FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00080704 3 COMMITTEE NAME **OFFICE USE ONLY** Mission Fire Fighters Committee for Responsible Gov Date Received **ELECTRONICALLY FILED** 07/15/2025 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** PO Box 1284 Date Hand-delivered or Date Postmarked Change of Address Mission, TX 78572 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Michael E. NAME NICKNAME LAST **SUFFIX** Silva STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 2118 E. 27th St. STREET **ADDRESS** (Residence or Business) Mission, TX 78574 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 2118 E. 27th St. MAILING **ADDRESS** Mission, TX 78574 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (956) 467-9465 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Х Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 01/01/2025 06/30/2025 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special **GO TO PAGE 2**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Mission Fire Fighters	Committee for Responsi	ble Gov	00080704	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	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	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	10,990.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	D POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	11,047.67
CONTRIBUTION BALANCE	5. TOTAL POLITICAL (OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	8,046.16
OUTSTANDING LOAN TOTALS	I	AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT	l		<u> </u>	
		I swear, or affirm, under penalty of per true and correct and includes all inforr under Title 15, Election Code.		
		Mr. Micha	ael E. Silva	
		Signature of Car	mpaign Treasui	rer
AFFIX NOTAF	RY STAMP / SEAL ABOVE			
Sworn to and subscribe	ed before me, by the said	, th	nis 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 offic	er administering oath

SUBTOTALS - GPAC

FORM **GPAC**COVER SHEET PG 3

			3 of 28
17 COMMI ⁻ Mission	TEE NAME Fire Fighters Committee for Responsible Gov	18 Filer ID 00080704	(Ethics Commission Filers)
	LE SUBTOTALS = SCHEDULE		SUBTOTAL AMOUNT
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 10,990.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.	\$		
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOURGANIZATION	PR	\$
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORAL LABOR ORGANIZATION	ATION OR	\$
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$
9.	SCHEDULE E: LOANS		\$
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$ 11,047.67
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$

	MONEI	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 1/12 Rpt: 4/28	
2	FILER NAME	Fishters Course the Book of the Course		3	Filer ID (Ethics Commission	n Filers)
		Fighters Committee for Responsible Gov			00080704	
4	Date 06/27/2025	 Full name of contributor uut-of-state PAC (ID#: Abila, Adrain Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$240.00
		Mission, TX 78572				
8	Principal occu Fire Fighter	pation / Job title (See Instructions)	Employer (See Instructions City Of Mission	5)		
	Date 04/30/2025	Full name of contributor out-of-state PAC (ID#: Alanis, Oscar Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$160.00
		MIssion, TX 78572				
	Principal occu Fire Fighter	pation / Job title (See Instructions)	Employer (See Instructions City Of Mission	s)		
	Date 06/27/2025	Full name of contributor out-of-state PAC (ID#: Alvarez, Randy Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$240.00
		MIssion, TX 78572				
	Principal occu Fire Fighter	pation / Job title (See Instructions)	Employer (See Instructions City Of Mission	5)		
	Date 06/27/2025	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$300.00
	Principal occu Fire Fighter	pation / Job title (See Instructions)	Employer (See Instructions City of Mission	5)		
	Date 06/27/2025	Full name of contributor out-of-state PAC (ID#: Cardenas , Jacob Contributor address; City; State; Zip Code Mission , TX 78572			Amount of Contribution (\$)	\$60.00
	Principal occu Fire Fighter	pation / Job title (See Instructions)	Employer (See Instructions City Of Mission	s)		

	MONEI	ARY POLITICAL C	ONTRIBUTION	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this for	rm.	1	Total pages Schedule A1: Sch: 2/12 Rpt: 5/28	
2	FILER NAME Mission Fire	Fighters Committee for Respo	onsible Gov		3	Filer ID (Ethics Commission 00080704	n Filers)
4	Date 06/27/2025	Full name of contributor Castillo, Francisco Contributor address; City; St	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$20.00
		Mission, TX 78572	·				
8	Principal occu Fire Fighter	ıpation / Job title (See Instructions) 9	Employer (See Instructions City of Mission	s)		
	Date 06/27/2025	Full name of contributor Cavazos, Frank Contributor address; City; St	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$300.00
	Principal occu	Mission, TX 78572 upation / Job title (See Instructions	s)	Employer (See Instructions	 s)		
	Fire Fighter		<u></u>	City of Mission			
	Date 06/27/2025	Full name of contributor Chaires, Frank Contributor address; City; St	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$300.00
		Mission , TX 78572					
	Principal occu Fire Fighter	ipation / Job title (See Instructions)	Employer (See Instructions City Of Mission	s)		
	Date 06/27/2025	Full name of contributor Cruz, Randy Contributor address; City; St Mission, TX 78572				Amount of Contribution (\$)	\$240.00
	Principal occu Fire Fighter	upation / Job title (See Instructions)	Employer (See Instructions City Of Mission	s)		
	Date 06/27/2025	Full name of contributor De La Cruz, Mario Contributor address; City; St Mission, TX 78572	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$15.00
	Principal occu Fire Fighter	I upation / Job title (See Instructions)	Employer (See Instructions City of Mission	s)		

	MONET	ARY POLITICAL CONTRIBUTION	Ν	IS		SCHEDULI	E A1
	The Instru	ction Guide explains how to complete this fo	ori	n.	1	Total pages Schedule A1: Sch: 3/12 Rpt: 6/28	
2	FILER NAME Mission Fire	Fighters Committee for Responsible Gov			3	Filer ID (Ethics Commission 00080704	ı Filers)
4	Date 06/27/2025	 Full name of contributor)	7	Amount of Contribution (\$)	\$120.00
0	Dringing Lagge	Mission, TX 78572	_	Employer (Coo Instructions	<u></u>		
8	Fire Fighter	pation / Job title (See Instructions)	9	Employer (See Instructions City of Mission	5)		
	Date 06/27/2025	Full name of contributor)		Amount of Contribution (\$)	\$45.00
	Deireciant	Mission, TX 78572		Faralas a (Osas la structiona	<u></u>		
	Fire Fighter	pation / Job title (See Instructions)		Employer (See Instructions City of Mission	5)		
	Date 06/27/2025	Full name of contributor out-of-state PAC (ID#:_ Esquivel, Mauricio Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$300.00
		Mission, TX 78572					
	Principal occu Fire Fighter	pation / Job title (See Instructions)		Employer (See Instructions City of Mission	s)		
	Date 06/27/2025	Full name of contributor out-of-state PAC (ID#:_Flores , Javier Contributor address; City; State; Zip Code Mission , TX 78573				Amount of Contribution (\$)	\$60.00
	Principal occu Fire Fighter	pation / Job title (See Instructions)		Employer (See Instructions City Of Mission	<u>l</u> 5)		
	Date 06/27/2025	Full name of contributor out-of-state PAC (ID#:_Flores , Joey Contributor address; City; State; Zip Code Mission , TX 78573)		Amount of Contribution (\$)	\$240.00
	Principal occu Fire Fighter	pation / Job title (See Instructions)		Employer (See Instructions City Of Mission	s)		

	MONEI	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 4/12 Rpt: 7/28	
2	FILER NAME Mission Fire	Fighters Committee for Responsible Gov		3	Filer ID (Ethics Commission 00080704	n Filers)
4	Date 06/27/2025	 Full name of contributor)	7	Amount of Contribution (\$)	\$240.00
8	Principal occu Fire Fighter	Mission, TX 78572 pation / Job title (See Instructions)	Employer (See Instructions City of Mission	s)		
	Date 06/13/2025	Full name of contributor out-of-state PAC (ID#: Garcia , Juan Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$275.00
	Principal occu Fire Fighter	Mission , TX 78572 pation / Job title (See Instructions)	Employer (See Instructions City of Mission	<u> </u> S)		
	Date 06/27/2025	Full name of contributor out-of-state PAC (ID#:_ Garcia, Leroy Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$360.00
		Mission, TX 78572				
	Principal occu Fire Fighter	pation / Job title (See Instructions)	Employer (See Instructions City Of Mission	s)		
	Date 06/27/2025	Full name of contributor out-of-state PAC (ID#:_Garcia, Pilar Contributor address; City; State; Zip Code Mission, TX 78572		•	Amount of Contribution (\$)	\$300.00
	Principal occu Fire Fighter	pation / Job title (See Instructions)	Employer (See Instructions City Of Mission	<u>I</u> S)		
	Date 06/27/2025	Full name of contributor out-of-state PAC (ID#:_Garcia, Rudy Contributor address; City; State; Zip Code Mission , TX 78572			Amount of Contribution (\$)	\$300.00
	Principal occu Fire Fighter	pation / Job title (See Instructions)	Employer (See Instructions City Of Mission	s)		

	MONEI	ARY POLITICAL CONT	RIBUTION	S		SCHEDUL	E A1
	The Instru	ction Guide explains how to cor	mplete this forr	n.	1	Total pages Schedule A1: Sch: 5/12 Rpt: 8/28	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
		Fighters Committee for Responsible (00080704	
4	Date 06/27/2025	Gloria, Alonzo	f-state PAC (ID#:)	7	Amount of Contribution (\$)	\$240.00
		Mission, TX 78572					
8	Principal occu Fire Fighter	pation / Job title (See Instructions)	9	Employer (See Instructions City of Mission)		
	Date	Full name of contributor out-o	f-state PAC (ID#:)		Amount of Contribution (\$)	
	06/27/2025	Gonzalez, Alex					\$60.00
		Contributor address; City; State; Zip (Code				
		Mission, TX 78572					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Fire Fighter			City of Mission			
	Date	Full name of contributor ut-o	f-state PAC (ID#:)		Amount of Contribution (\$)	
	06/27/2025 Gonzalez, Jaime						\$180.00
		Contributor address; City; State; Zip (Mission, TX 78572	Code				
	Principal occu	pation / Job title (See Instructions)	1	Employer (See Instructions)		
	Fire Fighter	panent, ees and (ees mendenens)		City of Mission	,		
	Date	Full name of contributor out-o	f-state PAC (ID#:)		Amount of Contribution (\$)	
	06/27/2025	Granados, Alex Contributor address; City; State; Zip 0					\$120.00
		Mission , TX 78572					
	Principal occu Fire Fighter	pation / Job title (See Instructions)		Employer (See Instructions City of Mission)		
	Date	Full name of contributor ut-o	f-state PAC (ID#:)		Amount of Contribution (\$)	
	06/27/2025	Hernandez, Amy					\$30.00
		Contributor address; City; State; Zip (Code				
		Mission, TX 78572					
	Principal occu Fire Fighter	pation / Job title (See Instructions)		Employer (See Instructions City of Mission)		

	MONEI	ARY POLITICAL CONTRIBUTION)NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 6/12 Rpt: 9/28	
2	FILER NAME	Fighters Committee for Responsible Gov		3	Filer ID (Ethics Commission 00080704	n Filers)
_			,	ļ_		
4	Date 06/27/2025	 Full name of contributor		 	Amount of Contribution (\$)	\$120.00
		Mission , TX 78572				
8	Principal occu Fire Fighter	pation / Job title (See Instructions)	Employer (See Instructions City Of Mission	5)		
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	06/27/2025	Juarez, Beto				\$300.00
		Contributor address; City; State; Zip Code				
		Mission, TX 78572				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Fire Fighter		City Of Mission			
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	06/27/2025					\$180.00
		Contributor address; City; State; Zip Code Mission, TX 78573				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Fire Fighter	, ,	City of Mission			
	Date	Full name of contributor)	Π	Amount of Contribution (\$)	
	06/27/2025	Lerma, Andres	<i></i>		7 mileant of Continuation (4)	\$60.00
		Contributor address; City; State; Zip Code				,,,,,,,
		Mission, TX 78572				
	Principal occu Fire Fighter	pation / Job title (See Instructions)	Employer (See Instructions City Of Mission	5)		
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	06/27/2025	Longoria , Horacio				\$120.00
		Contributor address; City; State; Zip Code				
		Mission , TX 78572				
	Principal occu Fire Fighter	pation / Job title (See Instructions)	Employer (See Instructions City of Mission	s)		

	MONEI	ARY POLITICAL C	CONTRIBUTION	15		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 7/12 Rpt: 10/28	
2	FILER NAME	Fighters Committee for Respo	onsible Gov		3	Filer ID (Ethics Commission 00080704	n Filers)
_		· ·			<u> </u>		
4	Date 06/27/2025	5 Full name of contributorLongoria, Justin6 Contributor address; City; St	out-of-state PAC (ID#:)	ľ	Amount of Contribution (\$)	\$120.00
		Mission, TX 78572	ate, Zip Code				
8	Principal occu	pation / Job title (See Instructions) 9	Employer (See Instructions	;) (;)		
	Fire Fighter	patient to build (God metadatene	,	City Of Mission	,,		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/27/2025	Lopez, Danny					\$240.00
		Contributor address; City; St	ate; Zip Code				
		Mission, TX 78572					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u></u>		
	Fire Fighter		,	City of Mission	•		
Date Full name of cont		Full name of contributor	D and of otate DAC (ID))	Т	Amount of Contribution (\$)	
			out-of-state PAC (ID#:)		Amount of Continbution (\$)	\$20.00
	06/27/2025 Lopez, Ernesto						Φ20.00
		Contributor address; City; St	ate; Zip Code				
		Mississ TV 70570					
		Mission, TX 78572			<u> </u>		
	•	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Fire Fighter			City of Mission			
	Date	Full name of contributor	out-of-state PAC (ID#:			Amount of Contribution (\$)	
	06/27/2025	Lopez, Robert					\$300.00
		Contributor address; City; St	ate: Zip Code				
		, , , , , , , , , , , , , , , , , , , ,	,				
		Mission, TX 78572					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>L</u>		
	Fire Fighter		,	City of Mission	•		
		Full name of contributor			Г	Amount of Contribution (ft)	
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	# 00.00
	06/27/2025	Lopez, Victor					\$30.00
		Contributor address; City; St	ate; Zip Code				
		Mission, TX 78572					
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Fire Fighter			City of Mission			
			<u>'</u>				

	MONEI	ARY POLITICAL (CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains hov	v to complete this fo	rm.	1	Total pages Schedule A1: Sch: 8/12 Rpt: 11/28	
2	FILER NAME Mission Fire	Fighters Committee for Resp	onsible Gov		3	Filer ID (Ethics Commission 00080704	n Filers)
4	Date 06/27/2025	5 Full name of contributor Loredo, Jessica6 Contributor address; City; S	out-of-state PAC (ID#: tate; Zip Code)	7	Amount of Contribution (\$)	\$120.00
8	Principal occu Fire Fighter	Mission, TX 78572 pation / Job title (See Instruction	s) [9	Employer (See Instruction City of Mission	s)		
	Date 06/27/2025	Full name of contributor Loza, Joey Contributor address; City; S	out-of-state PAC (ID#: tate; Zip Code			Amount of Contribution (\$)	\$300.00
	Principal occu Fire Fighter	Mission, TX 78572 pation / Job title (See Instruction	s)	Employer (See Instruction City Of Mission	s)		
	Date 06/27/2025	Full name of contributor Montalvo , Alex Contributor address; City; S	out-of-state PAC (ID#: tate; Zip Code)		Amount of Contribution (\$)	\$60.00
		Mission , TX 78572			Ĺ		
	Fire Fighter	pation / Job title (See Instruction	5)	Employer (See Instruction City of Mission	s)		
 _		out-of-state PAC (ID#: tate; Zip Code			Amount of Contribution (\$)	\$300.00	
	Principal occu Fire Fighter	Mission, TX 78572 pation / Job title (See Instruction	s)	Employer (See Instruction City of Mission	<u> </u> s)		
	Date 06/27/2025	Full name of contributor Oliva, Rudy Contributor address; City; S MIssion, TX 78573	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$300.00
	Principal occu Fire Fighter	pation / Job title (See Instruction:	s)	Employer (See Instruction City Of Mission	s)		

	MONEI	ARY POLITICAL CO	NIRIBUTION	S		SCHEDUL	E A1
	The Instru	ction Guide explains how to	complete this form	n.	1	Total pages Schedule A1: Sch: 9/12 Rpt: 12/28	
2	FILER NAME Mission Fire	Fighters Committee for Respons	sible Gov		3	Filer ID (Ethics Commission 00080704	n Filers)
4	Date 06/27/2025	5 Full name of contributor Olivarez, Desi6 Contributor address; City; State	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$60.00
8	Principal occu Fire Fighter	Mission, TX 78572 pation / Job title (See Instructions)	9	Employer (See Instructions City of Mission)		
	Date 06/27/2025	Full name of contributor Osornio, Blas Contributor address; City; State	out-of-state PAC (ID#: ; Zip Code)		Amount of Contribution (\$)	\$60.00
	Principal occu Fire Fighter	Mission , TX 78572 pation / Job title (See Instructions)		Employer (See Instructions City of Mission)		
	Date 06/27/2025	Full name of contributor Ramirez, Joey Contributor address; City; State	out-of-state PAC (ID#:;)		Amount of Contribution (\$)	\$240.00
		Mission , TX 78572					
	Principal occu Fire Fighter	pation / Job title (See Instructions)		Employer (See Instructions City of Mission)		
	Date 06/27/2025	Full name of contributor Reyes, Mark Contributor address; City; State Mission, TX 78572	out-of-state PAC (ID#:; ; Zip Code			Amount of Contribution (\$)	\$300.00
	Principal occu Fire Fighter	pation / Job title (See Instructions)		Employer (See Instructions City Of Mission)		
	Date 06/27/2025	Full name of contributor Reyes, Mike Contributor address; City; State Mission, TX 78572	out-of-state PAC (ID#:; Zip Code			Amount of Contribution (\$)	\$60.00
	Principal occu Fire Fighter	pation / Job title (See Instructions)		Employer (See Instructions City Of Mission)		

	MONEI	ARY POLITICAL CONTRIBUTION	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this for	rm.	1	Total pages Schedule A1: Sch: 10/12 Rpt: 13/28	
2	FILER NAME	Fighters Committee for Responsible Gov		3	Filer ID (Ethics Commission 00080704	n Filers)
_		<u> </u>		_		
4	Date 06/27/2025	 Full name of contributor)	ľ	Amount of Contribution (\$)	\$20.00
		Mission, TX 78572				
8	Fire Fighter	pation / Job title (See Instructions) 9	Employer (See Instructions City of Mission	5)		
	Date 06/27/2025	Full name of contributor out-of-state PAC (ID#: Rosales , Mauricio Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$240.00
		Mission, TX 78572				
	Principal occu Fire Fighter	pation / Job title (See Instructions)	Employer (See Instructions City of Mission	s)		
	Date 06/27/2025	Full name of contributor)		Amount of Contribution (\$)	\$180.00
		Mission, TX 78572				
	Principal occu Fire Fighter	pation / Job title (See Instructions)	Employer (See Instructions City of Mission	5)		
	Date 06/27/2025	Full name of contributor out-of-state PAC (ID#:Saenz, Joel Contributor address; City; State; Zip Code Mission , TX 78572			Amount of Contribution (\$)	\$300.00
	Principal occu Fire Fighter	pation / Job title (See Instructions)	Employer (See Instructions City Of Mission	5)		
	Date 06/27/2025	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	\$120.00
	Principal occu Fire Fighter	pation / Job title (See Instructions)	Employer (See Instructions City of Mission	5)		

	MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1		
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 11/12 Rpt: 14/28	
2	FILER NAME	Fighters Committee for Responsible Gov		3	Filer ID (Ethics Commission 00080704	n Filers)
_				╄		
4	Date 5 Full name of contributor out-of-state PAC (ID#:) Salinas, Jorge 6 Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$60.00	
		Mission, TX 78572				
8	Principal occu Fire Fighter	oation / Job title (See Instructions)	9 Employer (See Instructions City of Mission	ıs)		
	Date Full name of contributor out-of-state PAC (ID#:) Salinas, Omar Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$300.00	
		Mission, TX 78572				
			Employer (See Instructions City of Mission	ıs)		
	Date Full name of contributor out-of-state PAC (ID#:) 06/27/2025 Sanchez, Brian Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$300.00	
		Mission, TX 78572				
			Employer (See Instructions City of MIssion	ıs)		
	Date Full name of contributor out-of-state PAC (ID#:) 02/07/2025 Silva, Michael Contributor address; City; State; Zip Code Mission, TX 78572-3612			Amount of Contribution (\$)	\$75.00	
Principal occupation / Job title (See Instructions) Fire Fighter		Employer (See Instructions City of MIssion	ıs)			
	Date 06/27/2025				Amount of Contribution (\$)	\$120.00
	Principal occu Fire Fighter	pation / Job title (See Instructions)	Employer (See Instructions City of Mission	ıs)		

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDUL	E A1		
	The Instru	ction Guide explains hov	v to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 12/12 Rpt: 15/28	
2	FILER NAME Mission Fire	Fighters Committee for Resp	onsible Gov			3	Filer ID (Ethics Commission 00080704	n Filers)
4	Date 06/27/2025	/2025 Full name of contributor out-of-state PAC (ID#:) Torres, Rick 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$240.00		
		Mission, TX 78572						
8	Principal occu Fire Fighter	pation / Job title (See Instructions	5)	9	Employer (See Instructions City of Mission	s)		
	Date 03/21/2025	Full name of contributor Trevino, Abel Contributor address; City; S	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$160.00
	Principal occu	Mission, TX 78572 pation / Job title (See Instructions	s)		Employer (See Instructions	<u>s)</u>		
	Fire fighter	pation / Job title (Jee matractions	3)		City of Mission	"		
	Date Full name of contributor out-of-state PAC (ID#:) 06/27/2025 Villalon, Robert Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$240.00			
		Mission, TX 78572						
	Principal occupation / Job title (See Instructions) Fire Fighter Employer (See Instruction City Of Mission		Employer (See Instructions City Of Mission	s)				
	Date Full name of contributor out-of-state PAC (ID#:) 06/27/2025 Villarreal, Juan Contributor address; City; State; Zip Code MIssion, TX 78572			Amount of Contribution (\$)	\$300.00			
	Principal occupation / Job title (See Instructions) Fire Fighter Employer (See Instruction City Of Mission		5)					
	Date Full name of contributor out-of-state PAC (ID#:) 06/27/2025 Williams, Douglas Contributor address; City; State; Zip Code Mission, TX 78572		•	Amount of Contribution (\$)	\$300.00			
	Principal occu Fire Fighter	pation / Job title (See Instructions	5)		Employer (See Instructions City of Mission	5)		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment					
4 7 . 1					
1 Total pages Schedule F1: Sch: 1/13 Rpt: 16/28	2 FILER NAME Mission Fire Fighters Committee for Responsible Gov 3 Filer ID (Ethics Commission Filers) 00080704				
4 Date	5 Payee name				
01/15/2025	ALC Steaks				
6 Amount (\$) \$540.08	7 Payee address; City; State; Zip Code 1204 N Lamar				
Expenditure from corporate funds	Austin , TX 78703				
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.				
ZA ZIIZII GILZ	Check if Austin, TX, officeholder living expense				
	Dinner with TSAFF with DVP Alvarado				
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
expenditure to benefit C/OI					
Date	Payee name				
02/19/2025	ALC Steaks				
Amount (\$)	Payee address; City; State; Zip Code				
\$345.70	1204 N Lamar				
Expenditure from	Auctin TY 78703				
corporate funds	Austin , TX 78703				
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Tayas, Complete Schedule T				
EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
	Dinner With DVP Alvarado				
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held				
Date	Payee name				
03/19/2025	ALC Steaks				
Amount (\$)	Payee address; City; State; Zip Code				
\$666.51	1204 N Lamar				
Expenditure from					
corporate funds	Austin , TX 78703				
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.				
	Check if Austin, TX, officeholder living expense Dinner with DVP Alvarado				
	Diffiler with DVP Alvarado				
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OH				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 2/13 Rpt: 17/28	Mission Fire Fighters Committee for Responsible Gov 00080704
4 Date	5 Payee name
03/19/2025	ALC Steaks
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$600.05	1204 N Lamar
Expenditure from corporate funds	Austin , TX 78703
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Dinner with DVP Alvarado
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/12/2025	Allianz Travel Ins.
Amount (\$)	Payee address; City; State; Zip Code
\$19.25	
Expenditure from corporate funds	TX
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Air Flight Travel Insurance
	, and ringster mean actions
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
01/02/2025	Amazon
Amount (\$)	Payee address; City; State; Zip Code
\$32.46	81226
**=:::	
Expenditure from corporate funds	Seattle, WA 98108
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Sur Charge For Gift
	Sar Sharge For Shir
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Co

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)			
Sch: 3/13 Rpt: 18/28	Mission Fire Fighters Committee for Responsible Gov 00080704			
4 Date	5 Payee name			
05/23/2025	Amazon			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
\$646.26	81226			
Expenditure from corporate funds	Seattle, WA 98108			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF EXPENDITURE	Gift/Awards/Memorials Expense			
	Check if Austin, TX, officeholder living expense Order gifts for Members			
	Order gills for Weithbers			
Complete CNI V if direct	Candidate/Officeholder name Office sought Office held			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI				
Date	Payee name			
01/21/2025	Amazon			
Amount (\$)	Payee address; City; State; Zip Code			
\$54.10	81226			
Expenditure from corporate funds	Seattle, WA 98108			
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF	Office Overhead/Rental Expense			
EXPENDITURE	Check if Austin, TX, officeholder living expense			
	Office Supplys			
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
expenditure to benefit C/O	1			
Date	Payee name			
02/03/2025	Amazon			
Amount (\$)	Payee address; City; State; Zip Code			
\$16.23	81226			
Expenditure from corporate funds	Seattle, WA 98108			
PURPOSE	· · · · · · · · · · · · · · · · · · ·			
OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T.			
EXPENDITURE	Check if Austin, TX, officeholder living expense			
	Office Supply			
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
expenditure to benefit C/O	expenditure to benefit C/OH			

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
TTALE (Control of State Control of C

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.		
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)		
Sch: 4/13 Rpt: 19/28	Mission Fire Fighters Committee for Responsible Gov 00080704		
4 Date	5 Payee name		
03/19/2025	Beez Kneez		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$166.40	610 Nueces St Suite 100		
Expenditure from corporate funds	Austin , TX 78701		
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description		
EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
	Drink with DVP Alvarado		
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/OI	1		
Date	Payee name		
03/20/2025	Beez Kneez		
Amount (\$)	Payee address; City; State; Zip Code		
\$95.00	610 Nueces St Suite 100		
Expenditure from corporate funds	Austin , TX 78701		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description		
EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
	Drinks with DVP Alvarado		
	Sinno mai 3 vi 7 avaldo		
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/OI			
Date	Payee name		
03/21/2025	China Wok		
Amount (\$)	Payee address; City; State; Zip Code		
\$49.77	3939 I-35 FC-7		
Ψ-0.17	0303 1 03 1 0 1		
Expenditure from corporate funds	San Marcos, TX 78666		
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	Food/Beverage Expense		
Di Libilone	Check if Austin, TX, officeholder living expense		
	Lunch for firefighters		
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/OH			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.		
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)		
Sch: 5/13 Rpt: 20/28	Mission Fire Fighters Committee for Responsible Gov 00080704		
4 Date	5 Payee name		
01/13/2025	Circle K		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$89.53	2309 E Business Hwy		
	, and the second se		
Expenditure from corporate funds	Mission, TX 78572		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.		
EXI ENDITORE	Check if Austin, TX, officeholder living expense		
	Travel to Austin		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/Oi			
Date	Payee name		
02/12/2025	Delta Air		
Amount (\$)	Payee address; City; State; Zip Code		
\$316.96	1030 Delta		
Ψ510.50	1000 Della		
Expenditure from			
corporate funds	Atlanta , GA 30354		
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.		
_/	Check if Austin, TX, officeholder living expense		
	Flew To Austin to meet with DVP Alvarado		
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/Oi	1		
Date	Payee name		
02/28/2025	Drunken Chicken		
Amount (\$)	Payee address; City; State; Zip Code		
\$379.44	104 N. Mayberry		
Ψ0.0.44	····,		
Expenditure from	Mission TV 70572		
corporate funds	Mission, TX 78572		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description		
EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.		
	Check if Austin, TX, officeholder living expense Lunch for City Officials while doing Fire Ops 101		
	Lunch for City Officials write doing. Fire Ops 101		
Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH			
experience to belief 6/01	•		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	l Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 6/13 Rpt: 21/28	Mission Fire Fighters Committee for Responsible Gov 00080704
4 Date	5 Payee name
02/21/2025	Dumont's Down Low
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$194.29	214 W. 4th St. Suite B
Expenditure from corporate funds	Austin, TX 78701
8 PURPOSE	
OF	
EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Drinks with DVP Alvarado
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
01/16/2025	Hilton Garden Inn
	11 11 11 11
Amount (\$)	Payee address; City; State; Zip Code
\$507.65	301 W 17th Street
Expenditure from	
corporate funds	Austin , TX 78741
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
	Check if Austin, TX, officeholder living expense
	Login for Firefighter Day at the Capital
Commission ONUVIVIII	Condidate/Officeholder name
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
01/16/2025	Hilton Garden Inn
Amount (\$)	Payee address; City; State; Zip Code
\$373.74	301 W 17th Street
Expenditure from corporate funds	Austin , TX 78741
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Office Overhead/Rental Expense Cross of the Control of the Contro
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Login for Firefighter Day at capital
_	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	l Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 7/13 Rpt: 22/28	Mission Fire Fighters Committee for Responsible Gov 00080704
4 Date	5 Payee name
03/18/2025	Home Slice Pizza
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$253.34	1415 S Congress
Expenditure from	Austin , TX 78704
corporate funds	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Firefighter day at Capital Lunch for Members
	Thoughts any at capital fallowing monitoring
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
03/19/2025	Little Woodrows
Amount (\$)	Payee address; City; State; Zip Code
\$56.73	520 W 6th Stree
Expenditure from	Austin , TX 78701
corporate funds	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Drinks with DVP Alvarado
	Dilliks Will DVI Alvalado
Commission ONII V if dispose	Condidate/Office helder name Office accepts
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/23/2025	Mancha Screen Printing
Amount (\$)	Payee address; City; State; Zip Code
\$571.56	4120 Pecan Blvd.
Expenditure from	Mcallen, TX 78501
corporate funds	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Printing for the gifts for members
	Printing for the gifts for members
Occupation Children	Ora didata (Office hadden grans
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
SAPORARIO TO BOTTON O/OI	•

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment				
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)			
Sch: 8/13 Rpt: 23/28	Mission Fire Fighters Committee for Responsible Gov 00080704			
4 Date	5 Payee name			
06/20/2025	Pappadaux			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
\$231.56	1610 W Express 83			
Expenditure from corporate funds	Pharr , TX 78577			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.			
	Check if Austin, TX, officeholder living expense Lunch with DVP Alvarado			
	Edition Will BVI 74Varado			
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
expenditure to benefit C/OI				
Date	Payee name			
01/15/2025	QТ			
Amount (\$)	Payee address; City; State; Zip Code			
\$80.16	4142 S Loop 1604 E, San Antonio,			
Expenditure from				
corporate funds	San Antonio, TX 78264			
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
	Travel back from Austin			
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
Date	Payee name			
04/28/2025	Quintanilla, Omar			
Amount (\$)	Payee address; City; State; Zip Code			
\$500.00				
Expenditure from corporate funds	TX			
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
	Candidate/Officeholder/Political Committee			
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			

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

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

Credit Card Payment	The Instruction Guide explains how to complete t	this form.	
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)	
Sch: 9/13 Rpt: 24/28	Mission Fire Fighters Committee for Responsible Gov	00080704	
4 Date	5 Payee name		
01/14/2025	Ranch 616		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$387.97	616 Nueces		
Expenditure from			
corporate funds	Austin , TX 78701		
8 PURPOSE OF		escription	
EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	Li Di	nner with DVP Alvarado	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held	
expenditure to benefit C/OI			
Date	Payee name		
02/20/2025	Ranch 616		
Amount (\$)	Payee address; City; State; Zip Code		
\$143.53	616 Nueces		
, , , , , ,			
Expenditure from corporate funds	Austin , TX 78701		
PURPOSE OF	, , , , , , , , , , , , , , , , , , ,	escription	
EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	Li Di	nner with DVP Alvarado	
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held	
expenditure to benefit C/OI	1		
Date	Payee name		
03/03/2025	Republic of the Rio Grande		
Amount (\$)	Payee address; City; State; Zip Code		
\$201.03	1411 S 10th		
Expenditure from corporate funds	Mcallen , TX 78501		
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) De	escription	
OF EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.	
LXI LIBITORE		Check if Austin, TX, officeholder living expense	
		nner with City Official	
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought	Office held	
expenditure to benefit C/OH			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.		
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)		
Sch: 10/13 Rpt: 25/28	Mission Fire Fighters Committee for Responsible Gov 00080704		
4 Date	5 Payee name		
05/15/2025	Sams		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$1,362.59	7601 N 10th		
Expenditure from corporate funds	Mcallen , TX 78501		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.		
	Check if Austin, TX, officeholder living expense Gifts for members		
	Gitts for members		
Complete CNII V if direct	Candidate/Officeholder name Office sought Office hold		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought Office held		
Date	Payee name		
03/18/2025	Shoal Creek Saloon		
Amount (\$)	Payee address; City; State; Zip Code		
\$139.00	909 N. Lamar Blvd.		
Expenditure from corporate funds	Austin, TX 78703		
PURPOSE			
OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T.		
EXPENDITURE	Check if Austin, TX, officeholder living expense		
	Lunch for firefighters and DVP Alvarado		
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/OI	1		
Date	Payee name		
02/20/2025	Stiles Switch BBQ		
Amount (\$)	Payee address; City; State; Zip Code		
\$126.58	6610 N. Lamar Blvd		
Ψ120.30	0010 N. Lamar Bivu		
Expenditure from			
corporate funds	Austin, TX 78572		
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.		
-	Check if Austin, TX, officeholder living expense Lunch with DVP Alvarado and Firefighters		
	Eurich with DVP Alvarado and Firelighters		
Complete CNU V if direct	Condidate/Officeholder name Office sought		
Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH			
,			

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:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)	
Sch: 11/13 Rpt: 26/28	Mission Fire Fighters Committee for Respons	ible Gov 00080704	
4 Date	5 Payee name		
05/19/2025	Target		
6 Amount (\$)	7 Payee address; City; State; Zip C	Code	
\$335.55	2427 E. Expressway 83		
,,,,,,			
Expenditure from corporate funds	Mission, TX 78572		
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
EXPENDITURE	Gift/Awards/Memorials Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Gift for Members	
9 Complete ONLY if direct	Candidate/Officeholder name Office so	L ought Office held	
expenditure to benefit C/O		5	
Date	Payee name		
03/21/2025	The Cloak Room		
Amount (\$) \$148.98	Payee address; City; State; Zip (1300 Colorado St.	Souce	
Ф146.98	1300 Colorado St.		
Expenditure from corporate funds	Austin, TX 78701		
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
OF EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Drinks with DVP Alvarado	
		Diffice with DVT / Warded	
Complete ONLY if direct	Candidate/Officeholder name Office so	U Office held	
expenditure to benefit C/OH			
Date	Payon name		
01/15/2025	Payee name The Tavern		
		Codo	
Amount (\$) \$166.04	Payee address; City; State; Zip (922 W 12th St.	coue -	
Φ100.04	JEZ VV IZIII JI.		
Expenditure from corporate funds	Austin, TX 78703		
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
OF EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.	
-		Check if Austin, TX, officeholder living expense Drinks with DVP Alvarado	
		Dilliks with DVI Alvarado	
Complete ONLY if direct	Candidate/Officeholder name Office so	Dught Office held	
expenditure to benefit C/O		Onice Held	

SCHEDULE F1

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage
Contributions/ Donations Made Ry - Giff(Alwards/Me)

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
Sch: 12/13 Rpt: 27/28	Mission Fire Fighters Committee for Responsible Gov 00080704	
4 Date	5 Payee name	
02/20/2025	Uptown Sports Club	
6 Amount (\$) \$112.22	7 Payee address; City; State; Zip Code 1200 E. 6th St.	
·		
Expenditure from corporate funds	Austin, TX 78702	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Food/Beverage Expense	
EXI ENDITORE	Check if Austin, TX, officeholder living expense	
	Dinner with DVP Alvarado	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
06/27/2025	Villalobos, Denise	
Amount (\$)	Payee address; City; State; Zip Code	
\$500.00	rayoo addrood, oily, olde, zip codo	
Expenditure from corporate funds	TX	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Contributions/Donations Made By	
EXI ENDITORE	Candidate/Officeholder/Political Committee	
	Contributions	
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
05/06/2025	Villalobos, Javier	
Amount (\$)	Payee address; City; State; Zip Code	
\$500.00	. 27 22 222 222 200, Oity, Oitte, Zip Oode	
φ500.00		
Expenditure from corporate funds	TX	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Contributions/Donations Made By	
EXPENDITURE	Candidate/Officeholder/Political Committee	
	Contributions	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OH		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committe

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

The Instruction Guide explains how to complete this form.			
2 FILER NAME 3 Filer ID (Ethics Commission Filers)			
Mission Fire Fighters Committee for Responsible Gov 00080704			
5 Payee name			
Walmart			
7 Payee address; City; State; Zip Code			
2410 E Expressway			
Mission , TX 78574			
(a) Category (See Categories listed at the top of this schedule) (b) Description			
Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.			
Check if Austin, TX, officeholder living expense Drinks for meals for city officials doing Fire Ops101			
Diffics for theats for city difficials doing File Opsion			
Condidate/Officeholder name Office sought Office hold			
Candidate/Officeholder name Office sought Office held H			
Payee name			
Whataburger			
Payee address; City; State; Zip Code			
8300 N. Interstate 35			
San Antonio, TX 78239			
(a) Category (See Categories listed at the top of this schedule) (b) Description			
Food/Beverage Expense			
Check if Austin, TX, officeholder living expense			
Lunch For Firefighter day			
Candidate/Officeholder name Office sought Office held H			
Payee name			
Whataburger			
Payee address; City; State; Zip Code			
11135 N. Interstate Hwy 35			
Austin, TX 78753			
(a) Category (See Categories listed at the top of this schedule) (b) Description			
Food/Beverage Expense			
Check if Austin, TX, officeholder living expense			
Lunch with Firefighters			
Candidate/Officeholder name Office sought Office held			
expenditure to benefit C/OH			