

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC
COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00015648	2 Total pages filed: 40
3 COMMITTEE NAME Texas State Assn. Of Fire Fighters Action Committee		OFFICE USE ONLY	
		Date Received ELECTRONICALLY FILED 01/15/2025	
		Date Hand-delivered or Date Postmarked	
		Receipt #	Amount
		Date Processed	
		Date Imaged	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1011 San Jacinto Suite 411 Austin, TX 78701		
	5 CAMPAIGN TREASURER NAME MS / MRS / MR FIRST MI Mr. Glenn E.	NICKNAME LAST SUFFIX Deshields	
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1011 San Jacinto Suite 411 Austin, TX 78701		
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1106 Lavaca Suite 100 Austin, TX 78701		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 947-1349		
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff		
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year 10/27/2024 12/31/2024		
11 ELECTION	ELECTION DATE Month Day Year	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special	

GO TO PAGE 2

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Texas State Assn. Of Fire Fighters Action Committee	13 Filer ID (Ethics Commission Filers) 00015648
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
		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	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 5,372.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 25,750.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 21,429.56
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 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. Glenn E. Deshields

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 - GPAC**FORM GPAC**
COVER SHEET PG 3
3 of 40

17 COMMITTEE NAME Texas State Assn. Of Fire Fighters Action Committee		18 Filer ID 00015648	(Ethics Commission Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	5,372.00
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	\$	25,750.00
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 checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	227.23
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/27 Rpt: 4/40
2 FILER NAME Texas State Assn. Of Fire Fighters Action Committee		3 Filer ID (Ethics Commission Filers) 00015648
4 Date 12/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alvarado, Aidan	7 Amount of Contribution (\$) \$60.00
6 Contributor address; City; State; Zip Code Laredo, TX 78045		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Laredo Fire Department
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alvarado, Aidan	Amount of Contribution (\$) \$60.00
Contributor address; City; State; Zip Code Laredo, TX 78045		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Laredo Fire Department
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayala, Matthew	Amount of Contribution (\$) \$60.00
Contributor address; City; State; Zip Code Burleson, TX 76028		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Burleson
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayala, Matthew	Amount of Contribution (\$) \$60.00
Contributor address; City; State; Zip Code Burleson, TX 76028		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Burleson
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayala, Matthew	Amount of Contribution (\$) \$60.00
Contributor address; City; State; Zip Code Burleson, TX 76028		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Burleson

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/27 Rpt: 5/40
2 FILER NAME Texas State Assn. Of Fire Fighters Action Committee		3 Filer ID (Ethics Commission Filers) 00015648
4 Date 12/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, Matthew <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75220	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cedar Hill Fire Department
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, Matthew <hr/> Contributor address; City; State; Zip Code Dallas, TX 75220	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cedar Hill Fire Department
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baldwin, Jeffrey <hr/> Contributor address; City; State; Zip Code Grand Prairie, TX 75052	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Grand Prairie Fire
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baldwin, Jeffrey <hr/> Contributor address; City; State; Zip Code Grand Prairie, TX 75052	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Grand Prairie Fire
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Batchelor, Colin <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) FireFighter		Employer (See Instructions) City Of Nederland

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/27 Rpt: 6/40
2 FILER NAME Texas State Assn. Of Fire Fighters Action Committee		3 Filer ID (Ethics Commission Filers) 00015648
4 Date 11/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Batchelor, Colin <hr/> 6 Contributor address; City; State; Zip Code Nederland, TX 77627	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) FireFighter		9 Employer (See Instructions) City Of Nederland
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Batchelor, Colin <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) FireFighter		Employer (See Instructions) City Of Nederland
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridges, Jordan <hr/> Contributor address; City; State; Zip Code Denton, TX 76209	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter/Paramedic		Employer (See Instructions) Hurst Fire Department
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridges, Jordan <hr/> Contributor address; City; State; Zip Code Denton, TX 76209	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter/Paramedic		Employer (See Instructions) Hurst Fire Department
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buford, Daniel <hr/> Contributor address; City; State; Zip Code Montgomery, TX 77316	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Bryan FD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/27 Rpt: 7/40
2 FILER NAME Texas State Assn. Of Fire Fighters Action Committee		3 Filer ID (Ethics Commission Filers) 00015648
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buford, Daniel <hr/> 6 Contributor address; City; State; Zip Code Montgomery, TX 77316	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Bryan FD
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burns, Ricky <hr/> Contributor address; City; State; Zip Code Blanchard, OK 73010	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Fire fighter		Employer (See Instructions) Chickasha
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burns, Ricky <hr/> Contributor address; City; State; Zip Code Blanchard, OK 73010	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Fire fighter		Employer (See Instructions) Chickasha
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapa, Alberto <hr/> Contributor address; City; State; Zip Code Laredo, TX 78045	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Fire Captain		Employer (See Instructions) Laredo Fire Department
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapa, Alberto <hr/> Contributor address; City; State; Zip Code Laredo, TX 78045	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Fire Captain		Employer (See Instructions) Laredo Fire Department

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/27 Rpt: 8/40
2 FILER NAME Texas State Assn. Of Fire Fighters Action Committee		3 Filer ID (Ethics Commission Filers) 00015648
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapa, Alberto <hr/> 6 Contributor address; City; State; Zip Code Laredo, TX 78045	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) Fire Captain		9 Employer (See Instructions) Laredo Fire Department
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clifton, William <hr/> Contributor address; City; State; Zip Code Liberty Hill, TX 78642-0289	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Round Rock
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Connick, Ed <hr/> Contributor address; City; State; Zip Code Waxahachie, TX 75168	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Waxahachie
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Connick, Ed <hr/> Contributor address; City; State; Zip Code Waxahachie, TX 75168	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Waxahachie
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cormier, Roy <hr/> Contributor address; City; State; Zip Code Houston, TX 77063	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Houston Fire

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/27 Rpt: 9/40
2 FILER NAME Texas State Assn. Of Fire Fighters Action Committee		3 Filer ID (Ethics Commission Filers) 00015648
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cormier, Roy <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77063	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Houston Fire
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crane, Larry (Dino) <hr/> Contributor address; City; State; Zip Code Telephone, TX 75488	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of McKinney
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crane, Larry (Dino) <hr/> Contributor address; City; State; Zip Code Telephone, TX 75488	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of McKinney
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deshields, Glenn <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) Lobbyist		Employer (See Instructions) Texas State Association of Fire Fighters
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deshields, Glenn <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) Lobbyist		Employer (See Instructions) Texas State Association of Fire Fighters

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/27 Rpt: 10/40
2 FILER NAME Texas State Assn. Of Fire Fighters Action Committee		3 Filer ID (Ethics Commission Filers) 00015648
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deshields, Glenn <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78731	7 Amount of Contribution (\$) \$70.00
8 Principal occupation / Job title (See Instructions) Lobbyist		9 Employer (See Instructions) Texas State Association of Fire Fighters
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dominguez, Gabriel <hr/> Contributor address; City; State; Zip Code Houston, TX 77080	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) HOUSTON PROFESSIONAL FIREFIGHTERS
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dominguez, Gabriel <hr/> Contributor address; City; State; Zip Code Houston, TX 77080	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) HFD
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dominguez, Gabriel <hr/> Contributor address; City; State; Zip Code Houston, TX 77080	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) HFD
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dominguez, Gabriel <hr/> Contributor address; City; State; Zip Code Houston, TX 77080	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) HOUSTON PROFESSIONAL FIREFIGHTERS		Employer (See Instructions) HOUSTON PROFESSIONAL FIREFIGHTERS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/27 Rpt: 11/40
2 FILER NAME Texas State Assn. Of Fire Fighters Action Committee		3 Filer ID (Ethics Commission Filers) 00015648
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dorris, Steve <hr/> 6 Contributor address; City; State; Zip Code Allen, TX 75013	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) DVP		9 Employer (See Instructions) TSAFF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dorris, Steve <hr/> Contributor address; City; State; Zip Code Allen, TX 75013	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunn, Curtis <hr/> Contributor address; City; State; Zip Code Arlington, TX 76013	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunn, Curtis <hr/> Contributor address; City; State; Zip Code Arlington, TX 76013	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farris, Jason <hr/> Contributor address; City; State; Zip Code Waxahachie, TX 75167	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Grand Prairie Fire

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/27 Rpt: 12/40
2 FILER NAME Texas State Assn. Of Fire Fighters Action Committee		3 Filer ID (Ethics Commission Filers) 00015648
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farris, Jason <hr/> 6 Contributor address; City; State; Zip Code Waxahachie, TX 75167	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Grand Prairie Fire
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fillmore, Chris <hr/> Contributor address; City; State; Zip Code Cypress, TX 77433	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cy-Fair Fire Department
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fillmore, Chris <hr/> Contributor address; City; State; Zip Code Cypress, TX 77433	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cy-Fair Fire Department
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friedrich, Joshua <hr/> Contributor address; City; State; Zip Code Corinth, TX 76210	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Lewisville
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friedrich, Joshua <hr/> Contributor address; City; State; Zip Code Corinth, TX 76210	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Lewisville

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/27 Rpt: 13/40
2 FILER NAME Texas State Assn. Of Fire Fighters Action Committee		3 Filer ID (Ethics Commission Filers) 00015648
4 Date 12/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fruge, Chase <hr/> 6 Contributor address; City; State; Zip Code Manchaca, TX 78652	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) Deputy Legislative Director		9 Employer (See Instructions) Texas State Association of Fire Fighters
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fruge, Chase <hr/> Contributor address; City; State; Zip Code Manchaca, TX 78652	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Deputy Legislative Director		Employer (See Instructions) Texas State Association of Fire Fighters
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Anthony <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78410	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) firefighter		Employer (See Instructions) Corpus Christi professional firefighters Association,
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Anthony <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78410	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) firefighter		Employer (See Instructions) Corpus Christi professional firefighters Association,
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Natalie <hr/> Contributor address; City; State; Zip Code Crowley, TX 76036	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) FWFD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/27 Rpt: 14/40
2 FILER NAME Texas State Assn. Of Fire Fighters Action Committee		3 Filer ID (Ethics Commission Filers) 00015648
4 Date 11/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Natalie	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code Crowley, TX 76036		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) FWFD
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glynn, Michael	Amount of Contribution (\$) \$60.00
Contributor address; City; State; Zip Code Fort Worth, TX 76244		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Fort Worth Fire Departmetn
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glynn, Michael	Amount of Contribution (\$) \$60.00
Contributor address; City; State; Zip Code Fort Worth, TX 76244		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Fort Worth Fire Departmetn
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gold, Ken	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Denton, TX 76210		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gold, Ken	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Denton, TX 76210		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/27 Rpt: 15/40
2 FILER NAME Texas State Assn. Of Fire Fighters Action Committee		3 Filer ID (Ethics Commission Filers) 00015648
4 Date 12/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gravett, Gregory <hr/> 6 Contributor address; City; State; Zip Code orange, TX 77630	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) city of Orange Fire dept
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gravett, Gregory <hr/> Contributor address; City; State; Zip Code orange, TX 77630	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) city of Orange Fire dept
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guedry, Garrett <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77706	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Firefighter/paramedic		Employer (See Instructions) Baytown Fire Department
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guedry, Garrett <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77706	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Firefighter/paramedic		Employer (See Instructions) Baytown Fire Department
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guerrero, Mario <hr/> Contributor address; City; State; Zip Code Brownsville, TX 78521-6304	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City Of Brownsville Fire Dept.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/27 Rpt: 16/40
2 FILER NAME Texas State Assn. Of Fire Fighters Action Committee		3 Filer ID (Ethics Commission Filers) 00015648
4 Date 12/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Stacy <hr/> 6 Contributor address; City; State; Zip Code Conroe, TX 77384	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Dispatch Supervisor		9 Employer (See Instructions) The Woodlands Fire Dept
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Stacy <hr/> Contributor address; City; State; Zip Code Conroe, TX 77384	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Dispatch Supervisor		Employer (See Instructions) The Woodlands Fire Dept
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanetho, Nicholas <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76107	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Fort Worth Fire Dept
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanetho, Nicholas <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76107	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Fort Worth Fire Dept
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hebert, Brian <hr/> Contributor address; City; State; Zip Code LUMBERTON, TX 77657	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Beaumont Fire/Rescue

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/27 Rpt: 17/40
2 FILER NAME Texas State Assn. Of Fire Fighters Action Committee		3 Filer ID (Ethics Commission Filers) 00015648
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hebert, Brian <hr/> 6 Contributor address; City; State; Zip Code LUMBERTON, TX 77657	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Beaumont Fire/Rescue
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, William <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77726	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Beaumont
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, William <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77726	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Beaumont Fire/Rescue
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, William <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77726	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Beaumont Fire/Rescue
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hendon, Cody <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77713	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Beaumont

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/27 Rpt: 18/40
2 FILER NAME Texas State Assn. Of Fire Fighters Action Committee		3 Filer ID (Ethics Commission Filers) 00015648
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hendon, Cody <hr/> 6 Contributor address; City; State; Zip Code Beaumont, TX 77713	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) City of Beaumont
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Michael <hr/> Contributor address; City; State; Zip Code Richards, TX 77873	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Conroe Professional Firefighters
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Michael <hr/> Contributor address; City; State; Zip Code Richards, TX 77873	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Conroe Professional Firefighters
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houchin, Tyler <hr/> Contributor address; City; State; Zip Code Odessa, TX 79762	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) OFR
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houchin, Tyler <hr/> Contributor address; City; State; Zip Code Odessa, TX 79762	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) OFR

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/27 Rpt: 19/40
2 FILER NAME Texas State Assn. Of Fire Fighters Action Committee		3 Filer ID (Ethics Commission Filers) 00015648
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huerta, Joseph	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Brownsville, TX 78520		
8 Principal occupation / Job title (See Instructions) Firefighter/Paramedic		9 Employer (See Instructions) Brownsville Fire Department
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huerta, Joseph	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Brownsville, TX 78520		
Principal occupation / Job title (See Instructions) Firefighter/Paramedic		Employer (See Instructions) Brownsville Fire Department
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lammons, Cody	Amount of Contribution (\$) \$60.00
Contributor address; City; State; Zip Code Mansfield, TX 76063		
Principal occupation / Job title (See Instructions) Firefighter/Medic		Employer (See Instructions) City of Hurst
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lammons, Cody	Amount of Contribution (\$) \$60.00
Contributor address; City; State; Zip Code Mansfield, TX 76063		
Principal occupation / Job title (See Instructions) Firefighter/Medic		Employer (See Instructions) City of Hurst
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leffelman, Jonathan	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Princeton, TX 75407		
Principal occupation / Job title (See Instructions) Firefighter Paramedic		Employer (See Instructions) Fairview Fire Rescue

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/27 Rpt: 20/40
2 FILER NAME Texas State Assn. Of Fire Fighters Action Committee		3 Filer ID (Ethics Commission Filers) 00015648
4 Date 11/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leffelman, Jonathan <hr/> 6 Contributor address; City; State; Zip Code Princeton, TX 75407	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Firefighter Paramedic		9 Employer (See Instructions) Fairview Fire Rescue
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Medrano, Mark <hr/> Contributor address; City; State; Zip Code Baytown, TX 77520	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Medrano, Mark <hr/> Contributor address; City; State; Zip Code Baytown, TX 77520	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Medrano, Mark <hr/> Contributor address; City; State; Zip Code Baytown, TX 77520	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) Baytown
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Medrano, Mark <hr/> Contributor address; City; State; Zip Code Baytown, TX 77520	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/27 Rpt: 21/40
2 FILER NAME Texas State Assn. Of Fire Fighters Action Committee		3 Filer ID (Ethics Commission Filers) 00015648
4 Date 12/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muniz, Paul	7 Amount of Contribution (\$) \$60.00
6 Contributor address; City; State; Zip Code San Antonio, TX 78217		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Bexar-Bulverde
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muniz, Paul	Amount of Contribution (\$) \$60.00
Contributor address; City; State; Zip Code San Antonio, TX 78217		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Bexar-Bulverde
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muniz, Paul	Amount of Contribution (\$) \$60.00
Contributor address; City; State; Zip Code San Antonio, TX 78217		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Bexar-Bulverde
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neitzel, Cory	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code MAGNOLIA, TX 77354		
Principal occupation / Job title (See Instructions) Fire Lieutenant		Employer (See Instructions) City of Conroe
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neitzel, Cory	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code MAGNOLIA, TX 77354		
Principal occupation / Job title (See Instructions) Fire Lieutenant		Employer (See Instructions) City of Conroe

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/27 Rpt: 22/40
2 FILER NAME Texas State Assn. Of Fire Fighters Action Committee		3 Filer ID (Ethics Commission Filers) 00015648
4 Date 11/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neitzel, Cory <hr/> 6 Contributor address; City; State; Zip Code MAGNOLIA, TX 77354	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Fire Lieutenant		9 Employer (See Instructions) City of Conroe
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neitzel, Cory <hr/> Contributor address; City; State; Zip Code MAGNOLIA, TX 77354	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Fire Lieutenant		Employer (See Instructions) City of Conroe
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neitzel, Cory <hr/> Contributor address; City; State; Zip Code MAGNOLIA, TX 77354	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Fire Lieutenant		Employer (See Instructions) City of Conroe
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nesom, Jeffery <hr/> Contributor address; City; State; Zip Code Taylor Landing, TX 77705	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Beaumont Professional Fire Fighters 399
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nesom, Jeffery <hr/> Contributor address; City; State; Zip Code Taylor Landing, TX 77705	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Beaumont Professional Fire Fighters 399

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/27 Rpt: 23/40
2 FILER NAME Texas State Assn. Of Fire Fighters Action Committee		3 Filer ID (Ethics Commission Filers) 00015648
4 Date 12/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nunez, Hector <hr/> 6 Contributor address; City; State; Zip Code Tyler, TX 75713	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Tyler
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nunez, Hector <hr/> Contributor address; City; State; Zip Code Tyler, TX 75713	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Tyler
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powers, Erin <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77380	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Public Relations Executive		Employer (See Instructions) Powers MediaWorks LLC
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powers, Erin <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77380	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Public Relations Executive		Employer (See Instructions) Powers MediaWorks LLC
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riddle, John <hr/> Contributor address; City; State; Zip Code Montgomery, TX 77356	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/27 Rpt: 24/40
2 FILER NAME Texas State Assn. Of Fire Fighters Action Committee		3 Filer ID (Ethics Commission Filers) 00015648
4 Date 11/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riddle, John	7 Amount of Contribution (\$) \$80.00
6 Contributor address; City; State; Zip Code Montgomery, TX 77356		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Retired
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salinas, Oscar	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code Alamo, TX 78516		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) McAllen
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salinas, Oscar	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code Alamo, TX 78516		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) McAllen
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sapp, Matt	Amount of Contribution (\$) \$60.00
Contributor address; City; State; Zip Code The Colony, TX 75056		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Frisco
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sapp, Matt	Amount of Contribution (\$) \$60.00
Contributor address; City; State; Zip Code The Colony, TX 75056		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Frisco

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/27 Rpt: 25/40
2 FILER NAME Texas State Assn. Of Fire Fighters Action Committee		3 Filer ID (Ethics Commission Filers) 00015648
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Secrest, Erik <hr/> 6 Contributor address; City; State; Zip Code Spring, TX 77382	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) The Woodlands Fire Department
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Secrest, Erik <hr/> Contributor address; City; State; Zip Code Spring, TX 77382	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) The Woodlands Fire Department
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Silva, Mike <hr/> Contributor address; City; State; Zip Code Mission, TX 78574	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Mission
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Silva, Mike <hr/> Contributor address; City; State; Zip Code Mission, TX 78574	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Mission
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Richard <hr/> Contributor address; City; State; Zip Code Spring, TX 77389	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) The Woodlands Fire Dept

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/27 Rpt: 26/40
2 FILER NAME Texas State Assn. Of Fire Fighters Action Committee		3 Filer ID (Ethics Commission Filers) 00015648
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Richard <hr/> 6 Contributor address; City; State; Zip Code Spring, TX 77389	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) The Woodlands Fire Dept
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevens, Mike <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79414	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevens, Mike <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79414	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Nathan <hr/> Contributor address; City; State; Zip Code Midland, TX 79707	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Midland Fire Department
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Nathan <hr/> Contributor address; City; State; Zip Code Midland, TX 79707	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Midland Fire Department

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/27 Rpt: 27/40
2 FILER NAME Texas State Assn. Of Fire Fighters Action Committee		3 Filer ID (Ethics Commission Filers) 00015648
4 Date 12/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Paul	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code El Paso, TX 79902		
8 Principal occupation / Job title (See Instructions) Fire Lieutenant		9 Employer (See Instructions) City of El Paso
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Paul	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code El Paso, TX 79902		
Principal occupation / Job title (See Instructions) Fire Lieutenant		Employer (See Instructions) City of El Paso
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Paul	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code El Paso, TX 79902		
Principal occupation / Job title (See Instructions) Fire Lieutenant		Employer (See Instructions) City of El Paso
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Villarreal, Juan	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code Mission, TX 78574		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Mission Fire Department
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Villarreal, Juan	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code Mission, TX 78574		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Mission Fire Department

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/27 Rpt: 28/40
2 FILER NAME Texas State Assn. Of Fire Fighters Action Committee		3 Filer ID (Ethics Commission Filers) 00015648
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vitolo, Al	7 Amount of Contribution (\$) \$60.00
6 Contributor address; City; State; Zip Code Wichita Falls, TX 76310		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Wichita Falls Fire Department
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vitolo, Al	Amount of Contribution (\$) \$60.00
Contributor address; City; State; Zip Code Wichita Falls, TX 76310		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Wichita Falls Fire Department
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Lance	Amount of Contribution (\$) \$60.00
Contributor address; City; State; Zip Code Midland, TX 79706		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Midland
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Lance	Amount of Contribution (\$) \$60.00
Contributor address; City; State; Zip Code Midland, TX 79706		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Midland
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whiteley, Robert	Amount of Contribution (\$) \$60.00
Contributor address; City; State; Zip Code Wichita Falls, TX 76301		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/27 Rpt: 29/40
2 FILER NAME Texas State Assn. Of Fire Fighters Action Committee		3 Filer ID (Ethics Commission Filers) 00015648
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whiteley, Robert <hr/> 6 Contributor address; City; State; Zip Code Wichita Falls, TX 76301	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitus, John <hr/> Contributor address; City; State; Zip Code Rockwall, TX 75087	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) McKinney Fire Department
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitus, John <hr/> Contributor address; City; State; Zip Code Rockwall, TX 75087	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) McKinney Fire Department
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Johnathan <hr/> Contributor address; City; State; Zip Code Marshall, TX 75762	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Marshall
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Johnathan <hr/> Contributor address; City; State; Zip Code Marshall, TX 75762	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Marshall

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/27 Rpt: 30/40
2 FILER NAME Texas State Assn. Of Fire Fighters Action Committee		3 Filer ID (Ethics Commission Filers) 00015648
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodrum, Brian	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Longview, TX 75603	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Longview fire Dept
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodrum, Brian	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Longview, TX 75603	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Longview fire Dept
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) alexander, Clifton	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Pflugerville, TX 78660	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Austin
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) alexander, Clifton	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Pflugerville, TX 78660	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Austin

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.

1	Total pages Schedule F1: Sch: 1/9 Rpt: 31/40	2	FILER NAME Texas State Assn. Of Fire Fighters Action Committee	3	Filer ID (Ethics Commission Filers) 00015648	
4	Date 12/05/2024	5	Payee name Adam Hinojosa Campaign			
6	Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	7	Payee address; City; State; Zip Code P.O. Box 18301 Corpus Christi, TX 78480			
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	
	Date 12/06/2024		Payee name Ana Hernandez Campaign			
	Amount (\$) \$750.00 <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code 1233 Mercury Drive Houston, TX 77029			
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	
	Date 12/06/2024		Payee name Ann Johnson Campaign			
	Amount (\$) \$750.00 <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code PO Box 56386 Houston, TX 77256			
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	

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.

1	Total pages Schedule F1: Sch: 2/9 Rpt: 32/40	2	FILER NAME Texas State Assn. Of Fire Fighters Action Committee	3	Filer ID (Ethics Commission Filers) 00015648
4	Date 12/06/2024	5	Payee name Armando Walle Campaign		
6	Amount (\$) \$750.00 <input type="checkbox"/> Expenditure from corporate funds	7	Payee address; City; State; Zip Code 4826 Hollybrook Lane Houston, TX 77039		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
	Date 12/06/2024	Payee name Brad Buckley Campaign			
	Amount (\$) \$750.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1321 Pershing Drive Killeen, TX 76549			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
	Date 11/08/2024	Payee name Caroline Harris Campaign			
	Amount (\$) \$750.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 700 Round Rock, TX 78680			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	

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.

1 Total pages Schedule F1: Sch: 3/9 Rpt: 33/40	2 FILER NAME Texas State Assn. Of Fire Fighters Action Committee	3 Filer ID (Ethics Commission Filers) 00015648
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4 Date 11/08/2024	5 Payee name Cecil Bell Campaign
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6 Amount (\$) \$750.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 18230 FM 1488, Suite 312 Magnolia, TX 77354
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/08/2024	Payee name Cesar Blanco Campaign
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Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5630 Gateway E Suite 10J El Paso, TX 79905
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/06/2024	Payee name Charles Cunningham Campaign
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Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 114 West Higgins Humble, TX 77338
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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.

1 Total pages Schedule F1: Sch: 4/9 Rpt: 34/40	2 FILER NAME Texas State Assn. Of Fire Fighters Action Committee	3 Filer ID (Ethics Commission Filers) 00015648
4 Date 11/13/2024	5 Payee name Charles Perry Campaign	
6 Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. Box 94806 Lubbock, TX 79493	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/10/2024	Payee name Dade Phelan Campaign	
Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 848 Nederland, TX 77627	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/08/2024	Payee name David Spiller Campaign	
Amount (\$) \$750.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 447 Jacksboro, TX 76458	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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.

1 Total pages Schedule F1: Sch: 5/9 Rpt: 35/40	2 FILER NAME Texas State Assn. Of Fire Fighters Action Committee	3 Filer ID (Ethics Commission Filers) 00015648
4 Date 12/05/2024	5 Payee name Denise Villalobos Campaign	
6 Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 10330 Kingsbury Dr Corpus Christi, TX 78410	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/02/2024	Payee name Don McLaughlin Campaign	
Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1707 Uvalde, TX 78802	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/05/2024	Payee name Donna Howard Campaign	
Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 5375 Austin, TX 78763	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contributions
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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.

1 Total pages Schedule F1: Sch: 6/9 Rpt: 36/40	2 FILER NAME Texas State Assn. Of Fire Fighters Action Committee	3 Filer ID (Ethics Commission Filers) 00015648
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4 Date 12/10/2024	5 Payee name Dustin Burrows Campaign
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6 Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 10507 Quaker Avenue, Suite 103 Lubbock, TX 79424
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/08/2024	Payee name Eddie Morales Campaign
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Amount (\$) \$750.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 352 Hillcrest Blvd. Eagle Pass, TX 78852
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
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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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Date 12/12/2024	Payee name JM Lozano Campaign
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Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 727 Arroyo Dr Kingsville, TX 78363
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
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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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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.

1	Total pages Schedule F1: Sch: 7/9 Rpt: 37/40	2	FILER NAME Texas State Assn. Of Fire Fighters Action Committee	3	Filer ID (Ethics Commission Filers) 00015648
4	Date 12/06/2024	5	Payee name Joe Moody Campaign		
6	Amount (\$) \$750.00 <input type="checkbox"/> Expenditure from corporate funds	7	Payee address; City; State; Zip Code PO Box 920827 El Paso, TX 79902		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
	Date 12/05/2024		Payee name Jon Rosenthal Campaign		
	Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code 8624 Highway 6 N 340 Houston, TX 77064		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contributions		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
	Date 12/03/2024		Payee name Jose Menendez Campaign		
	Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code PO Box 761780 San Antonio, TX 78245		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	

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.

1 Total pages Schedule F1: Sch: 8/9 Rpt: 38/40	2 FILER NAME Texas State Assn. Of Fire Fighters Action Committee	3 Filer ID (Ethics Commission Filers) 00015648
4 Date 12/11/2024	5 Payee name Juan Hinojosa Campaign	
6 Amount (\$) \$1,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 612 Nolana, Suite 410 B McAllen, TX 78504	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/03/2024	Payee name Judith Zaffirini Campaign	
Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 627 Laredo, TX 78042	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/06/2024	Payee name Oscar Longoria Campaign	
Amount (\$) \$2,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 4224 Mission, TX 78572	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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.

1 Total pages Schedule F1: Sch: 9/9 Rpt: 39/40	2 FILER NAME Texas State Assn. Of Fire Fighters Action Committee	3 Filer ID (Ethics Commission Filers) 00015648
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4 Date 12/10/2024	5 Payee name Sarah Eckhardt Campaign
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6 Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 301586 Austin, TX 78703
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/03/2024	Payee name Senfronia Thompson Campaign
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Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4828 Loop Central Drive, Suite 600 Houston, TX 77081
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contributions
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/06/2024	Payee name Terry Canales Campaign
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Amount (\$) \$2,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2727 W. University Dr. Edinburg, TX 78539
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 1/1 Rpt:	2 FILER NAME Texas State Assn. Of Fire Fighters Action Committee	3 Filer ID (Ethics Commission Filers) 00015648
4 Date 12/31/2024	5 Payee name Anedot	
6 Amount (\$) 227.23 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip PO Box 84314 Baton Rouge, LA 70884	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Solicitation/Fundraising Expense	(b) Description (See instructions regarding type of information required.) Fundraiser fee