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) 00080398 3 COMMITTEE NAME **OFFICE USE ONLY** Williamson County Deputies Association PAC. Date Received **ELECTRONICALLY FILED** 11/04/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 723 W. University, Suite 110-162 Change of Address georgetown, TX 78626 Date Hand-delivered or Date Postmarked MS / MRS / MR **CAMPAIGN FIRST** MI **TREASURER** Receipt # Amount Mr. Mark D. NAME Date Processed **NICKNAME** LAST **SUFFIX** Date Imaged Huntley CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 723 W. University, Suite 110-162 STREET **ADDRESS** (Residence or Business) Georgetown, TX 78626 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 723 W. University, Suite 110-162 MAILING **ADDRESS** Change of Address Georgetown, TX 78626 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (512) 943-7744 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 April 5 July 5 X October 5 REPORT FILING **DEADLINE** February 5 May 5 August 5 November 5 March 5 September 5 December 5 June 5

Month

08/26/2024

Day

Year

11 PERIOD

COVERED

THROUGH

Month

09/25/2024

Day

Year

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

COMMITTEE NAME		13 Filer ID (Ethics Commission Filers)		
Williamson County Deputies Association PAC.			00080398	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Mike Gleason Sheriff - William	son County	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS N	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY) t qualifies for the higher itemization threshold	\$	0.00
		AL CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	60.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZE	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		0.00
	4. TOTAL POLITICA	AL EXPENDITURES	\$	800.00
CONTRIBUTION BALANCE		5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		6,532.01
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF TREPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT	•		<u> </u>	
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.	rjury, that the a	accompanying report is d to be reported by me
		Mr. Mark	D. Huntley	_
		Signature of Ca	mpaign Treası	urer
AFFIX NOTAI	RY STAMP / SEAL ABOVE			
		, tl	his 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 offi	cer administering oath

SUBTOTALS - MPAC

FORM MPAC **COVER SHEET PG 3**

					3 01 5
		E NAME n County Deputies Association PAC.	18 Filer ID 00080398	(Ethics (Commission Filers)
		1			
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE					BTOTAL AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	60.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOURGANIZATION	PR	\$	
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$	
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$	
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$	
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$	
9.		SCHEDULE E: LOANS		\$	
10.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	800.00
11.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
12.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

	MONETARY POLITICAL CONTRIBU	JTIONS	SCHEDULE A1
	The Instruction Guide explains how to complete	this form.	1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/5
2	FILER NAME Williamson County Deputies Association PAC.	3 Filer ID (Ethics Commission Filers) 00080398	
4	Date 09/20/2024 5 Full name of contributor out-of-state PAC (ID#:) Oberg, David (Mr.) 6 Contributor address; City; State; Zip Code		7 Amount of Contribution (\$) \$10.00
	Georgetown, TX 78626	O Frankrier (Cooking	thu stings)
8	Principal occupation / Job title (See Instructions) Peace Officer	9 Employer (See Ins Williamson Cour	nty Sheriff's Office
	Date Full name of contributor out-of-state PA 09/16/2024 sheffield, michael Contributor address; City; State; Zip Code	C (ID#:) Amount of Contribution (\$) \$50.00
	georgetown, TX 78628		
	Principal occupation / Job title (See Instructions) law enforcement	Employer (See Ins	structions)

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District

Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	3y - Gift/Awards/Memorials Expense Printing Expense Travel Out of District Cal Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 1/1 Rpt: 5/5	Williamson County Deputies Association PAC. 00080398
4 Date	5 Payee name
09/18/2024	Mke Gleason
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$800.00	604 palo alto In
Expenditure from corporate funds	cedar park, TX 78613
8 PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
	8 seats to campaign fundraiser
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	