#### 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) 00063860 3 COMMITTEE NAME **OFFICE USE ONLY** Cedar Park Police Association Political Action Committee Date Received **ELECTRONICALLY FILED** 12/07/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 911 Quest Pkwy. Change of Address Cedar Park, TX 78613 Date Hand-delivered or Date Postmarked MS / MRS / MR **CAMPAIGN FIRST** MI **TREASURER** Receipt # Amount Mr. Christopher W. NAME Date Processed **NICKNAME** LAST **SUFFIX Nichols** Date Imaged CAMPAIGN APT / SUITE #; STREET ADDRESS (NO PO BOX PLEASE); CITY; STATE; ZIP CODE TREASURER 911 Quest Pkwy STREET **ADDRESS** (Residence or Business) Cedar Park, TX 78613 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 911 Quest Pkwy MAILING **ADDRESS** Change of Address Cedar Park, TX 78613 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (512) 415-9726 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY X January 5 April 5 July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 August 5 November 5 September 5 December 5 March 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 11/26/2024 12/25/2024

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## MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

# FORM MPAC COVER SHEET PG 2

2 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Cedar Park Police A	ssociation Political Action	Committee	00063860	)
4 COMMITTEE ACTIVITY	1. Candidates	A. Supported		
ACTIVITY	(Identify by name or, if applicable, classify by party.)			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2 Manauran	A. Supported		
	Measures     (Describe by date and location	A. Supported		
	of election and nature of issue.)			
		B. Opposed		
	Officeholders     Assisted			
	(Identify by name or, if applicable, classify by party.)			
.5 CONTRIBUTION TOTALS	PLEDGES, LOANS,	O POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY)	\$	0.00
	1	qualifies for the higher itemization threshold		
	2. TOTAL POLITICA		\$	0.00
EXPENDITURE	(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)  3. TOTAL UNITEMIZED POLITICAL EXPENDITURES			
TOTALS			\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	0.00
CONTRIBUTION BALANCE		5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD			0.00
6 AFFIDAVIT			<u> </u>	
		I swear, or affirm, under penalty of pr true and correct and includes all info under Title 15, Election Code.	erjury, that the rmation require	accompanying report is d to be reported by me
		Mr. Christon	oher W. Nicho	le.
		Signature of Ca		
		o.g. ata. o o o	ampaign model	
AFFIX NOTA	RY STAMP / SEAL ABOVE			
		,	this the	day
of	, 20, to certify	which, witness my hand and seal of office.		
Cionatura -t -tt:	administarias asti-	Drinted name of officer administrative and	Tida - 4 - 60	oor administarias s -+!-
Signature of officer	administering oath	Printed name of officer administering oath	TILLE OF OTT	cer administering oath

#### **SUBTOTALS - MPAC**

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

				0 01 0
17 COMMIT	(Ethics C	Commission Filers)		
19 SCHEDU NAME OF	SUI	BTOTAL AMOUNT		
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	0.00	
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00
3. X	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	0.00
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	R	\$	
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORAL LABOR ORGANIZATION	TION 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 O	ORGANIZATION	\$	
9. X	SCHEDULE E: LOANS		\$	0.00
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$	0.00
11. X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00
12. X	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	0.00
13. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	

PLE	DGED CONTRIBU	TIONS			sc	HEDULE B	
The Instruction Guide explains how to complete this form.				1	1 Total pages Schedule B: Sch: 1/1 Rpt: 4/5		
2 FILER N	AME			3	Filer ID (Ethics Commissi	on Filers)	
Cedar P	ark Police Association Politic	al Action Committee			00063860		
4 TOTAL	TOTAL OF UNITEMIZED PLEDGES				\$	0.00	
<b>5</b> Date	6 Full name of pledgorout-of-state PAC (ID#:		_) 8	Amount of 9 In-kind	description		
	7 Pledgor Address;	City; State; Zip Cod	e		pledge (\$) (If a	oplicable)	
				[	Check if travel outside of Texas.	Complete Schedule T.	
10 Principal	occupation / Job title (See Instru	ctions)	11 Employer (See In	structi	ons)		

l	LOANS					SCHEDULE E		
-	The Instruction Guide explains how to complete this form.				l l	1 Total pages Schedule E: Sch: 1/1 Rpt: 5/5		
	FILER NAME  Cedar Park Police Association Political Action Committee			3 Filer ID 00063	(Ethics Commission Filers)			
4 _	TOTAL OF UN	IITEMIZED LOANS				\$ 0.00		
5 [	Date of loan	7 Name of lender	out-of-state PA	C (ID#:		9 Loan Amount (\$)		
f	s lender a inancial nstitution?	8 Lender address;	City; State;	Zip Code		10 Interest Rate		
						11 Maturity Date		
<b>12</b> F	Principal occupation	on / Job title (See Instruction	s)	13 Employer (See Instru	uctions)	1		
14 [	Description of Col	ateral		15 Check if personal fu	nds were deposite	d into political account (See Instructions)		
	GUARANTOR NFORMATION	17 Name of guarantor				19 Amount Guaranteed (\$)		
	not applicable	18 Guarantor address;	City; State;	Zip Code				
20 F	Principal occupation	on .		21 Employer (See Instru	uctions)			