

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) 00066218	2 Total pages filed: 46
3 COMMITTEE NAME Baytown Municipal Police Association Political Action Committee			OFFICE USE ONLY Date Received ELECTRONICALLY FILED 07/02/2025 Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged
4 COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 3200 N. Main St. Baytown, TX 77521		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mr. Bret W. NICKNAME LAST SUFFIX Rasch		
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 3200 North Main Street Baytown, TX 77521		
7 CAMPAIGN TREASURER MAILING ADDRESS	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 3200 North Main Street Baytown, TX 77521		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (832) 233-1343		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input checked="" 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 01/01/2025 THROUGH Month Day Year 06/30/2025		
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 Baytown Municipal Police Association Political Action Committee	13 Filer ID (Ethics Commission Filers) 00066218
---	---

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 checked="" 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)	\$ 2,945.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 1,362.25
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 11,686.09
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. Bret W. Rasch

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

SUBTOTALS - GPAC**FORM GPAC**
COVER SHEET PG 3
3 of 46

17 COMMITTEE NAME Baytown Municipal Police Association Political Action Committee		18 Filer ID (Ethics Commission Filers) 00066218
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 2,945.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 1,362.25
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 checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 678.50

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/37 Rpt: 4/46
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 04/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BREEDING, CLAYTON 6 Contributor address; City; State; Zip Code LEAGUE CITY, TX 77573	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) POLICE OFFICER		9 Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BREEDING, CLAYTON Contributor address; City; State; Zip Code LEAGUE CITY, TX 77573	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BREEDING, CLAYTON Contributor address; City; State; Zip Code LEAGUE CITY, TX 77573	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 01/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURCH, CAMERON Contributor address; City; State; Zip Code MONT BELVIEU, TX 77580	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 02/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURCH, CAMERON Contributor address; City; State; Zip Code MONT BELVIEU, TX 77580	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/37 Rpt: 5/46
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 03/06/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURCH, CAMERON 6 Contributor address; City; State; Zip Code MONT BELVIEU, TX 77580	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) POLICE OFFICER		9 Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 04/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURCH, CAMERON Contributor address; City; State; Zip Code MONT BELVIEU, TX 77580	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 05/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURCH, CAMERON Contributor address; City; State; Zip Code MONT BELVIEU, TX 77580	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 06/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURCH, CAMERON Contributor address; City; State; Zip Code MONT BELVIEU, TX 77580	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 01/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALHOUN, CHRIS Contributor address; City; State; Zip Code HOUSTON, TX 77058	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/37 Rpt: 6/46
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 02/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALHOUN, CHRIS 6 Contributor address; City; State; Zip Code HOUSTON, TX 77058	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) POLICE OFFICER		9 Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 03/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALHOUN, CHRIS Contributor address; City; State; Zip Code HOUSTON, TX 77058	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 04/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALHOUN, CHRIS Contributor address; City; State; Zip Code HOUSTON, TX 77058	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 05/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALHOUN, CHRIS Contributor address; City; State; Zip Code HOUSTON, TX 77058	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 06/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALHOUN, CHRIS Contributor address; City; State; Zip Code HOUSTON, TX 77058	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/37 Rpt: 7/46
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 01/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COX, JEREMY 6 Contributor address; City; State; Zip Code BAYTOWN, TX 77523	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) POLICE OFFICER		9 Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 02/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COX, JEREMY Contributor address; City; State; Zip Code BAYTOWN, TX 77523	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 03/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COX, JEREMY Contributor address; City; State; Zip Code BAYTOWN, TX 77523	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 04/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COX, JEREMY Contributor address; City; State; Zip Code BAYTOWN, TX 77523	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 05/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COX, JEREMY Contributor address; City; State; Zip Code BAYTOWN, TX 77523	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/37 Rpt: 8/46
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 06/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COX, JEREMY <hr/> 6 Contributor address; City; State; Zip Code BAYTOWN, TX 77523	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) POLICE OFFICER		9 Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 01/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROWELL, AARON <hr/> Contributor address; City; State; Zip Code BEACH CITY, TX 77523	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 02/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROWELL, AARON <hr/> Contributor address; City; State; Zip Code BEACH CITY, TX 77523	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 03/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROWELL, AARON <hr/> Contributor address; City; State; Zip Code BEACH CITY, TX 77523	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 04/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROWELL, AARON <hr/> Contributor address; City; State; Zip Code BEACH CITY, TX 77523	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/37 Rpt: 9/46
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 05/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROWELL, AARON <hr/> 6 Contributor address; City; State; Zip Code BEACH CITY, TX 77523	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) POLICE OFFICER		9 Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 06/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROWELL, AARON <hr/> Contributor address; City; State; Zip Code BEACH CITY, TX 77523	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 01/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DORANTES, JESSICA <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 02/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DORANTES, JESSICA <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 03/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DORANTES, JESSICA <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/37 Rpt: 10/46
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 04/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DORANTES, JESSICA 6 Contributor address; City; State; Zip Code BAYTOWN, TX 77521	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) POLICE OFFICER		9 Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 05/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DORANTES, JESSICA Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 06/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DORANTES, JESSICA Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 01/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRANT, JOHNATHAN Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 02/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRANT, JOHNATHAN Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/37 Rpt: 11/46
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 03/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRANT, JOHNATHAN 6 Contributor address; City; State; Zip Code BAYTOWN, TX 77521	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) POLICE OFFICER		9 Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 04/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRANT, JOHNATHAN Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 05/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRANT, JOHNATHAN Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 06/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRANT, JOHNATHAN Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 01/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMPTON, KENNETH Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/37 Rpt: 12/46
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 02/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMPTON, KENNETH 6 Contributor address; City; State; Zip Code BAYTOWN, TX 77521	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) POLICE OFFICER		9 Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 03/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMPTON, KENNETH Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 04/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMPTON, KENNETH Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 05/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMPTON, KENNETH Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 06/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMPTON, KENNETH Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/37 Rpt: 13/46
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 01/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEMMENWAY, STEPHEN <hr/> 6 Contributor address; City; State; Zip Code BEACH CITY, TX 77523	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) POLICE OFFICER		9 Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 02/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEMMENWAY, STEPHEN <hr/> Contributor address; City; State; Zip Code BEACH CITY, TX 77523	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 03/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEMMENWAY, STEPHEN <hr/> Contributor address; City; State; Zip Code BEACH CITY, TX 77523	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 04/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEMMENWAY, STEPHEN <hr/> Contributor address; City; State; Zip Code BEACH CITY, TX 77523	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 05/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEMMENWAY, STEPHEN <hr/> Contributor address; City; State; Zip Code BEACH CITY, TX 77523	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/37 Rpt: 14/46
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 06/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEMMENWAY, STEPHEN 6 Contributor address; City; State; Zip Code BEACH CITY, TX 77523	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) POLICE OFFICER		9 Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 01/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HIBBITS, WILLIAM Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 02/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HIBBITS, WILLIAM Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 03/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HIBBITS, WILLIAM Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 04/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HIBBITS, WILLIAM Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/37 Rpt: 15/46
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 05/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HIBBITS, WILLIAM <hr/> 6 Contributor address; City; State; Zip Code BAYTOWN, TX 77521	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) POLICE OFFICER		9 Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 06/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HIBBITS, WILLIAM <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 01/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HIGHTOWER, MICHAEL <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 02/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HIGHTOWER, MICHAEL <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 03/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HIGHTOWER, MICHAEL <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/37 Rpt: 16/46
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 04/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HIGHTOWER, MICHAEL 6 Contributor address; City; State; Zip Code BAYTOWN, TX 77521	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) POLICE OFFICER		9 Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 01/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSTON, DAVID Contributor address; City; State; Zip Code Baytown , TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) City of Baytown
Date 02/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSTON, DAVID Contributor address; City; State; Zip Code Baytown , TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) City of Baytown
Date 03/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSTON, DAVID Contributor address; City; State; Zip Code Baytown , TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) City of Baytown
Date 04/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSTON, DAVID Contributor address; City; State; Zip Code Baytown , TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) City of Baytown

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/37 Rpt: 17/46
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 05/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSTON, DAVID 6 Contributor address; City; State; Zip Code Baytown , TX 77521	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) POLICE OFFICER		9 Employer (See Instructions) City of Baytown
Date 06/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSTON, DAVID Contributor address; City; State; Zip Code Baytown , TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) City of Baytown
Date 01/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KINZIE, HUNTER Contributor address; City; State; Zip Code LA PORTE, TX 77571	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 02/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KINZIE, HUNTER Contributor address; City; State; Zip Code LA PORTE, TX 77571	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 03/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KINZIE, HUNTER Contributor address; City; State; Zip Code LA PORTE, TX 77571	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/37 Rpt: 18/46
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 04/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KINZIE, HUNTER 6 Contributor address; City; State; Zip Code LA PORTE, TX 77571	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) POLICE OFFICER		9 Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 05/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KINZIE, HUNTER Contributor address; City; State; Zip Code LA PORTE, TX 77571	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 06/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KINZIE, HUNTER Contributor address; City; State; Zip Code LA PORTE, TX 77571	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 01/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAMACH, BRICE Contributor address; City; State; Zip Code CROSBY, TX 77532	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) City of Baytown
Date 02/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAMACH, BRICE Contributor address; City; State; Zip Code CROSBY, TX 77532	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) City of Baytown

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/37 Rpt: 19/46
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 03/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAMACH, BRICE 6 Contributor address; City; State; Zip Code CROSBY, TX 77532	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) POLICE OFFICER		9 Employer (See Instructions) City of Baytown
Date 04/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAMACH, BRICE Contributor address; City; State; Zip Code CROSBY, TX 77532	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) City of Baytown
Date 05/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAMACH, BRICE Contributor address; City; State; Zip Code CROSBY, TX 77532	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) City of Baytown
Date 06/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAMACH, BRICE Contributor address; City; State; Zip Code CROSBY, TX 77532	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) City of Baytown
Date 01/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAMBERT, DAVID Contributor address; City; State; Zip Code LEAGUE CITY, TX 77573	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/37 Rpt: 20/46
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 02/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAMBERT, DAVID <hr/> 6 Contributor address; City; State; Zip Code LEAGUE CITY, TX 77573	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) POLICE OFFICER		9 Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 03/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAMBERT, DAVID <hr/> Contributor address; City; State; Zip Code LEAGUE CITY, TX 77573	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAMBERT, DAVID <hr/> Contributor address; City; State; Zip Code LEAGUE CITY, TX 77573	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 05/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAMBERT, DAVID <hr/> Contributor address; City; State; Zip Code LEAGUE CITY, TX 77573	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 06/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAMBERT, DAVID <hr/> Contributor address; City; State; Zip Code LEAGUE CITY, TX 77573	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/37 Rpt: 21/46
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 01/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIN, NICHOLAS <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77062	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Patrol Officer		9 Employer (See Instructions) City of Baytown
Date 02/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIN, NICHOLAS <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Patrol Officer		Employer (See Instructions) City of Baytown
Date 03/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIN, NICHOLAS <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Patrol Officer		Employer (See Instructions) City of Baytown
Date 04/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIN, NICHOLAS <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Patrol Officer		Employer (See Instructions) City of Baytown
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIN, NICHOLAS <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Patrol Officer		Employer (See Instructions) City of Baytown

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/37 Rpt: 22/46
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 06/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIN, NICHOLAS 6 Contributor address; City; State; Zip Code HOUSTON, TX 77062	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Patrol Officer		9 Employer (See Instructions) City of Baytown
Date 01/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, IVAN Contributor address; City; State; Zip Code EL LAGO, TX 77586	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 02/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, IVAN Contributor address; City; State; Zip Code EL LAGO, TX 77586	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 03/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, IVAN Contributor address; City; State; Zip Code EL LAGO, TX 77586	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 04/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, IVAN Contributor address; City; State; Zip Code EL LAGO, TX 77586	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/37 Rpt: 23/46
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 05/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, IVAN <hr/> 6 Contributor address; City; State; Zip Code EL LAGO, TX 77586	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) POLICE OFFICER		9 Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 06/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, IVAN <hr/> Contributor address; City; State; Zip Code EL LAGO, TX 77586	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 01/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDANIEL, ALYSSA <hr/> Contributor address; City; State; Zip Code LA PORTE, TX 77571	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 02/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDANIEL, ALYSSA <hr/> Contributor address; City; State; Zip Code LA PORTE, TX 77571	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 03/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDANIEL, ALYSSA <hr/> Contributor address; City; State; Zip Code LA PORTE, TX 77571	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/37 Rpt: 24/46
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 04/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDANIEL, ALYSSA 6 Contributor address; City; State; Zip Code LA PORTE, TX 77571	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) POLICE OFFICER		9 Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 05/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDANIEL, ALYSSA Contributor address; City; State; Zip Code LA PORTE, TX 77571	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 06/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDANIEL, ALYSSA Contributor address; City; State; Zip Code LA PORTE, TX 77571	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OBENLAND, CHRIS Contributor address; City; State; Zip Code BAYTOWN, TX 77522	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 02/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OBENLAND, CHRIS Contributor address; City; State; Zip Code BAYTOWN, TX 77522	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/37 Rpt: 25/46
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 03/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OBENLAND, CHRIS 6 Contributor address; City; State; Zip Code BAYTOWN, TX 77522	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) POLICE OFFICER		9 Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 04/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OBENLAND, CHRIS Contributor address; City; State; Zip Code BAYTOWN, TX 77522	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OBENLAND, CHRIS Contributor address; City; State; Zip Code BAYTOWN, TX 77522	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OBENLAND, CHRIS Contributor address; City; State; Zip Code BAYTOWN, TX 77522	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 01/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWELL, LEONARD Contributor address; City; State; Zip Code HOUSTON, TX 77084	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) City of Baytown

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/37 Rpt: 26/46
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 02/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWELL, LEONARD <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77084	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) POLICE OFFICER		9 Employer (See Instructions) City of Baytown
Date 03/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWELL, LEONARD <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77084	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) City of Baytown
Date 04/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWELL, LEONARD <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77084	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) City of Baytown
Date 05/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWELL, LEONARD <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77084	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) City of Baytown
Date 06/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWELL, LEONARD <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77084	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) City of Baytown

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/37 Rpt: 27/46
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 01/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RASCH, BRET 6 Contributor address; City; State; Zip Code BAYTOWN, TX 77521	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) POLICE OFFICER		9 Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 02/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RASCH, BRET Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 03/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RASCH, BRET Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 04/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RASCH, BRET Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 05/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RASCH, BRET Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/37 Rpt: 28/46
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 06/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RASCH, BRET 6 Contributor address; City; State; Zip Code BAYTOWN, TX 77521	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) POLICE OFFICER		9 Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 01/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHTER, ANDREW Contributor address; City; State; Zip Code FRIENDSWOOD, TX 77546	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 02/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHTER, ANDREW Contributor address; City; State; Zip Code FRIENDSWOOD, TX 77546	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 03/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHTER, ANDREW Contributor address; City; State; Zip Code FRIENDSWOOD, TX 77546	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 04/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHTER, ANDREW Contributor address; City; State; Zip Code FRIENDSWOOD, TX 77546	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/37 Rpt: 29/46
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 05/06/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHTER, ANDREW <hr/> 6 Contributor address; City; State; Zip Code FRIENDSWOOD, TX 77546	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) POLICE OFFICER		9 Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 06/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHTER, ANDREW <hr/> Contributor address; City; State; Zip Code FRIENDSWOOD, TX 77546	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 01/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIVERS, MARCUS <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) City of Baytown
Date 03/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, NATALIE <hr/> Contributor address; City; State; Zip Code Baytown , TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 04/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, NATALIE <hr/> Contributor address; City; State; Zip Code Baytown , TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/37 Rpt: 30/46
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 05/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, NATALIE <hr/> 6 Contributor address; City; State; Zip Code Baytown , TX 77521	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) POLICE OFFICER		9 Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 06/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, NATALIE <hr/> Contributor address; City; State; Zip Code Baytown , TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 01/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUDOLPH, MATTHEW <hr/> Contributor address; City; State; Zip Code HUMBLE, TX 77339	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 02/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUDOLPH, MATTHEW <hr/> Contributor address; City; State; Zip Code HUMBLE, TX 77339	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 03/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUDOLPH, MATTHEW <hr/> Contributor address; City; State; Zip Code HUMBLE, TX 77339	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/37 Rpt: 31/46
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 04/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUDOLPH, MATTHEW 6 Contributor address; City; State; Zip Code HUMBLE, TX 77339	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) POLICE OFFICER		9 Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 05/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUDOLPH, MATTHEW Contributor address; City; State; Zip Code HUMBLE, TX 77339	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 06/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUDOLPH, MATTHEW Contributor address; City; State; Zip Code HUMBLE, TX 77339	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 01/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALAZAR, MANUEL Contributor address; City; State; Zip Code DAYTON, TX 77535	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 02/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALAZAR, MANUEL Contributor address; City; State; Zip Code DAYTON, TX 77535	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/37 Rpt: 32/46
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 03/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALAZAR, MANUEL <hr/> 6 Contributor address; City; State; Zip Code DAYTON, TX 77535	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) POLICE OFFICER		9 Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 04/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALAZAR, MANUEL <hr/> Contributor address; City; State; Zip Code DAYTON, TX 77535	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 05/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALAZAR, MANUEL <hr/> Contributor address; City; State; Zip Code DAYTON, TX 77535	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 06/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALAZAR, MANUEL <hr/> Contributor address; City; State; Zip Code DAYTON, TX 77535	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 01/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALINAS, MORGAN <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/37 Rpt: 33/46
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 02/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALINAS, MORGAN <hr/> 6 Contributor address; City; State; Zip Code BAYTOWN, TX 77521	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) POLICE OFFICER		9 Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 03/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALINAS, MORGAN <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 04/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALINAS, MORGAN <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALINAS, MORGAN <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALINAS, MORGAN <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/37 Rpt: 34/46
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 01/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEDD, HEATHER <hr/> 6 Contributor address; City; State; Zip Code BAYTOWN, TX 77521	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) POLICE OFFICER		9 Employer (See Instructions) City of Baytown
Date 02/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEDD, HEATHER <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) City of Baytown
Date 01/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SILLS, SCOTT <hr/> Contributor address; City; State; Zip Code Baytown, TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 02/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SILLS, SCOTT <hr/> Contributor address; City; State; Zip Code Baytown, TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 03/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SILLS, SCOTT <hr/> Contributor address; City; State; Zip Code Baytown, TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/37 Rpt: 35/46
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 04/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SILLS, SCOTT <hr/> 6 Contributor address; City; State; Zip Code Baytown, TX 77521	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) POLICE OFFICER		9 Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 05/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SILLS, SCOTT <hr/> Contributor address; City; State; Zip Code Baytown, TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 06/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SILLS, SCOTT <hr/> Contributor address; City; State; Zip Code LOS ANGELOS, CA 90028	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 01/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOTO, ADRIAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 02/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOTO, ADRIAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/37 Rpt: 36/46
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 03/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOTO, ADRIAN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77062	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) POLICE OFFICER		9 Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 04/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOTO, ADRIAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 05/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOTO, ADRIAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 06/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOTO, ADRIAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 01/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, TERI <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77523	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) City of Baytown

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/37 Rpt: 37/46
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 02/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, TERI <hr/> 6 Contributor address; City; State; Zip Code BAYTOWN, TX 77523	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) POLICE OFFICER		9 Employer (See Instructions) City of Baytown
Date 03/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, TERI <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77523	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) City of Baytown
Date 04/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, TERI <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77523	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) City of Baytown
Date 05/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, TERI <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77523	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) City of Baytown
Date 06/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, TERI <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77523	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) City of Baytown

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/37 Rpt: 38/46
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 01/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TODD, ERIC 6 Contributor address; City; State; Zip Code BAYTOWN, TX 77523	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) POLICE OFFICER		9 Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 02/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TODD, ERIC Contributor address; City; State; Zip Code BAYTOWN, TX 77523	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 03/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TODD, ERIC Contributor address; City; State; Zip Code BAYTOWN, TX 77523	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 04/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TODD, ERIC Contributor address; City; State; Zip Code BAYTOWN, TX 77523	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 05/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TODD, ERIC Contributor address; City; State; Zip Code BAYTOWN, TX 77523	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/37 Rpt: 39/46
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 06/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TODD, ERIC <hr/> 6 Contributor address; City; State; Zip Code BAYTOWN, TX 77523	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) POLICE OFFICER		9 Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 01/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATKINS, RONNIE <hr/> Contributor address; City; State; Zip Code LOS ANGELOS, CA 90028	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 02/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATKINS, RONNIE <hr/> Contributor address; City; State; Zip Code LOS ANGELOS, CA 90028	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 03/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATKINS, RONNIE <hr/> Contributor address; City; State; Zip Code LOS ANGELOS, CA 90028	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 04/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATKINS, RONNIE <hr/> Contributor address; City; State; Zip Code LOS ANGELOS, CA 90028	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/37 Rpt: 40/46
2 FILER NAME Baytown Municipal Police Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00066218
4 Date 05/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATKINS, RONNIE <hr/> 6 Contributor address; City; State; Zip Code LOS ANGELOS, CA 90028	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) POLICE OFFICER		9 Employer (See Instructions) BAYTOWN POLICE DEPARTMENT
Date 06/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATKINS, RONNIE <hr/> Contributor address; City; State; Zip Code LOS ANGELOS, CA 90028	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) BAYTOWN POLICE DEPARTMENT

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/5 Rpt: 41/46	2 FILER NAME Baytown Municipal Police Association Political Action	3 Filer ID (Ethics Commission Filers) 00066218
4 Date 06/28/2025	5 Payee name ANEDOT	
6 Amount (\$) \$172.40 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 NEW ORLEANS, LA 70112	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PROCESSING FEES FOR ANEDOT
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/29/2025	Candidate/Officeholder name Payee name BEACON FEDERAL CREDIT UNION	
Amount (\$) \$5.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2812 N ALEXANDER DR BAYTOWN, TX 77520	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense BANKING FEE
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/21/2025	Candidate/Officeholder name Payee name CHICKEN SALAD CHICK	
Amount (\$) \$56.14 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4531 GARTH ROAD SUITE 100 BAYTOWN, TX 77521	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense LUNCH WITH BAYTOWN CITY COUNCIL MEMBER KEN GRIFFITH
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/5 Rpt: 42/46	2 FILER NAME Baytown Municipal Police Association Political Action	3 Filer ID (Ethics Commission Filers) 00066218
4 Date 01/20/2025	5 Payee name FOOD TOWN	
6 Amount (\$) \$678.50 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 3517 N MAIN ST BAYTOWN, TX 77521	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense DEBIT MADE IN ERROR. WRONG DEBIT CARD USED. THIS MONEY WAS REIMBURSED FROM
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/10/2025	Payee name JASONS DELI	
Amount (\$) \$46.92 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4555 GARTH ROAD SUITE 300 BAYTOWN, TX 77521	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense LUNCH WITH BAYTOWN CITY COUNCIL MEMBER JACOB POWELL
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/17/2025	Payee name JASONS DELI	
Amount (\$) \$46.59 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4555 GARTH ROAD SUITE 300 BAYTOWN, TX 77521	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense LUNCH WITH BAYTOWN CITY COUNCIL MEMBER MIKE LESTER
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/5 Rpt: 43/46	2 FILER NAME Baytown Municipal Police Association Political Action	3 Filer ID (Ethics Commission Filers) 00066218
4 Date 02/18/2025	5 Payee name JASONS DELI	
6 Amount (\$) \$48.87 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 4555 GARTH ROAD SUITE 300 BAYTOWN, TX 77521	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense LUNCH WITH BAYTOWN CITY COUNCIL MEMBER KEN GRIFFITH
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/24/2025	Payee name JASONS DELI	
Amount (\$) \$30.39 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4555 GARTH ROAD SUITE 300 BAYTOWN, TX 77521	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense LUNCH WITH BAYTOWN CITY COUNCIL MEMBER JAMES FRANCO
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/20/2025	Payee name JASONS DELI	
Amount (\$) \$38.26 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4555 GARTH ROAD SUITE 300 BAYTOWN, TX 77521	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense LUNCH WITH POSSIBLE FUTURE HARRIS COUNTY COMMISSIONER COURT CANDIDATE
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/5 Rpt: 44/46	2 FILER NAME Baytown Municipal Police Association Political Action	3 Filer ID (Ethics Commission Filers) 00066218
4 Date 05/20/2025	5 Payee name JASONS DELI	
6 Amount (\$) \$13.68 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 4555 GARTH ROAD SUITE 300 BAYTOWN, TX 77521	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense LUNCH WITH POSSIBLE FUTURE HARRIS COUNTY COMMISSIONER COURT CANDIDATE
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/14/2025	Candidate/Officeholder name Office sought Office held	
Payee name NARA THAI		
Amount (\$) \$66.31 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4505 GARTH BAYTOWN, TX 77521	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense LUNCH WITH BAYTOWN MAYOR CHARLES JOHNSON
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/18/2025	Candidate/Officeholder name Office sought Office held	
Payee name NARA THAI		
Amount (\$) \$114.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4505 GARTH BAYTOWN, TX 77521	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense LUNCH WITH POSSIBLE FUTURE BAYTOWN CITY COUNCIL CANDIDATE JUDY DUBOSE
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/5 Rpt: 45/46	2 FILER NAME Baytown Municipal Police Association Political Action	3 Filer ID (Ethics Commission Filers) 00066218
4 Date 04/23/2025	5 Payee name TAJIN	
6 Amount (\$) \$44.59 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 200 N ALEXANDER DR BAYTOWN, TX 77520	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense LUNCH WITH BAYTOWN CITY COUNCIL MEMBER MIKE LESTER
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:
Sch: 1/1 Rpt: 46/46

2 FILER NAME

Baytown Municipal Police Association Political Action Committee

3 Filer ID (Ethics Commission Filers)
00066218

4 Date

06/25/2025

5 Name of person from whom amount is received

Baytown Municipal Police Association

8 Amount (\$)

\$678.50

6 Address of person from whom amount is received; City; State; Zip Code

Baytown, TX 77521

7 Purpose for which amount is received

☐ Check if political contribution returned to filer

Reimbursement. On 1/20/25 \$678.50 was spent from PAC account instead of general fund account