

MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM MPAC
COVER SHEET PG 1

The MPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00089145		2 Total pages filed: 7	
3 COMMITTEE NAME Texas On-Site Wastewater Association PAC				OFFICE USE ONLY Date Received ELECTRONICALLY FILED 04/07/2025 Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged	
4 COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP 444 Old Hwy. No. 9 Comfort, TX 78013				
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mr. Wiley NICKNAME LAST SUFFIX Cloud				
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 444 Old Hwy. No. 9 Comfort, TX 78013				
7 CAMPAIGN TREASURER MAILING ADDRESS	STREET ADDRESS OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 444 Old Hwy. No. 9 Comfort, TX 78006				
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (210) 378-6887				
9 REPORT TYPE	<input checked="" type="checkbox"/> Monthly <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Dissolution (Attach PAC-DR)				
10 MONTHLY REPORT FILING DEADLINE	<input type="checkbox"/> January 5 <input checked="" type="checkbox"/> April 5 <input type="checkbox"/> July 5 <input type="checkbox"/> October 5 <input type="checkbox"/> February 5 <input type="checkbox"/> May 5 <input type="checkbox"/> August 5 <input type="checkbox"/> November 5 <input type="checkbox"/> March 5 <input type="checkbox"/> June 5 <input type="checkbox"/> September 5 <input type="checkbox"/> December 5				
11 PERIOD COVERED	Month Day Year THROUGH Month Day Year 02/26/2025 03/25/2025				

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MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC
COVER SHEET PG 2

12 COMMITTEE NAME Texas On-Site Wastewater Association PAC	13 Filer ID (Ethics Commission Filers) 00089145
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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)	\$ 4,625.00
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	\$ 5,890.00
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. Wiley Cloud

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 - MPAC**FORM MPAC**
COVER SHEET PG 3
3 of 7

17 COMMITTEE NAME Texas On-Slte Wastewater Association PAC		18 Filer ID (Ethics Commission Filers) 00089145
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="checked" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 4,625.00
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: 1/4 Rpt: 4/7
2 FILER NAME Texas On-Site Wastewater Association PAC		3 Filer ID (Ethics Commission Filers) 00089145
4 Date 03/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ashman, James (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Dripping Springs, TX 78620	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) On-Site Sewage Facilities		9 Employer (See Instructions) Self
Date 03/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, Wendell (Mr.) <hr/> Contributor address; City; State; Zip Code Huntsville, TX 77340	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Registered Sanitarian		Employer (See Instructions) Self Employed
Date 03/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boushka, James (Mr.) <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) On-Site Sewage Facilities		Employer (See Instructions) Self Employed
Date 03/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carnley Jr., Raymond (Mr.) <hr/> Contributor address; City; State; Zip Code Huntsville, TX 77340	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Precaster		Employer (See Instructions) Self Employed
Date 03/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dulworth, Clint (Mr.) <hr/> Contributor address; City; State; Zip Code Rice, TX 75155	Amount of Contribution (\$) \$1,350.00
Principal occupation / Job title (See Instructions) Precaster		Employer (See Instructions) Aeris Aerobics

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/4 Rpt: 5/7
2 FILER NAME Texas On-Site Wastewater Association PAC		3 Filer ID (Ethics Commission Filers) 00089145
4 Date 03/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dulworth, Matthew (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Rice, TX 75155	7 Amount of Contribution (\$) \$1,350.00
8 Principal occupation / Job title (See Instructions) Precaster		9 Employer (See Instructions) Aeris Aerobics
Date 03/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dulworth, Tommy (Mr.) <hr/> Contributor address; City; State; Zip Code Rice, TX 75155	Amount of Contribution (\$) \$1,350.00
Principal occupation / Job title (See Instructions) Precaster		Employer (See Instructions) Aeris Aerobics
Date 03/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Corey (Mr.) <hr/> Contributor address; City; State; Zip Code Granbury, TX 76048	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) OSSF		Employer (See Instructions) Self Employed
Date 03/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Eric (Mr.) <hr/> Contributor address; City; State; Zip Code Granbury, TX 76048	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) OSSF		Employer (See Instructions) Self Employed
Date 03/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Havard, Jason (Mr.) <hr/> Contributor address; City; State; Zip Code Lufkin , TX 75901	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) On-Site Sewage Facilities		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/4 Rpt: 6/7
2 FILER NAME Texas On-Site Wastewater Association PAC		3 Filer ID (Ethics Commission Filers) 00089145
4 Date 03/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hinther, Jessie (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Yukon, OK 73099	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) OSSF Pump Supplier		9 Employer (See Instructions) Gicon Pump & Equipment
Date 03/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kline, Tyler (Mr.) <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78220	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) OSSF Pump Supplier		Employer (See Instructions) Gicon Pump & Equipment
Date 03/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moomaw, Ronald (Mr.) <hr/> Contributor address; City; State; Zip Code Killeen, TX 76540	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) On-Site Sewage Facilities		Employer (See Instructions) Self Employed
Date 03/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Dennis (Mr.) <hr/> Contributor address; City; State; Zip Code Blanco, TX 78606	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) On-Site Sewage Facilities		Employer (See Instructions) Self Employed
Date 03/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powell, Frank (Mr.) <hr/> Contributor address; City; State; Zip Code Nevada, TX 75173	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) On-Site Sewage Facilities		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/4 Rpt: 7/7
2 FILER NAME Texas On-Site Wastewater Association PAC		3 Filer ID (Ethics Commission Filers) 00089145
4 Date 03/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schuldts, Roger (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Dayton, TX 77535	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) On-Site Sewage Facilities		9 Employer (See Instructions) Self Employed
Date 03/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weber, Randolph (Mr.) <hr/> Contributor address; City; State; Zip Code Onalaska, TX 77360	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Professional Engineer		Employer (See Instructions) Self Employed
Date 03/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wendland, Brian (Mr.) <hr/> Contributor address; City; State; Zip Code Rockdale, TX 76567	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Registered Sanitarian		Employer (See Instructions) Self Employed
Date 03/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiggins, Jim (Mr.) <hr/> Contributor address; City; State; Zip Code Yukon, OK 73099	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Pump Supplier		Employer (See Instructions) Gicon Pump & Equipment