
4 Date	5 Payee name
04/24/2024	La Costa Grill
6 Amount (\$) \$195.21	7 Payee address; City; State; Zip Code 3300 Expressway 83
Expenditure from corporate funds	McAllen , TX 78501
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Food/Beverage Expense
	Check if Austin, TX, officeholder living expense
	Lunch with TSAFF A Alvarado, Mission Firefighters, DSFR Leo Mendoza, and State rep Longoria and
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
01/22/2024	La Fogata
Amount (\$)	Payee address; City; State; Zip Code
\$231.60	300 N Shary
Expenditure from corporate funds	Mission , TX 78574
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
	Lunch with State Rep Longoria and Staff
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
04/04/2024	La Fogata
Amount (\$)	Payee address; City; State; Zip Code
\$212.00	300 N Shary
Expenditure from corporate funds	Mission , TX 78574
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Food/Beverage Expense
	Check if Austin, TX, officeholder living expense
	Lunch with Rep. Longoria staff
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officenolder/Politica	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 7/12 Rpt: 23/28	Mission Fire Fighters Committee for Responsible Gov 00080704
4 Date	5 Payee name
05/08/2024	LaMantia , Morgan (Sen.)
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,500.00	1324 E Madison
— Forestitus from	
Expenditure from corporate funds	Brownsville , TX 78520
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By  Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	Contribution fundation gon tournament
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
D-1-	
Date	Payee name
05/13/2024	LaMantia , Morgan (Sen.)
Amount (\$)	Payee address; City; State; Zip Code
\$100.00	1324 E Madison
Expenditure from	
corporate funds	Brownsville, TX 78520
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
LA LIBITOR	Colf Tournament expanse
	Golf Tournament expense
2 1: 2111 1/1/11	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
03/26/2024	Mr. Stich
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	3403 N Ware Rd
Expenditure from corporate funds	Mcallen , TX 78501
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Gift/Awards/Memorials Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Embroidery
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 8/12 Rpt: 24/28	Mission Fire Fighters Committee for Responsible Gov 00080704
4 Date	5 Payee name
02/07/2024	Myrons Steakhouse
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$243.13	136 castell
Expenditure from corporate funds	New Branfels , TX 78130
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Food/Beverage Expense
LA LIBITORE	Check if Austin, TX, officeholder living expense
	Dinner Legislative conference
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Dougo name
	Payee name
04/02/2024	Office Depot
Amount (\$)	Payee address; City; State; Zip Code
\$80.19	2509 E Expressway
Expenditure from corporate funds	Mission , TX 78572
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Copies and office ink
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Dete	
Date	Payee name
03/01/2024	PF Changs
Amount (\$)	Payee address; City; State; Zip Code
\$199.42	3100 Expressway 83
Expenditure from corporate funds	Mcallen , TX 78503
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
	Lunch with State Rep. Longoria and staff
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Com

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officenolder/Political	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 9/12 Rpt: 25/28	Mission Fire Fighters Committee for Responsible Gov 00080704
4 Date	5 Payee name
01/02/2024	PNC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$12.50	2402 E Griffin pkwy
Expenditure from corporate funds	Mission, TX 78574
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Statement Fee
	Statement 7 cc
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Data	Programme
Date	Payee name
06/03/2024	PNC
Amount (\$)	Payee address; City; State; Zip Code
\$14.50	2402 E Griffin pkwy
Expenditure from	
corporate funds	Mission, TX 78574
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Statement fee
	Statement lee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
04/16/2024	Palenque Grill
Amount (\$)	Payee address; City; State; Zip Code
\$104.40	606 E expressway 83
Evpanditure from	
Expenditure from corporate funds	Mcallen, TX 78572
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Food/Beverage Expense
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Lunch with TSAFF DVP Alvarado and Mission fire fighters
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiente to benefit 6/01	<u>'</u>

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Comn

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing 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: 10/12 Rpt: 26/28	Mission Fire Fighters Committee for Responsible Gov  00080704
4 Date	5 Payee name
02/05/2024	Pilot
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$58.25	1045 S US 83
Expenditure from corporate funds	Falfurias , TX 78355
8 PURPOSE	1
OF	(a) Category (See Categories listed at the top of this schedule)  Travel to new Braunfels for Legislative  (b) Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	conference Check if Austin, TX, officeholder living expense
	Fuel
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/07/2024	QT
Amount (\$)	Payee address; City; State; Zip Code
\$69.47	4142 S Loop 1604 E, San Antonio,
\$09.47	4142 3 L00p 1004 E, 3an Antonio,
Expenditure from corporate funds	San Antonio, TX 78264
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	travel for legislative conference Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Fuel
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/06/2024	Rudys
Amount (\$)	Payee address; City; State; Zip Code
\$55.73	15560 Interstate 35
Ψ33.13	13300 interstate 33
Expenditure from corporate funds	Selma, TX 78154
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Food/Beverage Expense
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Lunch during legislative conference
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Com

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
Sch: 11/12 Rpt: 27/28	Mission Fire Fighters Committee for Responsible Gov 00080704	
4 Date	5 Payee name	
05/17/2024	Stripes	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$74.00	2401 E Griffin Pkwy	
- Evpanditura from		
Expenditure from corporate funds	Mission, TX 78572	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense  fuel	
	iuci	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI		
Date	Payee name	
05/02/2024	Sunoco	
Amount (\$)	Payee address; City; State; Zip Code	
\$103.44	1180 E Alton Glor	
Expenditure from		
corporate funds	Brownsville , TX 78539	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Travel to Brownsville to meet with reps  Check if travel outside of Texas. Complete Schedule T.  Check if Austin TX officeholder living expenses.	
	Check if Austin, TX, officeholder living expense  Fuel	
	1 461	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI		
Date	Davisa nama	
03/20/2024	Payee name Tropical Smoothie	
	<u> </u>	
Amount (\$)	Payee address; City; State; Zip Code	
\$24.60	801 N Shary Rd	
Expenditure from		
corporate funds	Mission, TX 78572	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense  Lunch	
	Lundii	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI		

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
Sch: 12/12 Rpt: 28/28	Mission Fire Fighters Committee for Responsible Gov 00080704	
4 Date	5 Payee name	
05/02/2024	Tropical Smoothie	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$26.09	801 N Shary Rd	
Expenditure from corporate funds	Mission , TX 78572	
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  Lunch	
	Lunon	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·	
Date	Payee name	
04/12/2024	Twin Peaks	
Amount (\$)	Payee address; City; State; Zip Code	
\$175.00	3805 I-10 S	
— Foresaditus from		
Expenditure from corporate funds	Beaumont , TX 77707	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Food/Beverage Expense	
EXPENDITORE	Check if Austin, TX, officeholder living expense	
	Lunch TSAFF Political training	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
experience to benefit even		
Date	Payee name	
04/17/2024	Twin Peaks	
Amount (\$)	Payee address; City; State; Zip Code	
\$211.36	901 Interstate Hwy 2	
Expenditure from corporate funds	Mcallen, TX 78501	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF	Food/Beverage Expense	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	Lunch with TSAFF DVP & DSFR	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
experientare to benefit 6/011		