## MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

## FORM MPAC COVER SHEET PG 1

The MPAC Instruction	Guide explains how to complete this form.	1 Filer ID (Ethics Commission Filers) 00059068	2 Total pages filed: 5			
3 COMMITTEE NAME		-	OFFICE USE ONLY			
Grand Prairie Police Association PAC						
			11/13/2024			
4 COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #;	CITY; STATE; ZIP				
ADDICESS	PoBox 531184					
Change of Address	Grand Prairie, TX 75053		Date Hand-delivered or Date Postmarked			
5 CAMPAIGN	MS / MRS / MR FIRST	MI				
TREASURER NAME	Mr. Anthony	Heath	Receipt # Amount			
	NICKNAME LAST	SUFFIX	Date Processed			
		301112				
	Wester		Date Imaged			
6 CAMPAIGN		APT / SUITE #; CITY; ST/	ATE; ZIP CODE			
TREASURER	STREET ADDRESS (NO PO BOX PLEASE); Po Box 531184	APT/SUITE#, CITT, ST/	ATE, ZIP CODE			
STREET	P0 B0x 531184					
ADDRESS (Residence or Business)						
, , , , , , , , , , , , , , , , , , ,	Grand Prairie, TX 75053					
7 CAMPAIGN	STREET ADDRESS OR PO BOX;	APT / SUITE #; CITY; ST.	ATE; ZIP CODE			
TREASURER MAILING	Po Box 531184					
ADDRESS						
Change of Address	Grand Prairie, TX 75053					
8 CAMPAIGN	AREA CODE PHONE NUMBER	EXTENSION				
TREASURER						
PHONE	(972) 237-4557					
9 REPORT TYPE		10th day after campaign				
	X Monthly	treasurer termination	Dissolution (Attach PAC-DR)			
10 MONTHLY						
REPORT FILING DEADLINE	January 5 April	5 July 5	October 5			
DEADLINE	February 5 May	5 August 5	X November 5			
	March 5 June	e 5 September 5	December 5			
11 PERIOD	Month Day Year	Month	Day Year			
COVERED	09/26/2024	THROUGH 10/25/2	2024			
GO TO PAGE 2						
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## MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

# FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME 13 Fil		13 Filer ID	er ID (Ethics Commission Filers)	
Grand Prairie Police Association PAC 000		00059068		
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Маланияа	A. Supported		
	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.)		i	
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	<ul> <li>POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY)</li> <li>qualifies for the higher itemization threshold</li> </ul>	\$	0.00
	2. TOTAL POLITICA	L CONTRIBUTIONS	\$	0.00
	(OTHER THAN PLEI	DGES, LOANS, OR GUARANTEES OF LOANS)	Ť	0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL C OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST I G PERIOD	DAY \$	0.00
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT	•		•	
		I swear, or affirm, under penalty of per true and correct and includes all inforr under Title 15, Election Code.		
		Mr. Anthony	Heath Wester	
			npaign Treasure	r
AFFIX NOTARY	STAMP / SEAL ABOVE			
Sworn to and subscribed	before me by the said	, tł	nis the	day
		which, witness my hand and seal of office.		uuy
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title of officer	administering oath
l Forms provided by Texas E	thics Commission	www.ethics.state.tx.us		Version V4.1.0.5dd2ace2

## FORM MPAC COVER SHEET PG 3

3 of 5

		18 Filer ID	(Ethics Commission Filers)	
Grand Prairie Police Association PAC 00059068				
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT	
1. X	1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		<b>\$</b> 0.00	
2. X	2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS			
3. X	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$ 0.00	
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABC ORGANIZATION	\$		
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA LABOR ORGANIZATION	\$		
6.	6. SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION			
7.	7. SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION			
8.	8. SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION			
9. X	9. X SCHEDULE E: LOANS		\$ 0.00	
10.	10. SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS		\$	
11. X	11. X SCHEDULE F2: UNPAID INCURRED OBLIGATIONS			
12. X	12. X SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS			
13. X	13. X SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 0.00	
14.	14. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS		\$	
15.	15. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER		\$	

**SUBTOTALS - MPAC** 

#### **PLEDGED CONTRIBUTIONS** 1 Total pages Schedule B: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 4/5 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Grand Prairie Police Association PAC 00059068 4 \$ TOTAL OF UNITEMIZED PLEDGES In-kind description 5 Date 6 Full name of pledgor out-of-state PAC (ID#: 8 Amount of 9 1 (If applicable)

City; State; Zip Code

.....

7 Pledgor Address;

10 Principal occupation / Job title (See Instructions)

### SCHEDULE **B**

Check if travel outside of Texas. Complete Schedule T

pledge (\$)

11 Employer (See Instructions)

0.00

LOANS SCHEDULE E							
The Instruction Guide explains how to complete this form.	ages Schedule E: /1 Rpt: 5/5						
Grand Prairie Police Association PAC	<ul><li>3 Filer ID</li><li>000590</li></ul>	ID (Ethics Commission Filers) 59068					
<sup>4</sup> TOTAL OF UNITEMIZED LOANS		\$	0.00				
5 Date of loan 7 Name of lender Out-of-state PAC (ID#:	)	9 Loan Amount (\$	;)				
6 Is lender a financial institution? 8 Lender address; City; State; Zip Code		10 Interest Rate					
		<b>11</b> Maturity Date					
12 Principal occupation / Job title (See Instructions)       13 Employer (See Instructions)							
14 Description of Collateral     15 Check if personal funds were       None	re deposited	d into political accoun (See Instruction					
16 GUARANTOR INFORMATION     17 Name of guarantor		19 Amount Guaran	teed (\$)				
not applicable <b>18</b> Guarantor address; City; State; Zip Code							
20 Principal occupation 21 Employer (See Instructions)	)	1					