

# MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM MPAC  
COVER SHEET PG 1

<b>The MPAC Instruction Guide explains how to complete this form.</b>		<b>1</b> Filer ID (Ethics Commission Filers) 00066422	<b>2</b> Total pages filed: 22
<b>3</b> COMMITTEE NAME Leander Firefighters for Responsible Government		<b>OFFICE USE ONLY</b>	
		Date Received ELECTRONICALLY FILED 11/05/2024	
<b>4</b> COMMITTEE ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP 801 S Highway 183 PO Box 2068 Leander, TX 78641-9998		
		Date Hand-delivered or Date Postmarked	
<b>5</b> CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mr. Brandon	Receipt # Amount	
	NICKNAME LAST SUFFIX Sanchez	Date Processed	
		Date Imaged	
<b>6</b> CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 7203 Cultivator Way San Antonio, TX 78252		
<b>7</b> CAMPAIGN TREASURER MAILING ADDRESS  <input type="checkbox"/> Change of Address	STREET ADDRESS OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 7203 Cultivator Way San Antonio, TX 78252		
<b>8</b> CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (830) 765-4483		
<b>9</b> REPORT TYPE	<input checked="" type="checkbox"/> Monthly <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Dissolution (Attach PAC-DR)		
<b>10</b> MONTHLY REPORT FILING DEADLINE	<input type="checkbox"/> January 5 <input type="checkbox"/> April 5 <input type="checkbox"/> July 5 <input type="checkbox"/> October 5 <input type="checkbox"/> February 5 <input type="checkbox"/> May 5 <input type="checkbox"/> August 5 <input checked="" type="checkbox"/> November 5 <input type="checkbox"/> March 5 <input type="checkbox"/> June 5 <input type="checkbox"/> September 5 <input type="checkbox"/> December 5		
<b>11</b> PERIOD COVERED	Month Day Year THROUGH Month Day Year 09/26/2024 10/25/2024		

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# MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC  
COVER SHEET PG 2

<b>12 COMMITTEE NAME</b> Leander Firefighters for Responsible Government	<b>13 Filer ID</b> (Ethics Commission Filers) 00066422
-----------------------------------------------------------------------------	-----------------------------------------------------------

<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

<b>15 CONTRIBUTION TOTALS</b>	<b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</b>	\$ 0.00
	<input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold	
	<b>2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)</b>	\$ 471.50
EXPENDITURE TOTALS	<b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>	\$ 0.00
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 682.00
CONTRIBUTION BALANCE	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 2,510.15
OUTSTANDING LOAN TOTALS	<b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 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. Brandon Sanchez  
\_\_\_\_\_  
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 - MPAC

<b>17 COMMITTEE NAME</b> Leander Firefighters for Responsible Government		<b>18 Filer ID</b> (Ethics Commission Filers) 00066422
<b>19 SCHEDULE SUBTOTALS</b>		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 471.50
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	\$ 682.00
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**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/18 Rpt: 4/22
<b>2</b> FILER NAME Leander Firefighters for Responsible Government		<b>3</b> Filer ID (Ethics Commission Filers) 00066422
<b>4</b> Date 09/27/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Anguiano, Tony (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Leander, TX 78641	<b>7</b> Amount of Contribution (\$)  \$3.00
<b>8</b> Principal occupation / Job title (See Instructions) Deputy Chief		<b>9</b> Employer (See Instructions) City of Leander
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Anguiano, Tony (Mr.) <hr/> Contributor address; City; State; Zip Code  Leander, TX 78641	Amount of Contribution (\$)  \$3.00
Principal occupation / Job title (See Instructions) Deputy Chief		Employer (See Instructions) City of Leander
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Anguiano, Tony (Mr.) <hr/> Contributor address; City; State; Zip Code  Leander, TX 78641	Amount of Contribution (\$)  \$3.00
Principal occupation / Job title (See Instructions) Deputy Chief		Employer (See Instructions) City of Leander
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Arnold, Robert (Mr.) <hr/> Contributor address; City; State; Zip Code  Liberty Hill, TX 78642	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Fire Lieutenant		Employer (See Instructions) City of Leander
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Arnold, Robert (Mr.) <hr/> Contributor address; City; State; Zip Code  Liberty Hill, TX 78642	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Fire Lieutenant		Employer (See Instructions) City of Leander

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/18 Rpt: 5/22
<b>2</b> FILER NAME Leander Firefighters for Responsible Government		<b>3</b> Filer ID (Ethics Commission Filers) 00066422
<b>4</b> Date 10/25/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Arnold, Robert (Mr.)	<b>7</b> Amount of Contribution (\$)  \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  Liberty Hill, TX 78642	
<b>8</b> Principal occupation / Job title (See Instructions) Fire Lieutenant		<b>9</b> Employer (See Instructions) City of Leander
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carter, Brent (Mr.)	Amount of Contribution (\$)  \$5.00
	Contributor address; City; State; Zip Code  Waco, TX 76708	
Principal occupation / Job title (See Instructions) DPO		Employer (See Instructions) City of Leander
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carter, Brent (Mr.)	Amount of Contribution (\$)  \$5.00
	Contributor address; City; State; Zip Code  Waco, TX 76708	
Principal occupation / Job title (See Instructions) DPO		Employer (See Instructions) City of Leander
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carter, Brent (Mr.)	Amount of Contribution (\$)  \$5.00
	Contributor address; City; State; Zip Code  Waco, TX 76708	
Principal occupation / Job title (See Instructions) DPO		Employer (See Instructions) City of Leander
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Contreras, Luke (Mr.)	Amount of Contribution (\$)  \$2.50
	Contributor address; City; State; Zip Code  Pflugerville, TX 78660	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Leander

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/18 Rpt: 6/22
<b>2</b> FILER NAME Leander Firefighters for Responsible Government		<b>3</b> Filer ID (Ethics Commission Filers) 00066422
<b>4</b> Date 10/11/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Contreras, Luke (Mr.)	<b>7</b> Amount of Contribution (\$)  \$2.50
	<b>6</b> Contributor address; City; State; Zip Code  Pflugerville, TX 78660	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) City of Leander
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Contreras, Luke (Mr.)	Amount of Contribution (\$)  \$2.50
	Contributor address; City; State; Zip Code  Pflugerville, TX 78660	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Leander
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cubit, Carroll (Mr.)	Amount of Contribution (\$)  \$5.00
	Contributor address; City; State; Zip Code  Round Rock, TX 78681	
Principal occupation / Job title (See Instructions) DPO		Employer (See Instructions) City of Leander
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cubit, Carroll (Mr.)	Amount of Contribution (\$)  \$5.00
	Contributor address; City; State; Zip Code  Round Rock, TX 78681	
Principal occupation / Job title (See Instructions) DPO		Employer (See Instructions) City of Leander
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cubit, Carroll (Mr.)	Amount of Contribution (\$)  \$5.00
	Contributor address; City; State; Zip Code  Round Rock, TX 78681	
Principal occupation / Job title (See Instructions) DPO		Employer (See Instructions) City of Leander

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/18 Rpt: 7/22
<b>2</b> FILER NAME Leander Firefighters for Responsible Government		<b>3</b> Filer ID (Ethics Commission Filers) 00066422
<b>4</b> Date 09/27/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gardner, Chris (Mr.)	<b>7</b> Amount of Contribution (\$)
	<b>6</b> Contributor address; City; State; Zip Code  Goldthwaite, TX 78644	
<b>8</b> Principal occupation / Job title (See Instructions) Fire Lieutenant		<b>9</b> Employer (See Instructions) City of Leander
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gardner, Chris (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Goldthwaite, TX 78644	
Principal occupation / Job title (See Instructions) Fire Lieutenant		Employer (See Instructions) City of Leander
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gardner, Chris (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Goldthwaite, TX 78644	
Principal occupation / Job title (See Instructions) Fire Lieutenant		Employer (See Instructions) City of Leander
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garrison, Chuck (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Georgetown, TX 78628	
Principal occupation / Job title (See Instructions) Battalion Chief		Employer (See Instructions) City of Leander
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garrison, Chuck (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Georgetown, TX 78628	
Principal occupation / Job title (See Instructions) Battalion Chief		Employer (See Instructions) City of Leander

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/18 Rpt: 8/22
<b>2</b> FILER NAME Leander Firefighters for Responsible Government		<b>3</b> Filer ID (Ethics Commission Filers) 00066422
<b>4</b> Date 10/25/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garrison, Chuck (Mr.)	<b>7</b> Amount of Contribution (\$)  \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  Georgetown, TX 78628	
<b>8</b> Principal occupation / Job title (See Instructions) Battalion Chief		<b>9</b> Employer (See Instructions) City of Leander
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hogue, Robert (Mr.)	Amount of Contribution (\$)  \$11.00
	Contributor address; City; State; Zip Code  Round Rock, TX 78681	
Principal occupation / Job title (See Instructions) Fire Lieutenant		Employer (See Instructions) City of Leander
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hogue, Robert (Mr.)	Amount of Contribution (\$)  \$11.00
	Contributor address; City; State; Zip Code  Round Rock, TX 78681	
Principal occupation / Job title (See Instructions) Fire Lieutenant		Employer (See Instructions) City of Leander
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hogue, Robert (Mr.)	Amount of Contribution (\$)  \$11.00
	Contributor address; City; State; Zip Code  Round Rock, TX 78681	
Principal occupation / Job title (See Instructions) Fire Lieutenant		Employer (See Instructions) City of Leander
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Holder, Dustin (Mr.)	Amount of Contribution (\$)  \$5.00
	Contributor address; City; State; Zip Code  Liberty Hill, TX 78642	
Principal occupation / Job title (See Instructions) DPO		Employer (See Instructions) City of Leander



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/18 Rpt: 9/22
<b>2</b> FILER NAME Leander Firefighters for Responsible Government		<b>3</b> Filer ID (Ethics Commission Filers) 00066422
<b>4</b> Date 10/11/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Holder, Dustin (Mr.)	<b>7</b> Amount of Contribution (\$)  \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  Liberty Hill, TX 78642	
<b>8</b> Principal occupation / Job title (See Instructions) DPO		<b>9</b> Employer (See Instructions) City of Leander
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Holder, Dustin (Mr.)	Amount of Contribution (\$)  \$5.00
	Contributor address; City; State; Zip Code  Liberty Hill, TX 78642	
Principal occupation / Job title (See Instructions) DPO		Employer (See Instructions) City of Leander
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Huber, Patrick (Mr.)	Amount of Contribution (\$)  \$8.00
	Contributor address; City; State; Zip Code  Austin, TX 78748	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Leander
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Huber, Patrick (Mr.)	Amount of Contribution (\$)  \$8.00
	Contributor address; City; State; Zip Code  Austin, TX 78748	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Leander
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Huber, Patrick (Mr.)	Amount of Contribution (\$)  \$8.00
	Contributor address; City; State; Zip Code  Austin, TX 78748	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Leander

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/18 Rpt: 10/22
<b>2</b> FILER NAME Leander Firefighters for Responsible Government		<b>3</b> Filer ID (Ethics Commission Filers) 00066422
<b>4</b> Date 09/27/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hughes, Matt (Mr.)	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>6</b> Contributor address; City; State; Zip Code  Leander, TX 78641		
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) City of Leander
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hughes, Matt (Mr.)	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Leander, TX 78641		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Leander
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hughes, Matt (Mr.)	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Leander, TX 78641		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Leander
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Karnes, Jim (Mr.)	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Leander, TX 78641		
Principal occupation / Job title (See Instructions) Battalion Chief		Employer (See Instructions) City of Leander
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Karnes, Jim (Mr.)	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Leander, TX 78641		
Principal occupation / Job title (See Instructions) Battalion Chief		Employer (See Instructions) City of Leander

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/18 Rpt: 11/22
<b>2</b> FILER NAME Leander Firefighters for Responsible Government		<b>3</b> Filer ID (Ethics Commission Filers) 00066422
<b>4</b> Date 10/25/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Karnes, Jim (Mr.)	<b>7</b> Amount of Contribution (\$)
	<b>6</b> Contributor address; City; State; Zip Code  Leander, TX 78641	
<b>8</b> Principal occupation / Job title (See Instructions) Battalion Chief		<b>9</b> Employer (See Instructions) City of Leander
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Karr, Scott (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Leander, TX 78641	
Principal occupation / Job title (See Instructions) Fire Lieutenant		Employer (See Instructions) City of Leander
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Karr, Scott (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Leander, TX 78641	
Principal occupation / Job title (See Instructions) Fire Lieutenant		Employer (See Instructions) City of Leander
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Karr, Scott (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Leander, TX 78641	
Principal occupation / Job title (See Instructions) Fire Lieutenant		Employer (See Instructions) City of Leander
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mayberry, Joe (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Salado, TX 76571	
Principal occupation / Job title (See Instructions) Fire Lieutenant		Employer (See Instructions) City of Leander

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/18 Rpt: 12/22
<b>2</b> FILER NAME Leander Firefighters for Responsible Government		<b>3</b> Filer ID (Ethics Commission Filers) 00066422
<b>4</b> Date 10/11/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mayberry, Joe (Mr.)	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  Salado, TX 76571	
<b>8</b> Principal occupation / Job title (See Instructions) Fire Lieutenant		<b>9</b> Employer (See Instructions) City of Leander
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mayberry, Joe (Mr.)	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  Salado, TX 76571	
Principal occupation / Job title (See Instructions) Fire Lieutenant		Employer (See Instructions) City of Leander
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Niere, David (Mr.)	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Georgetown, TX 78626	
Principal occupation / Job title (See Instructions) DPO		Employer (See Instructions) City of Leander
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Niere, David (Mr.)	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Georgetown, TX 78626	
Principal occupation / Job title (See Instructions) DPO		Employer (See Instructions) City of Leander
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Niere, David (Mr.)	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Georgetown, TX 78626	
Principal occupation / Job title (See Instructions) DPO		Employer (See Instructions) City of Leander

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 10/18 Rpt: 13/22
<b>2</b> FILER NAME Leander Firefighters for Responsible Government		<b>3</b> Filer ID (Ethics Commission Filers) 00066422
<b>4</b> Date 09/27/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Perna, Joseph (Mr.)	<b>7</b> Amount of Contribution (\$)  \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  Lago Vista, TX 78645	
<b>8</b> Principal occupation / Job title (See Instructions) Fire Lieutenant		<b>9</b> Employer (See Instructions) City of Leander
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Perna, Joseph (Mr.)	Amount of Contribution (\$)  \$5.00
	Contributor address; City; State; Zip Code  Lago Vista, TX 78645	
Principal occupation / Job title (See Instructions) Fire Lieutenant		Employer (See Instructions) City of Leander
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Perna, Joseph (Mr.)	Amount of Contribution (\$)  \$5.00
	Contributor address; City; State; Zip Code  Lago Vista, TX 78645	
Principal occupation / Job title (See Instructions) Fire Lieutenant		Employer (See Instructions) City of Leander
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Petty, Eric (Mr.)	Amount of Contribution (\$)  \$5.00
	Contributor address; City; State; Zip Code  Leander, TX 78641	
Principal occupation / Job title (See Instructions) DPO		Employer (See Instructions) City of Leander
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Petty, Eric (Mr.)	Amount of Contribution (\$)  \$5.00
	Contributor address; City; State; Zip Code  Leander, TX 78641	
Principal occupation / Job title (See Instructions) DPO		Employer (See Instructions) City of Leander

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 11/18 Rpt: 14/22
<b>2</b> FILER NAME Leander Firefighters for Responsible Government		<b>3</b> Filer ID (Ethics Commission Filers) 00066422
<b>4</b> Date 10/25/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Petty, Eric (Mr.)	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>6</b> Contributor address; City; State; Zip Code  Leander, TX 78641		
<b>8</b> Principal occupation / Job title (See Instructions) DPO		<b>9</b> Employer (See Instructions) City of Leander
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Piechowski, Matthew (Mr.)	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Liberty Hill, TX 78642		
Principal occupation / Job title (See Instructions) Fire Lieutenant		Employer (See Instructions) City of Leander
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Piechowski, Matthew (Mr.)	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Liberty Hill, TX 78642		
Principal occupation / Job title (See Instructions) Fire Lieutenant		Employer (See Instructions) City of Leander
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Piechowski, Matthew (Mr.)	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Liberty Hill, TX 78642		
Principal occupation / Job title (See Instructions) Fire Lieutenant		Employer (See Instructions) City of Leander
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Popovic, Nick (Mr.)	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Cedar Park, TX 78613		
Principal occupation / Job title (See Instructions) Fire Lieutenant		Employer (See Instructions) City of Leander

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 12/18 Rpt: 15/22
<b>2</b> FILER NAME Leander Firefighters for Responsible Government		<b>3</b> Filer ID (Ethics Commission Filers) 00066422
<b>4</b> Date 10/11/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Popovic, Nick (Mr.)	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>6</b> Contributor address; City; State; Zip Code  Cedar Park, TX 78613		
<b>8</b> Principal occupation / Job title (See Instructions) Fire Lieutenant		<b>9</b> Employer (See Instructions) City of Leander
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Popovic, Nick (Mr.)	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Cedar Park, TX 78613		
Principal occupation / Job title (See Instructions) Fire Lieutenant		Employer (See Instructions) City of Leander
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pozgai, Mark (Mr.)	Amount of Contribution (\$)  \$1.50
Contributor address; City; State; Zip Code  Lorena, TX 76655		
Principal occupation / Job title (See Instructions) Fire Lieutenant		Employer (See Instructions) City of Leander
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pozgai, Mark (Mr.)	Amount of Contribution (\$)  \$1.50
Contributor address; City; State; Zip Code  Lorena, TX 76655		
Principal occupation / Job title (See Instructions) Fire Lieutenant		Employer (See Instructions) City of Leander
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pozgai, Mark (Mr.)	Amount of Contribution (\$)  \$1.50
Contributor address; City; State; Zip Code  Lorena, TX 76655		
Principal occupation / Job title (See Instructions) Fire Lieutenant		Employer (See Instructions) City of Leander

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 13/18 Rpt: 16/22
<b>2</b> FILER NAME Leander Firefighters for Responsible Government		<b>3</b> Filer ID (Ethics Commission Filers) 00066422
<b>4</b> Date 09/27/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rodriguez, Anthony (Mr.)	<b>7</b> Amount of Contribution (\$) \$5.00
<b>6</b> Contributor address; City; State; Zip Code  Leander, TX 78641		
<b>8</b> Principal occupation / Job title (See Instructions) Fire Lieutenant		<b>9</b> Employer (See Instructions) City of Leander
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rodriguez, Anthony (Mr.)	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code  Leander, TX 78641		
Principal occupation / Job title (See Instructions) Fire Lieutenant		Employer (See Instructions) City of Leander
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rodriguez, Anthony (Mr.)	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code  Leander, TX 78641		
Principal occupation / Job title (See Instructions) Fire Lieutenant		Employer (See Instructions) City of Leander
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sanchez, Brandon (Mr.)	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code  San Antonio, TX 78252		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Leander
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sanchez, Brandon (Mr.)	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code  San Antonio, TX 78252		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Leander



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 14/18 Rpt: 17/22
<b>2</b> FILER NAME Leander Firefighters for Responsible Government		<b>3</b> Filer ID (Ethics Commission Filers) 00066422
<b>4</b> Date 10/25/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sanchez, Brandon (Mr.)	<b>7</b> Amount of Contribution (\$) \$5.00
<b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78252		
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) City of Leander
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Shapiro, Matt (Mr.)	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  Leander, TX 78641		
Principal occupation / Job title (See Instructions) Fire Lieutenant		Employer (See Instructions) City of Leander
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Shapiro, Matt (Mr.)	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  Leander, TX 78641		
Principal occupation / Job title (See Instructions) Fire Lieutenant		Employer (See Instructions) City of Leander
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Shapiro, Matt (Mr.)	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  Leander, TX 78641		
Principal occupation / Job title (See Instructions) Fire Lieutenant		Employer (See Instructions) City of Leander
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith, Robert (Mr.)	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code  Austin, TX 78727		
Principal occupation / Job title (See Instructions) Fire Lieutenant		Employer (See Instructions) City of Leander

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 15/18 Rpt: 18/22
<b>2</b> FILER NAME Leander Firefighters for Responsible Government		<b>3</b> Filer ID (Ethics Commission Filers) 00066422
<b>4</b> Date 10/11/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith, Robert (Mr.)	<b>7</b> Amount of Contribution (\$) \$2.50
<b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78727		
<b>8</b> Principal occupation / Job title (See Instructions) Fire Lieutenant		<b>9</b> Employer (See Instructions) City of Leander
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith, Robert (Mr.)	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code  Austin, TX 78727		
Principal occupation / Job title (See Instructions) Fire Lieutenant		Employer (See Instructions) City of Leander
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thomas, Amy (Ms.)	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code  Hutto, TX 78634		
Principal occupation / Job title (See Instructions) Lieutenant		Employer (See Instructions) City of Leander
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thomas, Amy (Ms.)	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code  Hutto, TX 78634		
Principal occupation / Job title (See Instructions) Lieutenant		Employer (See Instructions) City of Leander
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thomas, Amy (Ms.)	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code  Hutto, TX 78634		
Principal occupation / Job title (See Instructions) Lieutenant		Employer (See Instructions) City of Leander

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 16/18 Rpt: 19/22
<b>2</b> FILER NAME Leander Firefighters for Responsible Government		<b>3</b> Filer ID (Ethics Commission Filers) 00066422
<b>4</b> Date 09/27/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thomas, Micah (Mr.)	<b>7</b> Amount of Contribution (\$)  \$2.50
	<b>6</b> Contributor address; City; State; Zip Code  Holland, TX 76534	
<b>8</b> Principal occupation / Job title (See Instructions) DPO		<b>9</b> Employer (See Instructions) City of Leander
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thomas, Micah (Mr.)	Amount of Contribution (\$)  \$2.50
	Contributor address; City; State; Zip Code  Holland, TX 76534	
Principal occupation / Job title (See Instructions) DPO		Employer (See Instructions) City of Leander
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thomas, Micah (Mr.)	Amount of Contribution (\$)  \$2.50
	Contributor address; City; State; Zip Code  Holland, TX 76534	
Principal occupation / Job title (See Instructions) DPO		Employer (See Instructions) City of Leander
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thurman, Jason (Mr.)	Amount of Contribution (\$)  \$5.00
	Contributor address; City; State; Zip Code  Liberty Hill, TX 78642	
Principal occupation / Job title (See Instructions) DPO		Employer (See Instructions) City of Leander
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thurman, Jason (Mr.)	Amount of Contribution (\$)  \$5.00
	Contributor address; City; State; Zip Code  Liberty Hill, TX 78642	
Principal occupation / Job title (See Instructions) DPO		Employer (See Instructions) City of Leander

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 17/18 Rpt: 20/22
<b>2</b> FILER NAME Leander Firefighters for Responsible Government		<b>3</b> Filer ID (Ethics Commission Filers) 00066422
<b>4</b> Date 10/25/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thurman, Jason (Mr.)	<b>7</b> Amount of Contribution (\$) \$5.00
<b>6</b> Contributor address; City; State; Zip Code  Liberty Hill, TX 78642		
<b>8</b> Principal occupation / Job title (See Instructions) DPO		<b>9</b> Employer (See Instructions) City of Leander
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wade, Ty (Mr.)	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code  Leander, TX 78641		
Principal occupation / Job title (See Instructions) Fire Lieutenant		Employer (See Instructions) City of Leander
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wade, Ty (Mr.)	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code  Leander, TX 78641		
Principal occupation / Job title (See Instructions) Fire Lieutenant		Employer (See Instructions) City of Leander
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wade, Ty (Mr.)	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code  Leander, TX 78641		
Principal occupation / Job title (See Instructions) Fire Lieutenant		Employer (See Instructions) City of Leander
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Witt, John (Mr.)	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code  Leander, TX 78641		
Principal occupation / Job title (See Instructions) DPO		Employer (See Instructions) City of Leander

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 18/18 Rpt: 21/22
<b>2</b> FILER NAME Leander Firefighters for Responsible Government		<b>3</b> Filer ID (Ethics Commission Filers) 00066422
<b>4</b> Date 10/11/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Witt, John (Mr.)	<b>7</b> Amount of Contribution (\$) \$2.50
	<b>6</b> Contributor address; City; State; Zip Code  Leander, TX 78641	
<b>8</b> Principal occupation / Job title (See Instructions) DPO		<b>9</b> Employer (See Instructions) City of Leander
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wobus, Dustin (Mr.)	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  Bastrop, TX 78602	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Leander
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wobus, Dustin (Mr.)	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  Bastrop, TX 78602	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Leander
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wobus, Dustin (Mr.)	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  Bastrop, TX 78602	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Leander

# 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.

<b>1</b> Total pages Schedule F1: Sch: 1/1 Rpt: 22/22	<b>2</b> FILER NAME Leander Firefighters for Responsible Government	<b>3</b> Filer ID (Ethics Commission Filers) 00066422
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<b>4</b> Date 10/18/2024	<b>5</b> Payee name Texas Ethics Commission
-----------------------------	------------------------------------------------

<b>6</b> Amount (\$) \$500.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 201 E 14th St #10 Austin, TX 78701
---------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Late fee fine.
---------------------------------	---------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---------------------------------------------------------------------	-----------------------------	---------------	-------------

Date 10/16/2024	Payee name United States Postal Service
--------------------	--------------------------------------------

Amount (\$) \$182.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 801 S Highway 183  Leander, TX 78641-1991
------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Post office box.
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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