#### 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) 00034667 3 COMMITTEE NAME **OFFICE USE ONLY** Texas Assn. Of Pawnbrokers PAC Date Received **ELECTRONICALLY FILED** 01/06/2025 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** P.O. Box 400 Change of Address Evant, TX 76525-0400 Date Hand-delivered or Date Postmarked MS / MRS / MR **CAMPAIGN FIRST** MI **TREASURER** Receipt # Amount Mr. Angelo P. NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Zottarelli CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE TREASURER P.O. Box 400 STREET **ADDRESS** (Residence or Business) Evant, TX 76525-0400 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 405 W. 14th Street MAILING **ADDRESS** Change of Address Austin, TX 78701 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (512) 422-3123 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY X January 5 April 5 October 5 REPORT FILING July 5 **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

## MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

# FORM MPAC COVER SHEET PG 2

			1		
L2 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)	
Texas Assn. Of Pav	vnbrokers PAC		00034667		
4 COMMITTEE	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 Magguros	A. Supported			
	Measures     (Describe by date and location)	A. Supported			
	of election and nature of issue.)				
		B. Opposed			
	3. Officeholders				
	Assisted (Identify by name or, if applicable, classify by party.)				
5 CONTRIBUTION	1 TOTAL LIMITEMIZE	D POLITICAL CONTRIBUTIONS (OTHER THAN			
TOTALS	PLEDGES, LOANS, CONTRIBUTIONS N	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)      check here if this report qualifies for the higher itemization threshold			
		AL CONTRIBUTIONS	\$	0.00	
	(OTHER THAN PLE	(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)			
EXPENDITURE TOTALS	3. TOTAL UNITEMIZE	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES			
	4. TOTAL POLITICA	AL 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			
6 AFFIDAVIT			<u> </u>		
		I swear, or affirm, under penalty of p true and correct and includes all info under Title 15, Election Code.	erjury, that the a	accompanying report is d to be reported by me	
		Mr. Angel	o P. Zottarelli		
			ampaign Treasu	ıror	
		Signature of Co	ampaign measu	ii Ci	
AFFIX NOTA	RY STAMP / SEAL ABOVE				
Sworn to and subscrib	ped 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 office	cer administering oath	

#### **SUBTOTALS - MPAC**

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

				0 01 0		
17 COMMITT	(Ethics Commission Filers)					
Texas As	_					
19 SCHEDULE SUBTOTALS  NAME OF SCHEDULE				SUBTOTAL 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 LABOURGANIZATION	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION				
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	\$				
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	\$				
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$			
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (	ORGANIZATION	\$			
9. X	SCHEDULE E: LOANS		\$	0.00		
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$	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 TO FILER	RETURNED	\$			
			-			

PLE	OGED CONTRIBUTIONS		SCHEDULE B
т	he Instruction Guide explains how to	1 Total pages Schedule B: Sch: 1/1 Rpt: 4/5	
2 FILER NAME Texas Assn. Of Pawnbrokers PAC			3 Filer ID (Ethics Commission Filers) 00034667
<u></u>	OF UNITEMIZED PLEDGES		\$ 0.0
<b>5</b> Date	6 Full name of pledgor out-of-state	PAC (ID#:	8 Amount of pledge (\$)   9 In-kind description (If applicable)
	7 Pledgor Address; City; State;	Zip Code	
10 Principal	occupation / Job title (See Instructions)	11 Employer (See In	Check if travel outside of Texas. Complete Schedule
20 i illioipai	coodpation, our title (eee metrodione)	Linployer (See in	su delions)

LOA	NS							so	CHEDULE	E
The Instruction Guide explains how to complete this form.				1	1 Total pages Schedule E: Sch: 1/1 Rpt: 5/5					
2 FILER NAME Texas Assn. Of Pawnbrokers PAC					3 Filer ID (Ethics Commission Filers) 00034667					
4 TOTA	L OF UN	IITEMIZED LOANS				I		\$		0.00
5 Date of	loan	7 Name of lender	out-o	of-state PA	C (ID#:		)	9 Loan An	nount (\$)	
6 Is lende financia institutio	ય	8 Lender address;	City;	State;	Zip Code			10 Interest		
								11 Maturity	Date	
<b>12</b> Principa	al occupation	on / Job title (See Instruct	ions)		13 Employer (See Instructions)					
14 Descrip		ateral			15 Check if personal funds were deposited into political account (See Instructions)					
16 GUARA	ANTOR MATION	17 Name of guarantor						19 Amount	Guaranteed	(\$)
not	applicable	<b>18</b> Guarantor address;	City;	State;	Zip Code					
20 Principa	al occupation	on			21 Employer (See Ins	structions)				