#### FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00070365 3 COMMITTEE NAME **OFFICE USE ONLY** Austin Firefighters Public Safety Fund Date Received **ELECTRONICALLY FILED** 07/29/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 7537 Cameron Rd. Change of Address Austin, TX 78752 Date Hand-delivered or Date Postmarked MS / MRS / MR **FIRST CAMPAIGN** MI **TREASURER** Receipt # Amount Gregory NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Pope CAMPAIGN APT / SUITE #; STREET ADDRESS (NO PO BOX PLEASE); CITY; STATE; ZIP CODE **TREASURER** 7537 Cameron Rd. STREET **ADDRESS** (Residence or Business) Austin, TX 78752 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 7537 Cameron Rd. MAILING **ADDRESS** Change of Address Austin, TX 78752 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (512) 441-7572 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 April 5 July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 X August 5 November 5 March 5 September 5 December 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 06/26/2024 07/25/2024

## MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

# FORM MPAC COVER SHEET PG 2

		1		
2 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Austin Firefighters P	ublic Safety Fund		00070365	
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. Managemen	A. Supported		
	Measures     (Describe by date and location)	A. Supported		
	of election and nature of issue.)			
		B. Opposed		
	Officeholders     Assisted			
	(Identify by name or, if applicable, classify by party.)			
L5 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS N	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY)	\$	0.00
	2. TOTAL POLITICA	qualifies for the higher itemization threshold	\$	
		(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZE	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		
	4. TOTAL POLITICA	L EXPENDITURES	\$	0.00
CONTRIBUTION BALANCE		5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD			0.00
6 AFFIDAVIT	I		<u> </u>	
		I swear, or affirm, under penalty of pe true and correct and includes all informunder Title 15, Election Code.	rjury, that the a	accompanying report is d to be reported by me
		Mr Gred	jory Pope	
		Signature of Car		urer
AFFIX NOTA	.RY STAMP / SEAL ABOVE	<b>3</b>	ļ <b>J</b>	
		, th	nis the	day
01	, 20, to certify	which, witness my hand and seal of office.		
Signature of officer	administering oath	Printed name of officer administering oath	Title of office	cer administering oath
Signature of officer	administering outil		THE OF OHIO	oo. aanimistening datii

#### **SUBTOTALS - MPAC**

### FORM MPAC COVER SHEET PG 3 3 of 5

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<b>17</b> CO	ммітті	(Ethics Commission Filers)				
Au	stin Fir					
19 SCHEDULE SUBTOTALS  NAME OF SCHEDULE					SUBTOTAL AMOUNT	
1.	X	\$ 0.00				
2.	2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS				0.00	
3.	X	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	0.00		
4.		\$				
5.		\$				
6.		\$				
7.		\$				
8.		\$				
9.	X	\$	0.00			
10.	10. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS				0.00	
11.	X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00	
12.	X	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	0.00	
13.	X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00	
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$		
15. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER					\$	
				•		

PLEI	DGED CONTRIBU	TIONS				SCHEDULE B
The Instruction Guide explains how to complete this form.				1	Total pages Sche Sch: 1/1 Rpt: 4	
2 FILER N Austin F	IAME Firefighters Public Safety Fun		3		Ethics Commission Filers)	
4 TOTAL	OF UNITEMIZED PLEDO		1	\$	0.00	
<b>5</b> Date	6 Full name of pledgorout-of-state PAC (ID#:			8	Amount of pledge (\$)	9 In-kind description (If applicable)
	7 Pledgor Address;	City; State; Zip Code	е		<b>-</b>	1 1 1 1 1
10 Princinal	l occupation / Job title (See Instru	ıctions)	11 Employer (See Ins	tructi		side of Texas. Complete Schedule T.
	(000)	,	Linployer (See ins	i act	onsy	

	LOANS						SCHE	DULE E	
	The Instruction Guide explains how to complete this form					ges Schedule E: 1 Rpt: 5/5			
2	2 FILER NAME Austin Firefighters Public Safety Fund				3	3 Filer ID (Ethics Commission Filers) 00070365			
4	TOTAL OF UN	IITEMIZED LOANS			L		\$	0.00	
5	Date of loan	7 Name of lender	out-of-state PA	C (ID#:		)	9 Loan Amoun	t (\$)	
6	Is lender a financial institution?	8 Lender address; City;	State;	Zip Code			10 Interest Rate		
							<b>11</b> Maturity Date	<u>)</u>	
12	Principal occupation	on / Job title (See Instructions)		13 Employer (See In	structions)				
14	Description of Coll	ateral		15 Check if persona	I funds were	deposited	into political acco		
16	GUARANTOR INFORMATION	17 Name of guarantor					19 Amount Gua	ranteed (\$)	
	not applicable	18 Guarantor address; City;	State;	Zip Code					
20	Principal occupation	on		21 Employer (See In	structions)				