

CORRECTION/AMENDMENT AFFIDAVIT FOR POLITICAL COMMITTEE

FORM COR-PAC

1 Filer ID (Ethics Commission Filers) 00087022	2 Total pages filed: 142	OFFICE USE ONLY	
3 COMMITTEE NAME Cy-Fair Professional Firefighters Political Action Committee	Date Received ELECTRONICALLY FILED 02/06/2025		Date Hand-delivered or Date Postmarked
4 TREASURER NAME Rand, Nicholas (Mr.)	Receipt #		Amount
5 ORIGINAL REPORT TYPE <input checked="" type="checkbox"/> January 15 <input type="checkbox"/> July 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> 8th day before election	<input type="checkbox"/> Runoff <input type="checkbox"/> 10th day after campaign treasurer resignation <input type="checkbox"/> Dissolution report <input type="checkbox"/> Other (specify) _____		Date Processed
	6 ORIGINAL PERIOD COVERED Month Day Year Month Day Year 10/29/2024 THROUGH 12/31/2024		Date Imaged

7 EXPLANATION OF CORRECTION
The information being corrected is the original contribution upload was blank by accident and it has now been corrected

8 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check the box next to any and all applicable statements:

Semiannual reports: I swear or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

Mr. Nicholas Rand

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

**Remember To Attach Any Part Of The Campaign Finance Report Form
Needed To Report And Explain Corrections**

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) 00087022	2 Total pages filed: 142
3 COMMITTEE NAME Cy-Fair Professional Firefighters Political Action Committee		OFFICE USE ONLY	
		Date Received ELECTRONICALLY FILED 02/06/2025	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 9212 Fry Road Ste. 105 Pmb #333 Cypress, TX 77433		
	Date Hand-delivered or Date Postmarked		
	Receipt #	Amount	
	Date Processed		
		Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mr. Nicholas		
	NICKNAME LAST SUFFIX Rand		
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 11030 Foxbriar Ln Beaumont, TX 77705		
	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 10710 Telge Rd Houston, TX 77095		
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address			
	AREA CODE PHONE NUMBER EXTENSION (713) 305-7665		
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 10/29/2024		Month Day Year 12/31/2024
	THROUGH		
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 Cy-Fair Professional Firefighters Political Action Committee	13 Filer ID (Ethics Commission Filers) 00087022
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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)	\$ 7,905.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00
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. Nicholas Rand

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

17 COMMITTEE NAME Cy-Fair Professional Firefighters Political Action Committee		18 Filer ID (Ethics Commission Filers) 00087022
19 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 7,905.00
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 type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/138 Rpt: 5/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abodeeb, Ahmad <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abodeeb, Ahmad <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abodeeb, Ahmad <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abodeeb, Ahmad <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abodeeb, Ahmad <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/138 Rpt: 6/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Albright, Andrew	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code TX		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Albright, Andrew	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Albright, Andrew	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Albright, Andrew	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Albright, Andrew	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/138 Rpt: 7/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aleman, Emmanuel	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code TX		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aleman, Emmanuel	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aleman, Emmanuel	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aleman, Emmanuel	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aleman, Emmanuel	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/138 Rpt: 8/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anaya, Martin <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anaya, Martin <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anaya, Martin <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anaya, Martin <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anaya, Martin <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/138 Rpt: 9/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aranda, Martin	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code TX		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aranda, Martin	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aranda, Martin	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aranda, Martin	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aranda, Martin	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/138 Rpt: 10/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnold, Katrina	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code TX		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnold, Katrina	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnold, Katrina	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnold, Katrina	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnold, Katrina	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/138 Rpt: 11/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arredondo Jr, Bernave <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arredondo Jr, Bernave <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayala, Alexa <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayala, Alexa <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayala, Alexa <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/138 Rpt: 12/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayala, Alexa <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayala, Alexa <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Bryan <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Bryan <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Bryan <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/138 Rpt: 13/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Bryan <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Bryan <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnett, Chase <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnett, Chase <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnett, Chase <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/138 Rpt: 14/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnett, Chase	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code TX		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnett, Chase	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becker, Cierra	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becker, Cierra	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becker, Cierra	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/138 Rpt: 15/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becker, Cierra <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becker, Cierra <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Books, Brandon <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Books, Brandon <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Books, Brandon <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/138 Rpt: 16/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Books, Brandon <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Books, Brandon <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bornowski, Kyle <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bornowski, Kyle <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bornowski, Kyle <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/138 Rpt: 17/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bornowski, Kyle <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bornowski, Kyle <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowers, Braxton <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowers, Braxton <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowers, Braxton <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/138 Rpt: 18/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowers, Braxton <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowers, Braxton <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brewer, Jason <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brewer, Jason <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brewer, Jason <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/138 Rpt: 19/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brewer, Jason <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brewer, Jason <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Briant, Tucker <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Briant, Tucker <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Briant, Tucker <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/138 Rpt: 20/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Briant, Tucker	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code TX		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Briant, Tucker	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buonarosa, Nicholas	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buonarosa, Nicholas	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buonarosa, Nicholas	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/138 Rpt: 21/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buonarosa, Nicholas	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code TX		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buonarosa, Nicholas	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caceres, Michael	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caceres, Michael	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caceres, Michael	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/138 Rpt: 22/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caceres, Michael	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code TX		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caceres, Michael	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carabantes, Marylin	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carabantes, Marylin	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carabantes, Marylin	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/138 Rpt: 23/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carabantes, Marylin <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carabantes, Marylin <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cardenas, Carlos <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cardenas, Carlos <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cardenas, Carlos <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/138 Rpt: 24/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cardenas, Carlos	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code TX		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cardenas, Carlos	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlos, Juan	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlos, Juan	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlos, Juan	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/138 Rpt: 25/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlos, Juan	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code TX		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlos, Juan	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Russell	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Russell	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Russell	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/138 Rpt: 26/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Russell	7 Amount of Contribution (\$) \$2.00
6 Contributor address; City; State; Zip Code TX		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Russell	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chavez, Alex	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chavez, Alex	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chavez, Alex	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/138 Rpt: 27/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chavez, Alex <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chavez, Alex <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chin, Stephen <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chin, Stephen <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chin, Stephen <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/138 Rpt: 28/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chin, Stephen <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chin, Stephen <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choma, Jonathan <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choma, Jonathan <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choma, Jonathan <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/138 Rpt: 29/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choma, Jonathan <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choma, Jonathan <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christiansen, Blaine <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christiansen, Blaine <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christiansen, Blaine <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/138 Rpt: 30/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christiansen, Blaine <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christiansen, Blaine <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Daniel <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Daniel <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Daniel <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/138 Rpt: 31/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Daniel <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Daniel <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Combs, Travis <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Combs, Travis <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Combs, Travis <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/138 Rpt: 32/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Combs, Travis <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Combs, Travis <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cowan, Jeremy <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cowan, Jeremy <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cowan, Jeremy <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/138 Rpt: 33/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cowan, Jeremy <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cowan, Jeremy <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Currier, Andrew <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Currier, Andrew <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Currier, Andrew <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/138 Rpt: 34/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Currier, Andrew <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Daniel <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Daniel <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Otto <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Otto <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/138 Rpt: 35/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Otto	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code TX		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Otto	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deas, Andrew	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deas, Andrew	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deas, Andrew	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/138 Rpt: 36/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
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8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deas, Andrew <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Derden, Ashely <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Derden, Ashely <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Derden, Ashely <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/138 Rpt: 37/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Derden, Ashely	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code TX		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Derden, Ashely	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diaz, Reborto	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diaz, Reborto	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diaz, Reborto	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/138 Rpt: 38/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diaz, Reborto	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code TX		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dickinson, Brandon	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dickinson, Brandon	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dickinson, Brandon	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dickinson, Brandon	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/138 Rpt: 39/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dickinson, Brandon	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code TX		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dockery, Kenneth	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dockery, Kenneth	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dockery, Kenneth	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dockery, Kenneth	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/138 Rpt: 40/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dockery, Kenneth <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dornak, Blake <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dornak, Blake <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dornak, Blake <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dornak, Blake <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/138 Rpt: 41/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dornak, Blake	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code TX		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duckworth, Tyler	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duckworth, Tyler	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duckworth, Tyler	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duckworth, Tyler	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/138 Rpt: 42/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duckworth, Tyler <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duncan, Cooper <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duncan, Cooper <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elaffouri, Zachariah <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elaffouri, Zachariah <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/138 Rpt: 43/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elaffouri, Zachariah <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elaffouri, Zachariah <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elaffouri, Zachariah <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Kevin <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Kevin <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/138 Rpt: 44/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Kevin <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Kevin <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Kevin <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferretiz, Angel <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferretiz, Angel <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/138 Rpt: 45/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferretiz, Angel <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferretiz, Angel <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferretiz, Angel <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fillmore, Christopher <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fillmore, Christopher <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/138 Rpt: 46/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fillmore, Christopher <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fillmore, Christopher <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fillmore, Christopher <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flannelly, Connor <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flannelly, Connor <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/138 Rpt: 47/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flannelly, Connor	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code TX		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flannelly, Connor	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flannelly, Connor	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frazier, Garrett	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frazier, Garrett	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 44/138 Rpt: 48/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frazier, Garrett <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frazier, Garrett <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frazier, Garrett <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fromholz, Mitchell <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fromholz, Mitchell <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 45/138 Rpt: 49/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fromholz, Mitchell <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fromholz, Mitchell <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fromholz, Mitchell <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia Carabantes, Marylin <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia Carabantes, Marylin <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 46/138 Rpt: 50/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia Carabantes, Marylin	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code TX		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia Carabantes, Marylin	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia Carabantes, Marylin	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerardi, Scott	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerardi, Scott	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 47/138 Rpt: 51/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerardi, Scott <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerardi, Scott <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerardi, Scott <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Matthew <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Matthew <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 48/138 Rpt: 52/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Matthew	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code TX		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Matthew	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Matthew	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gore, Caleb	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gore, Caleb	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 49/138 Rpt: 53/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gore, Caleb <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gore, Caleb <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gore, Caleb <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Hilary <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Hilary <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 50/138 Rpt: 54/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Hilary <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Hilary <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Hilary <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Gregg <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Gregg <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 51/138 Rpt: 55/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Gregg <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Gregg <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Gregg <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, Rafael <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, Rafael <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 52/138 Rpt: 56/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, Rafael <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, Rafael <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, Rafael <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holmes, Erin <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holmes, Erin <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 53/138 Rpt: 57/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holmes, Erin	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code TX		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holmes, Erin	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holmes, Erin	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horton, Elizabeth	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horton, Elizabeth	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 54/138 Rpt: 58/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horton, Elizabeth <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horton, Elizabeth <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horton, Elizabeth <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hybert-Bice, Nicholas <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hybert-Bice, Nicholas <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 55/138 Rpt: 59/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hybert-Bice, Nicholas <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hybert-Bice, Nicholas <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hybert-Bice, Nicholas <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jaramillo, Magdaleno <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jaramillo, Magdaleno <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 56/138 Rpt: 60/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jaramillo, Magdaleno <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jaramillo, Magdaleno <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jaramillo, Magdaleno <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Travis <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Travis <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

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Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Travis <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Travis <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, William <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, William <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

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Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, William <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, William <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kalbow, Timothy <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kalbow, Timothy <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

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Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kalbow, Timothy <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kalbow, Timothy <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kanewske, Cohen <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kanewske, Cohen <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

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Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kanewske, Cohen <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kanewske, Cohen <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, William <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, William <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

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2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, William	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code TX		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, William	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, William	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelsie, John	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelsie, John	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

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2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lanzas, Mauricio	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code TX		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lanzas, Mauricio	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lanzas, Mauricio	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lanzas, Mauricio	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lanzas, Mauricio	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

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2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laws, Roshun <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laws, Roshun <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laws, Roshun <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laws, Roshun <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laws, Roshun <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 64/138 Rpt: 68/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) League, Cory <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) League, Cory <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) League, Cory <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) League, Cory <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) League, Cory <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

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4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leauge, Cory	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code TX		
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Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leauge, Cory	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
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Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leauge, Cory	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leauge, Cory	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Lillie <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Lillie <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Lillie <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Lillie <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Nicholas <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Nicholas <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Nicholas <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lieder, Nicole <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lieder, Nicole <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$5.00
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Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lieder, Nicole <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lieder, Nicole <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
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Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luque, Alexis <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

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4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luque, Alexis <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luque, Alexis <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luque, Alexis <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luque, Alexis <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maher, Jordan <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maher, Jordan <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maher, Jordan <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maher, Jordan <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maher, Jordan <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maldonado, Adolfo <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 71/138 Rpt: 75/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maldonado, Adolfo <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maldonado, Adolfo <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maldonado, Adolfo <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maldonado, Adolfo <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maloney, Joshua <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

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Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manriquez, Carlos <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

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Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Adrian <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

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Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mata, Said	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mata, Said	Amount of Contribution (\$) \$5.00
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Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maywald, Timothy <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maywald, Timothy <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
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Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMahan, Jonathan	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMahan, Jonathan	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

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Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMahan, Jonathan	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMahan, Jonathan	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcdonald, Justin	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcdonald, Justin	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

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Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcdonald, Justin	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code TX		
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Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcdonald, Justin	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcniel, Patrick	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcniel, Patrick	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

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8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcniel, Patrick <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcniel, Patrick <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Levi <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Levi <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

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Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minks, Chris <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minks, Chris <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
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Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miranda, Jordy <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miranda, Jordy <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

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8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
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2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neblett, Marco <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neblett, Marco <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neblett, Marco <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
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Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neblett, Marco <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nettles, David <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nettles, David <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nettles, David <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
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Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nettles, David <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nguyen, Nicolas	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code TX		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nguyen, Nicolas	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nilsen, Gjermund	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nilsen, Gjermund	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nilsen, Gjermund	Amount of Contribution (\$) \$5.00
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SCHEDULE A1

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Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ocasio, Joel <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ocasio, Joel <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
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Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oetker, Chance <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
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Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oros, Kris <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oros, Kris <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
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Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

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Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pace, Travis <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pace, Travis <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
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8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Andy	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Andy	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
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Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Andy	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
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8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pham, Dylan <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pham, Dylan <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pham, Dylan <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 94/138 Rpt: 98/142
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4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinglia, Herman <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinglia, Herman <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinglia, Herman <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
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2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plengemeyer, Kyle <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plengemeyer, Kyle <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plengemeyer, Kyle <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plengemeyer, Kyle <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plengemeyer, Kyle <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Potenza, John <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$5.00
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2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rand, Nicholas <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rand, Nicholas <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
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Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rand, Nicholas <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 98/138 Rpt: 102/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyes, Jonathan	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code TX		
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Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyes, Jonathan	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
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Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyes, Jonathan	Amount of Contribution (\$) \$10.00
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Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyes, Jonathan	Amount of Contribution (\$) \$10.00
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Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

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8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Jason	Amount of Contribution (\$) \$10.00
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Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Jason	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 100/138 Rpt: 104/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robertson, Jordan	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code TX		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robertson, Jordan	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robertson, Jordan	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
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Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robertson, Jordan	Amount of Contribution (\$) \$5.00
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Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robertson, Jordan	Amount of Contribution (\$) \$5.00
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4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Michael <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Michael <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Michael <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
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4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruiz, Randolph <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruiz, Randolph <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
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4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanchez, David	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code TX		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanchez, David	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code TX		
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4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sauceda, Antony	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code TX		
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4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwab, Curt	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code TX		
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Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwab, Curt	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwab, Curt	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwab, Curt	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwab, Curt	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

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2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seguerra, Joshua <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seguerra, Joshua <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seguerra, Joshua <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seguerra, Joshua <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seguerra, Joshua <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

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4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherrod, Jacob <hr/> 6 Contributor address; City; State; Zip Code TX	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherrod, Jacob <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherrod, Jacob <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
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Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherrod, Jacob	Amount of Contribution (\$) \$5.00
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Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherrod, Jacob	Amount of Contribution (\$) \$15.00
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Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherrod, Jacob	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simmons, Delani	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

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Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skow, Bryce <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

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Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sloper, Aaron <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
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Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smithey, Justin <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$15.00
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Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smithey, Justin <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smithey, Justin <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steadman, Kyle <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 115/138 Rpt: 119/142
2 FILER NAME Cy-Fair Professional Firefighters Political Action Committee		3 Filer ID (Ethics Commission Filers) 00087022
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steadman, Kyle	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code TX		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steadman, Kyle	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steadman, Kyle	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steadman, Kyle	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steele, Quinton	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steele, Quinton <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevens, Darci <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

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Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
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Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sturgis, Casey <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

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Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swonke, Shaun	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

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Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tapia, Samuel	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
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Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Brian <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
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Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thetford, Zachary <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

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8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thetford, Zachary <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
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Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thetford, Zachary <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thudium, Patrick <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

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Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thudium, Patrick	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
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Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thudium, Patrick	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Marcos	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

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Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Roy <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

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Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Roy <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Toussaint, John <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

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6 Contributor address; City; State; Zip Code TX		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Velasquez, William	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Velasquez, William	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Velasquez, William	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Velasquez, William	Amount of Contribution (\$) \$20.00
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Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

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8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vorheier, Joshua <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
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Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Jeffrey <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Jeffrey <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
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6 Contributor address; City; State; Zip Code TX		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Lanesa	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Lanesa	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Lanesa	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Lanesa	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Lanesa	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code TX		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waters, Ryan	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waters, Ryan	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webber, Noel	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webber, Noel	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

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Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webber, Noel <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weingart, Colin <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weingart, Colin <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

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Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weldon, Tyler <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weldon, Tyler <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
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Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Raime <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$10.00
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Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Adam <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Adam <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
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Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Jack <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
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Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Trevor <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Trevor <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$20.00
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Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yezak, Darren	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yezak, Darren	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

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