

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) 00064087	2 Total pages filed: 35
3 COMMITTEE NAME Brownsville Firefighters For Responsible Government		OFFICE USE ONLY	
		Date Received ELECTRONICALLY FILED 11/04/2024	
		Date Hand-delivered or Date Postmarked	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 4171 Brownsville, TX 78523		
	Receipt #		Amount
		Date Processed	
		Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI
	Mr.	Dorian	
NICKNAME		LAST	SUFFIX
		Hopperstad	
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 731 East Elizabeth Street Brownsville, TX 78520		
	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 731 East Elizabeth Street Brownsville, TX 78520		
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 731 East Elizabeth Street Brownsville, TX 78520		
	AREA CODE PHONE NUMBER EXTENSION (956) 572-1920		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" 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 type="checkbox"/> 10th day after campaign treasurer termination		
10 PERIOD COVERED	<input type="checkbox"/> Runoff		
	Month Day Year 07/01/2024	THROUGH	Month Day Year 09/26/2024
11 ELECTION	ELECTION DATE Month Day Year 11/05/2024		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input checked="" type="checkbox"/> Special

GO TO PAGE 2

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Brownsville Firefighters For Responsible Government	13 Filer ID (Ethics Commission Filers) 00064087
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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 Commissioner TINO VILLARREAL COMMISSIONER
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 5,734.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 5,500.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 30,257.62
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. Dorian Hopperstad

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

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

12 COMMITTEE NAME Brownsville Firefighters For Responsible Government	13 Filer ID (Ethics Commission Filers) 00064087
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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 Rep. JOHN LUJAN State Representative
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	B. Opposed

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 Commissioner PEDRO CARDENES COMMISSIONER
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	B. Opposed

SUBTOTALS - GPAC

17 COMMITTEE NAME Brownsville Firefighters For Responsible Government		18 Filer ID (Ethics Commission Filers) 00064087
19 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 5,734.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 5,500.00
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/30 Rpt: 5/35
2 FILER NAME Brownsville Firefighters For Responsible Government		3 Filer ID (Ethics Commission Filers) 00064087
4 Date 09/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VILLALPANDO, ABRAHAM	7 Amount of Contribution (\$) \$15.00
	6 Contributor address; City; State; Zip Code Brownsville, TX 78526	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VILLALPANDO, ABRAHAM	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Brownsville, TX 78526	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAZAN, EDGAR RICARDO	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Brownsville, TX 78526	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAZAN, EDGAR RICARDO	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Brownsville, TX 78526	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENAVIDEZ, EDEN T.	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Brownsville, TX 78526	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/30 Rpt: 6/35
2 FILER NAME Brownsville Firefighters For Responsible Government		3 Filer ID (Ethics Commission Filers) 00064087
4 Date 09/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENAVIDEZ, EDEN T. <hr/> 6 Contributor address; City; State; Zip Code Brownsville, TX 78526	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENAVIDEZ, MICHAEL AARON <hr/> Contributor address; City; State; Zip Code Brownsville, TX 78526	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENAVIDEZ, MICHAEL AARON <hr/> Contributor address; City; State; Zip Code Brownsville, TX 78526	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOCANEGRA, RIGOBERTO <hr/> Contributor address; City; State; Zip Code Brownsville, TX 78526	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOCANEGRA, RIGOBERTO <hr/> Contributor address; City; State; Zip Code Brownsville, TX 78526	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/30 Rpt: 7/35
2 FILER NAME Brownsville Firefighters For Responsible Government		3 Filer ID (Ethics Commission Filers) 00064087
4 Date 09/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRIONES, ISAAC E.	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Brownsville, TX 78526		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRIONES, ISAAC E.	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANDANOZA, EDWARD	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANDANOZA, EDWARD	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARDENAS, EUGENIO	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/30 Rpt: 8/35
2 FILER NAME Brownsville Firefighters For Responsible Government		3 Filer ID (Ethics Commission Filers) 00064087
4 Date 09/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARDENAS, EUGENIO <hr/> 6 Contributor address; City; State; Zip Code Brownsville, TX 78526	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAVAZOS, ANGIE <hr/> Contributor address; City; State; Zip Code Brownsville, TX 78526	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAVAZOS, ANGIE <hr/> Contributor address; City; State; Zip Code Brownsville, TX 78526	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CEPEDA Jr., CESAR ALEJANDRO <hr/> Contributor address; City; State; Zip Code Brownsville, TX 78526	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CEPEDA Jr., CESAR ALEJANDRO <hr/> Contributor address; City; State; Zip Code Brownsville, TX 78526	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/30 Rpt: 9/35
2 FILER NAME Brownsville Firefighters For Responsible Government		3 Filer ID (Ethics Commission Filers) 00064087
4 Date 09/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRUZ, ENOC <hr/> 6 Contributor address; City; State; Zip Code Brownsville, TX 78526	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRUZ, ENOC <hr/> Contributor address; City; State; Zip Code Brownsville, TX 78526	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DERAS, CARLOS OMAR <hr/> Contributor address; City; State; Zip Code Brownsville, TX 78526	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DERAS, CARLOS OMAR <hr/> Contributor address; City; State; Zip Code Brownsville, TX 78526	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELIZONDO Jr., ANTONIO <hr/> Contributor address; City; State; Zip Code Brownsville, TX 78526	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/30 Rpt: 10/35
2 FILER NAME Brownsville Firefighters For Responsible Government		3 Filer ID (Ethics Commission Filers) 00064087
4 Date 09/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELIZONDO Jr., ANTONIO	7 Amount of Contribution (\$) \$30.00
	6 Contributor address; City; State; Zip Code Brownsville, TX 78526	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELY, AMANDA	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Brownsville, TX 78526	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELY, AMANDA	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Brownsville, TX 78526	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLOYD III, CECIL KERR	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Brownsville, TX 78526	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLOYD III, CECIL KERR	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Brownsville, TX 78526	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/30 Rpt: 11/35
2 FILER NAME Brownsville Firefighters For Responsible Government		3 Filer ID (Ethics Commission Filers) 00064087
4 Date 09/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAMBOA, ISMAEL <hr/> 6 Contributor address; City; State; Zip Code Brownsville, TX 78526	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAMBOA, ISMAEL <hr/> Contributor address; City; State; Zip Code Brownsville, TX 78526	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GANGEMI, DANIEL <hr/> Contributor address; City; State; Zip Code Brownsville, TX 78526	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GANGEMI, DANIEL <hr/> Contributor address; City; State; Zip Code Brownsville, TX 78526	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, MICHAEL AARON <hr/> Contributor address; City; State; Zip Code Brownsville, TX 78526	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/30 Rpt: 12/35
2 FILER NAME Brownsville Firefighters For Responsible Government		3 Filer ID (Ethics Commission Filers) 00064087
4 Date 09/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, MICHAEL AARON	7 Amount of Contribution (\$) \$30.00
6 Contributor address; City; State; Zip Code Brownsville, TX 78526		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, SAMUEL	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, SAMUEL	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARZA, NOEL IVAN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARZA, NOEL IVAN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/30 Rpt: 13/35
2 FILER NAME Brownsville Firefighters For Responsible Government		3 Filer ID (Ethics Commission Filers) 00064087
4 Date 09/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAYTAN, VIVIANA	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Brownsville, TX 78526		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAYTAN, VIVIANA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOMEZ, BRYAN ANDREW	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOMEZ, BRYAN ANDREW	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALEZ Jr., GERARDO	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/30 Rpt: 14/35
2 FILER NAME Brownsville Firefighters For Responsible Government		3 Filer ID (Ethics Commission Filers) 00064087
4 Date 09/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALEZ Jr., GERARDO	7 Amount of Contribution (\$) \$30.00
6 Contributor address; City; State; Zip Code Brownsville, TX 78526		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRACIA, BENJAMIN	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRACIA, BENJAMIN	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRACIA, CRISTOBAL	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRACIA, CRISTOBAL	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/30 Rpt: 15/35
2 FILER NAME Brownsville Firefighters For Responsible Government		3 Filer ID (Ethics Commission Filers) 00064087
4 Date 09/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRACIA Jr., MARGARITO	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Brownsville, TX 78526		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRACIA Jr., MARGARITO	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUERRERO, EDWARD E.	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUERRERO, EDWARD E.	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUERRERO, LUIS CARLOS	Amount of Contribution (\$) \$0.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/30 Rpt: 16/35
2 FILER NAME Brownsville Firefighters For Responsible Government		3 Filer ID (Ethics Commission Filers) 00064087
4 Date 09/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUERRERO, LUIS CARLOS	7 Amount of Contribution (\$) \$0.00
6 Contributor address; City; State; Zip Code Brownsville, TX 78526		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUERRERO, MARIO A.	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUERRERO, MARIO A.	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUERRERO, ROBERT D.	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUERRERO, ROBERT D.	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/30 Rpt: 17/35
2 FILER NAME Brownsville Firefighters For Responsible Government		3 Filer ID (Ethics Commission Filers) 00064087
4 Date 09/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERNANDEZ, ALFREDO	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Brownsville, TX 78526		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERNANDEZ, ALFREDO	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOPPERSTAD, DORIAN A.	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOPPERSTAD, DORIAN A.	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUDSON Jr., JOHN THADDEUS	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/30 Rpt: 18/35
2 FILER NAME Brownsville Firefighters For Responsible Government		3 Filer ID (Ethics Commission Filers) 00064087
4 Date 09/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUDSON Jr., JOHN THADDEUS	7 Amount of Contribution (\$) \$30.00
6 Contributor address; City; State; Zip Code Brownsville, TX 78526		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUERTA, JOSEPH DANIEL	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUERTA, JOSEPH DANIEL	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LERMA, ROY	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LERMA, ROY	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/30 Rpt: 19/35
2 FILER NAME Brownsville Firefighters For Responsible Government		3 Filer ID (Ethics Commission Filers) 00064087
4 Date 09/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LONG Jr., REYNALDO	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Brownsville, TX 78526		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LONG Jr., REYNALDO	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOPES, AARON A.	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOPES, AARON A.	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOPEZ, JESUS RICARDO	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/30 Rpt: 20/35
2 FILER NAME Brownsville Firefighters For Responsible Government		3 Filer ID (Ethics Commission Filers) 00064087
4 Date 09/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOPEZ, JESUS RICARDO	7 Amount of Contribution (\$) \$30.00
6 Contributor address; City; State; Zip Code Brownsville, TX 78526		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOPEZ Jr., JUAN JOSE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOPEZ Jr., JUAN JOSE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOYA III, JOSE ANGEL	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOYA III, JOSE ANGEL	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/30 Rpt: 21/35
2 FILER NAME Brownsville Firefighters For Responsible Government		3 Filer ID (Ethics Commission Filers) 00064087
4 Date 09/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOYA Jr., JUAN	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Brownsville, TX 78526		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOYA Jr., JUAN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUNA, MIGUEL A.	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUNA, MIGUEL A.	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, DANIEL	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/30 Rpt: 22/35
2 FILER NAME Brownsville Firefighters For Responsible Government		3 Filer ID (Ethics Commission Filers) 00064087
4 Date 09/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, DANIEL	7 Amount of Contribution (\$) \$30.00
6 Contributor address; City; State; Zip Code Brownsville, TX 78526		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCARDLE, ROGER LEE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCARDLE, ROGER LEE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MELCHOR, DYLAN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MELCHOR, DYLAN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/30 Rpt: 23/35
2 FILER NAME Brownsville Firefighters For Responsible Government		3 Filer ID (Ethics Commission Filers) 00064087
4 Date 09/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONTANEZ Jr., MARCIANO	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Brownsville, TX 78526		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONTANEZ Jr., MARCIANO	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORALES, JONATHAN J.	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORALES, JONATHAN J.	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUNOZ, RICARDO	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/30 Rpt: 24/35
2 FILER NAME Brownsville Firefighters For Responsible Government		3 Filer ID (Ethics Commission Filers) 00064087
4 Date 09/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUNOZ, RICARDO	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Brownsville, TX 78526		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NUNEZ Jr., BEN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NUNEZ Jr., BEN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PANIAGUA, MARCO ANTONIO	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PANIAGUA, MARCO ANTONIO	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/30 Rpt: 25/35
2 FILER NAME Brownsville Firefighters For Responsible Government		3 Filer ID (Ethics Commission Filers) 00064087
4 Date 09/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEREZ, ROBERT ANTHONY	7 Amount of Contribution (\$) \$30.00
6 Contributor address; City; State; Zip Code Brownsville, TX 78526		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEREZ, ROBERT ANTHONY	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMIREZ, JOSE JESUS	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMIREZ, JOSE JESUS	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROCHA III, GUADALUPE	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/30 Rpt: 26/35
2 FILER NAME Brownsville Firefighters For Responsible Government		3 Filer ID (Ethics Commission Filers) 00064087
4 Date 09/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROCHA III, GUADALUPE <hr/> 6 Contributor address; City; State; Zip Code Brownsville, TX 78526	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ Jr., ARMANDO <hr/> Contributor address; City; State; Zip Code Brownsville, TX 78526	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ Jr., ARMANDO <hr/> Contributor address; City; State; Zip Code Brownsville, TX 78526	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUMFIELD, NASON JOEL <hr/> Contributor address; City; State; Zip Code Brownsville, TX 78526	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUMFIELD, NASON JOEL <hr/> Contributor address; City; State; Zip Code Brownsville, TX 78526	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/30 Rpt: 27/35
2 FILER NAME Brownsville Firefighters For Responsible Government		3 Filer ID (Ethics Commission Filers) 00064087
4 Date 09/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALDANA, ENRIQUE	7 Amount of Contribution (\$) \$30.00
6 Contributor address; City; State; Zip Code Brownsville, TX 78526		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALDANA, ENRIQUE	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALDIVAR, ROBERT JOSEPH	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALDIVAR, ROBERT JOSEPH	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALINAS, GUADALUPE	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/30 Rpt: 28/35
2 FILER NAME Brownsville Firefighters For Responsible Government		3 Filer ID (Ethics Commission Filers) 00064087
4 Date 09/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALINAS, GUADALUPE	7 Amount of Contribution (\$) \$30.00
6 Contributor address; City; State; Zip Code Brownsville, TX 78526		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANCHEZ, JAVIER	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANCHEZ, JAVIER	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDOVAL, JONATHAN	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDOVAL, JONATHAN	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/30 Rpt: 29/35
2 FILER NAME Brownsville Firefighters For Responsible Government		3 Filer ID (Ethics Commission Filers) 00064087
4 Date 09/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANTILLANA, ABDIAN I.	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Brownsville, TX 78526		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANTILLANA, ABDIAN I.	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SILVA, CALEB JUAN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SILVA, CALEB JUAN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREVINO, DIANA LISA	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/30 Rpt: 30/35
2 FILER NAME Brownsville Firefighters For Responsible Government		3 Filer ID (Ethics Commission Filers) 00064087
4 Date 09/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREVINO, DIANA LISA	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code Brownsville, TX 78526		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRISTAN, DESIDERIO	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRISTAN, DESIDERIO	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VALDEZ, EDUARD	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VALDEZ, EDUARD	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/30 Rpt: 31/35
2 FILER NAME Brownsville Firefighters For Responsible Government		3 Filer ID (Ethics Commission Filers) 00064087
4 Date 09/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VALDEZ, EMMANUEL ALEJANDRO <hr/> 6 Contributor address; City; State; Zip Code Brownsville, TX 78526	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VALDEZ, EMMANUEL ALEJANDRO <hr/> Contributor address; City; State; Zip Code Brownsville, TX 78526	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VASQUEZ, ARMANDO <hr/> Contributor address; City; State; Zip Code Brownsville, TX 78526	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VASQUEZ, ARMANDO <hr/> Contributor address; City; State; Zip Code Brownsville, TX 78526	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VASQUEZ, GILBERT ISAIAS <hr/> Contributor address; City; State; Zip Code Brownsville, TX 78526	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/30 Rpt: 32/35
2 FILER NAME Brownsville Firefighters For Responsible Government		3 Filer ID (Ethics Commission Filers) 00064087
4 Date 09/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VASQUEZ, GILBERT ISAIAS	7 Amount of Contribution (\$) \$30.00
6 Contributor address; City; State; Zip Code Brownsville, TX 78526		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VEGA, DANIEL	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VEGA, DANIEL	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VEGA Jr., CARLOS A.	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VEGA Jr., CARLOS A.	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/30 Rpt: 33/35
2 FILER NAME Brownsville Firefighters For Responsible Government		3 Filer ID (Ethics Commission Filers) 00064087
4 Date 09/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VILLARREAL, GUADALUPE	7 Amount of Contribution (\$) \$30.00
6 Contributor address; City; State; Zip Code Brownsville, TX 78526		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VILLARREAL, GUADALUPE	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALTER, RICHARD TERRENCE	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALTER, RICHARD TERRENCE	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZAPATA, SEBASTIAN	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Brownsville

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/30 Rpt: 34/35
2 FILER NAME Brownsville Firefighters For Responsible Government		3 Filer ID (Ethics Commission Filers) 00064087
4 Date 09/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZAPATA, SEBASTIAN <hr/> 6 Contributor address; City; State; Zip Code Brownsville, TX 78526	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Brownsville

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/1 Rpt: 35/35	2 FILER NAME Brownsville Firefighters For Responsible Government	3 Filer ID (Ethics Commission Filers) 00064087
4 Date 08/06/2024	5 Payee name John Lujan Campaign	
6 Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O.Box 14479 San Antonio, TX 78214	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Lujan, John	Office sought State Representative Office held
Date 08/13/2024	Payee name Pedro Cardenas Campaign	
Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 23 E Maple Cir BROWNSVILLE, TX 78521	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Cardenas, Pedro	Office sought COMMISSIONER District 4 Office held
Date 08/06/2024	Payee name Tino Villarreal Campaign	
Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 255 Las Villas BROWNSVILLE, TX 78526	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Villarreal, Tino	Office sought COMMISSIONER Place A Office held