

CORRECTION/AMENDMENT AFFIDAVIT FOR POLITICAL COMMITTEE

FORM COR-PAC

1 Filer ID (Ethics Commission Filers) 00058251	2 Total pages filed: 30	OFFICE USE ONLY	
3 COMMITTEE NAME Galveston Firefighters Local 571	Date Received ELECTRONICALLY FILED 07/24/2024		
4 TREASURER NAME Duepner Jr., Gregory D. (Mr.)	Date Hand-delivered or Date Postmarked		
5 ORIGINAL REPORT TYPE	<input checked="" type="checkbox"/> January 15	<input type="checkbox"/> Runoff	Receipt #
	<input type="checkbox"/> July 15	<input checked="" type="checkbox"/> 10th day after campaign treasurer resignation	
	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Dissolution report	Date Processed
	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Other (specify) _____	Date Imaged
6 ORIGINAL PERIOD COVERED	Month Day Year 07/01/2023	THROUGH	Month Day Year 12/31/2023

7 EXPLANATION OF CORRECTION
there are no errors. I clicked wrong button when trying to view the report

8 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check the box next to any and all applicable statements:

Semiannual reports: I swear or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

John Garcia

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

**Remember To Attach Any Part Of The Campaign Finance Report Form
Needed To Report And Explain Corrections**

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC
COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00058251	2 Total pages filed: 30
3 COMMITTEE NAME Galveston Firefighters Local 571		OFFICE USE ONLY	
		Date Received ELECTRONICALLY FILED 07/24/2024	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address		ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 8220 Schiro Rd. Hitchcock, TX 77563	
		Date Hand-delivered or Date Postmarked	
		Receipt #	Amount
		Date Processed	
		Date Imaged	
5 CAMPAIGN TREASURER NAME		MS / MRS / MR FIRST MI Mr. Gregory D.	
		NICKNAME LAST SUFFIX Duepner Jr.	
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)		STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 8220 Schiro Rd Hitchcock, TX 77563	
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address		STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 8220 Schiro Rd Hitchcock, TX 77563	
8 CAMPAIGN TREASURER PHONE		AREA CODE PHONE NUMBER EXTENSION (409) 750-1034	
9 REPORT TYPE		<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input checked="" type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff	
10 PERIOD COVERED		Month Day Year Month Day Year 07/01/2023 THROUGH 12/31/2023	
11 ELECTION		ELECTION DATE ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special	

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GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Galveston Firefighters Local 571	13 Filer ID (Ethics Commission Filers) 00058251
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	
		B. Opposed	
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported	
		B. Opposed	
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	Rep. Dade Phelan State Representative	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	15,928.77
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	2,500.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

16 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Mr. Gregory D. Duepner Jr.

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

SUBTOTALS - GPAC

17 COMMITTEE NAME The Galveston Firefighters Association		18 Filer ID 00058251	(Ethics Commission Filers)
19 SCHEDULE SUBTOTALS			SUBTOTAL AMOUNT
	NAME OF SCHEDULE		
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	15,928.77
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	0.00
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	0.00
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$	
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$	
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$	
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$	
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$	
9.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$	0.00
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	2,500.00
11.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	0.00
12.	<input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	0.00
13.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	0.00
14.	<input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	6,765.16
15.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	12.48

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/18 Rpt: 5/30
2 FILER NAME The Galveston Firefighters Association		3 Filer ID (Ethics Commission Filers) 00058251
4 Date 12/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Addison, Cody (Mr.)	7 Amount of Contribution (\$) \$119.99
	6 Contributor address; City; State; Zip Code Galveston, TX 77550	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) city of galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Chris (Mr.)	Amount of Contribution (\$) \$239.98
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Michael (Mr.)	Amount of Contribution (\$) \$180.05
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Austin, James (Mr.)	Amount of Contribution (\$) \$239.98
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beall, Steven (Mr.)	Amount of Contribution (\$) \$239.98
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/18 Rpt: 6/30
2 FILER NAME The Galveston Firefighters Association		3 Filer ID (Ethics Commission Filers) 00058251
4 Date 12/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Billiott, Jeffery (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Galveston, TX 77550	7 Amount of Contribution (\$) \$239.98
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowen, Anderson (Mr.) <hr/> Contributor address; City; State; Zip Code Galveston, TX 77550	Amount of Contribution (\$) \$239.98
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brinkley, Austin (Mr.) <hr/> Contributor address; City; State; Zip Code Galveston, TX 77550	Amount of Contribution (\$) \$239.98
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burnett, Dustin (Mr.) <hr/> Contributor address; City; State; Zip Code Galveston, TX 77550	Amount of Contribution (\$) \$119.99
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cagle, Collin (Mr.) <hr/> Contributor address; City; State; Zip Code Galveston, TX 77550	Amount of Contribution (\$) \$30.03
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/18 Rpt: 7/30
2 FILER NAME The Galveston Firefighters Association		3 Filer ID (Ethics Commission Filers) 00058251
4 Date 12/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cangelosi, David (Mr.)	7 Amount of Contribution (\$) \$59.93
	6 Contributor address; City; State; Zip Code Galveston, TX 77550	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlson, John (Mr.)	Amount of Contribution (\$) \$239.98
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chappell, Travis (Mr.)	Amount of Contribution (\$) \$239.98
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Jonathan (Mr.)	Amount of Contribution (\$) \$239.98
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diaz Jr., Rogelio (Mr.)	Amount of Contribution (\$) \$239.98
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) city of galveston

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/18 Rpt: 8/30
2 FILER NAME The Galveston Firefighters Association		3 Filer ID (Ethics Commission Filers) 00058251
4 Date 12/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dieringer III, John (Mr.)	7 Amount of Contribution (\$) \$239.98
	6 Contributor address; City; State; Zip Code Galveston, TX 77550	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dixon, Jeremy (Mr.)	Amount of Contribution (\$) \$239.98
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dobson, Donald (Mr.)	Amount of Contribution (\$) \$30.03
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duepner Jr., Gregory (Mr.)	Amount of Contribution (\$) \$119.99
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) city of galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunkerley, Ryan (Mr.)	Amount of Contribution (\$) \$239.98
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/18 Rpt: 9/30
2 FILER NAME The Galveston Firefighters Association		3 Filer ID (Ethics Commission Filers) 00058251
4 Date 12/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elia, Christopher (Mr.)	7 Amount of Contribution (\$) \$119.99
	6 Contributor address; City; State; Zip Code Galveston, TX 77550	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Matthew (Mr.)	Amount of Contribution (\$) \$119.99
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eureste, Joe (Mr.)	Amount of Contribution (\$) \$239.98
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) city of galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farrington, John (Mr.)	Amount of Contribution (\$) \$239.98
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flanagan, Mark (Mr.)	Amount of Contribution (\$) \$239.98
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/18 Rpt: 10/30
2 FILER NAME The Galveston Firefighters Association		3 Filer ID (Ethics Commission Filers) 00058251
4 Date 12/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freeman, Jerimiah (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Galveston, TX 77550	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, John (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gearke, Edwin (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, Corey (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hauert, Jared (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/18 Rpt: 11/30
2 FILER NAME The Galveston Firefighters Association		3 Filer ID (Ethics Commission Filers) 00058251
4 Date 12/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Travis (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Galveston, TX 77550	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoff, Thomas (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hooper, Robert (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hooter, Justin (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hubbell, Carl (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/18 Rpt: 12/30
2 FILER NAME The Galveston Firefighters Association		3 Filer ID (Ethics Commission Filers) 00058251
4 Date 12/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunt, Jarod (Mr.)	7 Amount of Contribution (\$) \$119.99
6 Contributor address; City; State; Zip Code Galveston, TX 77550		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) city of galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hutson, Jarod (Mr.)	Amount of Contribution (\$) \$30.03
Contributor address; City; State; Zip Code Galveston, TX 77550		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Stewart (Mr.)	Amount of Contribution (\$) \$119.99
Contributor address; City; State; Zip Code Galveston, TX 77550		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jensen Jr., Jens (Mr.)	Amount of Contribution (\$) \$239.98
Contributor address; City; State; Zip Code Galveston, TX 77550		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) city of galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Kevin (Mr.)	Amount of Contribution (\$) \$119.99
Contributor address; City; State; Zip Code Galveston, TX 77550		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/18 Rpt: 13/30
2 FILER NAME The Galveston Firefighters Association		3 Filer ID (Ethics Commission Filers) 00058251
4 Date 12/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Timothy (Mr.)	7 Amount of Contribution (\$) \$239.98
6 Contributor address; City; State; Zip Code Galveston, TX 77550		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Dustin (Mr.)	Amount of Contribution (\$) \$239.98
Contributor address; City; State; Zip Code Galveston, TX 77550		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Steven (Mr.)	Amount of Contribution (\$) \$239.98
Contributor address; City; State; Zip Code Galveston, TX 77550		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenny, Shea (Mr.)	Amount of Contribution (\$) \$119.99
Contributor address; City; State; Zip Code Galveston, TX 77550		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kothmann, James (Mr.)	Amount of Contribution (\$) \$59.93
Contributor address; City; State; Zip Code Galveston, TX 77550		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/18 Rpt: 14/30
2 FILER NAME The Galveston Firefighters Association		3 Filer ID (Ethics Commission Filers) 00058251
4 Date 12/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LeMoine, Jason (Mr.)	7 Amount of Contribution (\$) \$239.98
	6 Contributor address; City; State; Zip Code Galveston, TX 77550	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Bryan (Mr.)	Amount of Contribution (\$) \$239.98
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lescombes, Christopher (Mr.)	Amount of Contribution (\$) \$180.05
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Livingston, Chris (Mr.)	Amount of Contribution (\$) \$59.93
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lloreda, Joe (Mr.)	Amount of Contribution (\$) \$239.98
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) city of galveston

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/18 Rpt: 15/30
2 FILER NAME The Galveston Firefighters Association		3 Filer ID (Ethics Commission Filers) 00058251
4 Date 12/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Luis (Mr.)	7 Amount of Contribution (\$) \$119.99
	6 Contributor address; City; State; Zip Code Galveston, TX 77550	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) city of galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lutringer, Matthew (Mr.)	Amount of Contribution (\$) \$119.99
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luza, John (Mr.)	Amount of Contribution (\$) \$239.98
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mahady, Mark (Mr.)	Amount of Contribution (\$) \$180.05
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Migliore, Adam (Mr.)	Amount of Contribution (\$) \$119.99
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/18 Rpt: 16/30
2 FILER NAME The Galveston Firefighters Association		3 Filer ID (Ethics Commission Filers) 00058251
4 Date 12/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Molis, Michael (Mr.)	7 Amount of Contribution (\$) \$119.99
6 Contributor address; City; State; Zip Code Galveston, TX 77550		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morgan Jr., Mark (Mr.)	Amount of Contribution (\$) \$359.97
Contributor address; City; State; Zip Code Galveston, TX 77550		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris, Jeremy (Mr.)	Amount of Contribution (\$) \$239.98
Contributor address; City; State; Zip Code Galveston, TX 77550		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moses, Martin (Mr.)	Amount of Contribution (\$) \$239.98
Contributor address; City; State; Zip Code Galveston, TX 77550		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oliver, Tobias (Mr.)	Amount of Contribution (\$) \$239.98
Contributor address; City; State; Zip Code Galveston, TX 77550		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/18 Rpt: 17/30
2 FILER NAME The Galveston Firefighters Association		3 Filer ID (Ethics Commission Filers) 00058251
4 Date 12/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ovalle, Tatana (Mrs.)	7 Amount of Contribution (\$) \$239.98
	6 Contributor address; City; State; Zip Code Galveston, TX 77550	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) city of galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pearson Jr., George (Mr.)	Amount of Contribution (\$) \$119.99
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) city of galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perales, Rodolfo (Mr.)	Amount of Contribution (\$) \$239.98
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) city of galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pride, John (Mr.)	Amount of Contribution (\$) \$180.05
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rico III, Johnnie (Mr.)	Amount of Contribution (\$) \$59.93
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) city of galveston

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/18 Rpt: 18/30
2 FILER NAME The Galveston Firefighters Association		3 Filer ID (Ethics Commission Filers) 00058251
4 Date 12/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riley, Gregory (Mr.)	7 Amount of Contribution (\$) \$239.98
	6 Contributor address; City; State; Zip Code Galveston, TX 77550	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) city of galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rojas Jr., David (Mr.)	Amount of Contribution (\$) \$59.93
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) city of galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santucci, Paul (Mr.)	Amount of Contribution (\$) \$239.98
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scheafer, Ryan (Mr.)	Amount of Contribution (\$) \$180.05
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Jordan (Mr.)	Amount of Contribution (\$) \$239.98
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/18 Rpt: 19/30
2 FILER NAME The Galveston Firefighters Association		3 Filer ID (Ethics Commission Filers) 00058251
4 Date 12/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Secci, Davide (Mr.)	7 Amount of Contribution (\$) \$119.99
6 Contributor address; City; State; Zip Code Galveston, TX 77550		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) city of galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shauck, John (Mr.)	Amount of Contribution (\$) \$239.98
Contributor address; City; State; Zip Code Galveston, TX 77550		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherman, Ryan (Mr.)	Amount of Contribution (\$) \$180.05
Contributor address; City; State; Zip Code Galveston, TX 77550		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Short, James (Mr.)	Amount of Contribution (\$) \$239.98
Contributor address; City; State; Zip Code Galveston, TX 77550		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Keegan (Mr.)	Amount of Contribution (\$) \$119.99
Contributor address; City; State; Zip Code Galveston, TX 77550		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/18 Rpt: 20/30
2 FILER NAME The Galveston Firefighters Association		3 Filer ID (Ethics Commission Filers) 00058251
4 Date 12/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Solis, Gerardo (Mr.)	7 Amount of Contribution (\$) \$119.99
	6 Contributor address; City; State; Zip Code Galveston, TX 77550	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Syers, Wiliam (Mr.)	Amount of Contribution (\$) \$239.98
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Temple, James (Mr.)	Amount of Contribution (\$) \$119.99
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, William (Mr.)	Amount of Contribution (\$) \$239.98
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Urbina Jr., Anastacio (Mr.)	Amount of Contribution (\$) \$119.99
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) city of galveston

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/18 Rpt: 21/30
2 FILER NAME The Galveston Firefighters Association		3 Filer ID (Ethics Commission Filers) 00058251
4 Date 12/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vandyke, Benjamin (Mr.)	7 Amount of Contribution (\$) \$180.05
	6 Contributor address; City; State; Zip Code Galveston, TX 77550	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wadyka, Patrick (Mr.)	Amount of Contribution (\$) \$119.99
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watson, Patrick (Mr.)	Amount of Contribution (\$) \$119.99
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weber Jr., Danny (Mr.)	Amount of Contribution (\$) \$119.99
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) city of galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Kevin (Mr.)	Amount of Contribution (\$) \$239.98
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/18 Rpt: 22/30
2 FILER NAME The Galveston Firefighters Association		3 Filer ID (Ethics Commission Filers) 00058251
4 Date 12/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zahara, Scott (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Galveston, TX 77550	7 Amount of Contribution (\$) \$239.98
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zaro, Jimmy (Mr.) <hr/> Contributor address; City; State; Zip Code Galveston, TX 77550	Amount of Contribution (\$) \$119.99
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) yancey, James (Mr.) <hr/> Contributor address; City; State; Zip Code Galveston, TX 77550	Amount of Contribution (\$) \$239.98
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Galveston

PLEGGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:
Sch: 1/1 Rpt: 23/30

2 FILER NAME
The Galveston Firefighters Association

3 Filer ID (Ethics Commission Filers)
00058251

4 TOTAL OF UNITEMIZED PLEDGES

\$ 0.00

5 Date

6 Full name of pledgor out-of-state PAC (ID#: _____)

8 Amount of
pledge (\$)

9 In-kind description
(If applicable)

7 Pledgor Address; City; State; Zip Code

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 24/30
2 FILER NAME The Galveston Firefighters Association		3 Filer ID (Ethics Commission Filers) 00058251
4 TOTAL OF UNITEMIZED LOANS		\$ 0.00
5 Date of loan	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	9 Loan Amount (\$)
6 Is lender a financial institution?	8 Lender address; City; State; Zip Code	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal occupation		21 Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By - | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/1 Rpt: 25/30	2 FILER NAME The Galveston Firefighters Association	3 Filer ID (Ethics Commission Filers) 00058251
4 Date 10/26/2023	5 Payee name TEXANS FOR DADE	
6 Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2514 Sealy Galveston, TX 77550	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donate to Dade Phelan for speaker of the house.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Phalen, Dade (Rep.)	Office sought State Representative Place
		Office held State Representative

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 1/3 Rpt:	2 FILER NAME Galveston Firefighters Local 571	3 Filer ID (Ethics Commission Filers) 00058251
4 Date 07/13/2023	5 Payee name 4AllPromos	
6 Amount (\$) 313.69 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 50 West Ave ESSEX, CT 06426	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Advertising Expense	(b) Description (See instructions regarding type of information required.) Promotional Items
Date 11/08/2023	Payee name Bayside Event Center	
Amount (\$) 4,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1723 61st Galveston, TX 77551	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) Wrong Account. will be refunded amount.
Date 12/01/2023	Payee name Bobbin' and Weavin' Apparel	
Amount (\$) 525.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip P.O. Box 3223 Galveston, TX 77552	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Printing Expense	(b) Description (See instructions regarding type of information required.) Shirts
Date 12/08/2023	Payee name CARROLL RRTG	
Amount (\$) 304.66 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 2907 CANAL ST HOUSTON, TX 77003	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Advertising Expense	(b) Description (See instructions regarding type of information required.) Signs

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 2/3 Rpt:	2 FILER NAME Galveston Firefighters Local 571	3 Filer ID (Ethics Commission Filers) 00058251
4 Date 11/14/2023	5 Payee name CARROLL RRTG	
6 Amount (\$) 606.20 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 2907 CANAL ST HOUSTON, TX 77003	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Advertising Expense	(b) Description (See instructions regarding type of information required.) Signs
Date 11/15/2023	Payee name CVS Pharmacy	
Amount (\$) 5.08 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 2425 Avenue J Galveston, TX 77550	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.) Ice
Date 11/15/2023	Payee name Moses, Martin	
Amount (\$) 72.83 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 7440 Heards Ln Galveston, TX 77554	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.) Reimbursement for Meeting with council members.
Date 11/03/2023	Payee name Texas Ethics Commission	
Amount (\$) 500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip PO Box 12710 Austin, TX 78711	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Late Fee

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 3/3 Rpt:	2 FILER NAME Galveston Firefighters Local 571	3 Filer ID (Ethics Commission Filers) 00058251
4 Date 11/03/2023	5 Payee name Texas Ethics Commission	
6 Amount (\$) 12.45 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip PO Box 12710 Austin, TX 78711	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Late Fee
Date 07/18/2023	Payee name Uber	
Amount (\$) 8.97 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 405 Howard St. San Francisco, CA 94103	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Travel Out of District	(b) Description (See instructions regarding type of information required.) Uber
Date 07/24/2023	Payee name Uber	
Amount (\$) 3.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 405 Howard St. San Francisco, CA 94103	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Travel Out of District	(b) Description (See instructions regarding type of information required.) Uber
Date 11/02/2023	Payee name Walmart	
Amount (\$) 413.28 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 6702 Seawall Blvd Galveston, TX 77551	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	(b) Description (See instructions regarding type of information required.) Office Supplies

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.		1 Total pages Schedule K: Sch: 1/2 Rpt: 29/30
2 FILER NAME The Galveston Firefighters Association		3 Filer ID (Ethics Commission Filers) 00058251
4 Date 09/30/2023	5 Name of person from whom amount is received Coastal Community Federal Credit Union	8 Amount (\$) \$6.03
	6 Address of person from whom amount is received; City; State; Zip Code Galveston, TX 77550	
	7 Purpose for which amount is received Interest <input type="checkbox"/> Check if political contribution returned to filer	
Date 12/30/2023	Name of person from whom amount is received Coastal Community Federal Credit Union	Amount (\$) \$6.03
	Address of person from whom amount is received; City; State; Zip Code Galveston, TX 77550	
	Purpose for which amount is received interest <input type="checkbox"/> Check if political contribution returned to filer	
Date 12/30/2023	Name of person from whom amount is received Coastal Community Federal Credit Union	Amount (\$) \$0.07
	Address of person from whom amount is received; City; State; Zip Code Galveston, TX 77550	
	Purpose for which amount is received Interest <input type="checkbox"/> Check if political contribution returned to filer	
Date 11/30/2023	Name of person from whom amount is received Coastal Community Federal Credit Union	Amount (\$) \$0.07
	Address of person from whom amount is received; City; State; Zip Code Galveston, TX 77550	
	Purpose for which amount is received Interest <input type="checkbox"/> Check if political contribution returned to filer	
Date 10/31/2023	Name of person from whom amount is received Coastal Community Federal Credit Union	Amount (\$) \$0.07
	Address of person from whom amount is received; City; State; Zip Code Galveston, TX 77550	
	Purpose for which amount is received Interest <input type="checkbox"/> Check if political contribution returned to filer	

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.		1 Total pages Schedule K: Sch: 2/2 Rpt: 30/30
2 FILER NAME The Galveston Firefighters Association		3 Filer ID (Ethics Commission Filers) 00058251
4 Date 08/31/2023	5 Name of person from whom amount is received Coastal Community Federal Credit Union <hr/> 6 Address of person from whom amount is received; City; State; Zip Code Galveston, TX 77550	8 Amount (\$) \$0.07
7 Purpose for which amount is received Interest <input type="checkbox"/> Check if political contribution returned to filer		
Date 07/30/2023	Name of person from whom amount is received Coastal Community Federal Credit Union <hr/> Address of person from whom amount is received; City; State; Zip Code Galveston, TX 77550	Amount (\$) \$0.07
Purpose for which amount is received Interest <input type="checkbox"/> Check if political contribution returned to filer		
Date 09/30/2023	Name of person from whom amount is received Coastal Community Federal Credit Union <hr/> Address of person from whom amount is received; City; State; Zip Code Galveston, TX 77550	Amount (\$) \$0.07
Purpose for which amount is received Interest <input type="checkbox"/> Check if political contribution returned to filer		