

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) 00067651	2 Total pages filed: 39
3 COMMITTEE NAME Conroe Professional Firefighters Association - PAC			OFFICE USE ONLY Date Received ELECTRONICALLY FILED 07/14/2025 Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 306 Conroe, TX 77305-0306		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mr. Robert NICKNAME LAST SUFFIX Woolery		
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 4541 Duval In Cleveland, TX 77328		
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 4541 Duval Ln. CLEVELAND, TX 77328		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (936) 444-5678		
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	

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GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Conroe Professional Firefighters Association - PAC	13 Filer ID (Ethics Commission Filers) 00067651
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	
		B. Opposed	
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported	
		B. Opposed	
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	Rep. Will Metcalf State Representative	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 32,091.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 3,939.92
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 48,157.27
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. Robert Woolery

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 39

17 COMMITTEE NAME Conroe Professional Firefighters Association - PAC		18 Filer ID (Ethics Commission Filers) 00067651
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 32,091.00
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	\$ 3,939.92
11.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
14.	<input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 7,975.35
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/26 Rpt: 4/39
2 FILER NAME Conroe Professional Firefighters Association - PAC		3 Filer ID (Ethics Commission Filers) 00067651
4 Date 06/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, BOBBY 6 Contributor address; City; State; Zip Code Willis, TX 77318	7 Amount of Contribution (\$) \$385.00
8 Principal occupation / Job title (See Instructions) FIREFIGHTER		9 Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANTILLEY, JASON Contributor address; City; State; Zip Code MONTGOMERY, TX 77356	Amount of Contribution (\$) \$55.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Acosta, Miguel Contributor address; City; State; Zip Code Houston, TX 77012	Amount of Contribution (\$) \$165.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARKER, MICHAEL Contributor address; City; State; Zip Code Conroe, TX 77384	Amount of Contribution (\$) \$275.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARNES, MATTHEW Contributor address; City; State; Zip Code BRYAN, TX 77082	Amount of Contribution (\$) \$55.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/26 Rpt: 5/39
2 FILER NAME Conroe Professional Firefighters Association - PAC		3 Filer ID (Ethics Commission Filers) 00067651
4 Date 06/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BECKER, CHARLES <hr/> 6 Contributor address; City; State; Zip Code CONROE, TX 77304	7 Amount of Contribution (\$) \$385.00
8 Principal occupation / Job title (See Instructions) FIREFIGHTER		9 Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BECKER, TYLER <hr/> Contributor address; City; State; Zip Code CONROE, TX 77304	Amount of Contribution (\$) \$165.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENAVIDEZ, MARTIN <hr/> Contributor address; City; State; Zip Code SPRING, TX 77373	Amount of Contribution (\$) \$275.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOATMAN, DAWSON <hr/> Contributor address; City; State; Zip Code SPRING, TX 77373	Amount of Contribution (\$) \$275.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROCHTRUP, CLINTON <hr/> Contributor address; City; State; Zip Code COLLEGE STATION, TX 77845	Amount of Contribution (\$) \$165.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/26 Rpt: 6/39
2 FILER NAME Conroe Professional Firefighters Association - PAC		3 Filer ID (Ethics Commission Filers) 00067651
4 Date 06/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROOKS, FRANK <hr/> 6 Contributor address; City; State; Zip Code MAGNOLIA, TX 77354	7 Amount of Contribution (\$) \$385.00
8 Principal occupation / Job title (See Instructions) FIREFIGHTER		9 Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURKHALTER, RYAN <hr/> Contributor address; City; State; Zip Code MAGNOLIA, TX 77354	Amount of Contribution (\$) \$385.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Balboa, Richard <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$275.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Booker, Jake <hr/> Contributor address; City; State; Zip Code La Porte, TX 77571	Amount of Contribution (\$) \$165.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruce, Nathan <hr/> Contributor address; City; State; Zip Code COLLEGE STATION, TX 77840	Amount of Contribution (\$) \$385.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/26 Rpt: 7/39
2 FILER NAME Conroe Professional Firefighters Association - PAC		3 Filer ID (Ethics Commission Filers) 00067651
4 Date 06/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruner, Charles <hr/> 6 Contributor address; City; State; Zip Code Navasota, TX 77868	7 Amount of Contribution (\$) \$385.00
8 Principal occupation / Job title (See Instructions) FIREFIGHTER		9 Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARROLL, JOHN <hr/> Contributor address; City; State; Zip Code Conroe, TX 77301	Amount of Contribution (\$) \$0.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASPER, ANDREW <hr/> Contributor address; City; State; Zip Code LUFKIN, TX 75904	Amount of Contribution (\$) \$165.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASPER, DYLAN <hr/> Contributor address; City; State; Zip Code LUFKIN, TX 75904	Amount of Contribution (\$) \$165.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAVIS, THOMAS <hr/> Contributor address; City; State; Zip Code CONROE, TX 77306	Amount of Contribution (\$) \$220.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/26 Rpt: 8/39
2 FILER NAME Conroe Professional Firefighters Association - PAC		3 Filer ID (Ethics Commission Filers) 00067651
4 Date 06/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLEMENTS, JONATHON <hr/> 6 Contributor address; City; State; Zip Code BAYTOWN, TX 77521	7 Amount of Contribution (\$) \$165.00
8 Principal occupation / Job title (See Instructions) FIREFIGHTER		9 Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COTTAR, AUGUST <hr/> Contributor address; City; State; Zip Code WILLIS, TX 77318	Amount of Contribution (\$) \$275.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COTTAR, STEPHAN <hr/> Contributor address; City; State; Zip Code WILLIS, TX 77318	Amount of Contribution (\$) \$220.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conlee, James <hr/> Contributor address; City; State; Zip Code CONROE, TX 77302	Amount of Contribution (\$) \$275.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DODD, KAIN <hr/> Contributor address; City; State; Zip Code MILANO, TX 76556	Amount of Contribution (\$) \$385.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/26 Rpt: 9/39
2 FILER NAME Conroe Professional Firefighters Association - PAC		3 Filer ID (Ethics Commission Filers) 00067651
4 Date 06/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DODD, KALEB <hr/> 6 Contributor address; City; State; Zip Code MILANO, TX 76556	7 Amount of Contribution (\$) \$385.00
8 Principal occupation / Job title (See Instructions) FIREFIGHTER		9 Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAJKUS, LANE <hr/> Contributor address; City; State; Zip Code COLLEGE STATION, TX 77840	Amount of Contribution (\$) \$385.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERRELL, BRANDEN <hr/> Contributor address; City; State; Zip Code WILLIS, TX 77378	Amount of Contribution (\$) \$165.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERRELL, CLINTON <hr/> Contributor address; City; State; Zip Code SPRING, TX 77386	Amount of Contribution (\$) \$385.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOSTER, DANIEL <hr/> Contributor address; City; State; Zip Code CONROE, TX 77306	Amount of Contribution (\$) \$275.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/26 Rpt: 10/39
2 FILER NAME Conroe Professional Firefighters Association - PAC		3 Filer ID (Ethics Commission Filers) 00067651
4 Date 06/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANCIS, MATTHEW <hr/> 6 Contributor address; City; State; Zip Code MONTGOMERY, TX 77356	7 Amount of Contribution (\$) \$165.00
8 Principal occupation / Job title (See Instructions) FIREFIGHTER		9 Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANKS, JOEL <hr/> Contributor address; City; State; Zip Code KINGWOOD, TX 77338	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALLENO, JOSEPH <hr/> Contributor address; City; State; Zip Code CONROE, TX 77385	Amount of Contribution (\$) \$165.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARVEY, TOM <hr/> Contributor address; City; State; Zip Code MONTGOMERY, TX 77356	Amount of Contribution (\$) \$275.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GENOVESI, MICHAEL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77088	Amount of Contribution (\$) \$385.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/26 Rpt: 11/39
2 FILER NAME Conroe Professional Firefighters Association - PAC		3 Filer ID (Ethics Commission Filers) 00067651
4 Date 06/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GEORGE, CHRISTOPHER 6 Contributor address; City; State; Zip Code SPRING, TX 77388	7 Amount of Contribution (\$) \$70.00
8 Principal occupation / Job title (See Instructions) FIREFIGHTER		9 Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GIFFORD, CHRISTOPHER Contributor address; City; State; Zip Code CONROE, TX 77303	Amount of Contribution (\$) \$165.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRANADOS, JOSE Contributor address; City; State; Zip Code COLLEGE STATION, TX 77445	Amount of Contribution (\$) \$110.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAY, MICHAEL Contributor address; City; State; Zip Code COLLEGE STATION, TX 77445	Amount of Contribution (\$) \$0.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUILLEN, MARCO Contributor address; City; State; Zip Code SPRING, TX 77388	Amount of Contribution (\$) \$165.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/26 Rpt: 12/39
2 FILER NAME Conroe Professional Firefighters Association - PAC		3 Filer ID (Ethics Commission Filers) 00067651
4 Date 06/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Mathew <hr/> 6 Contributor address; City; State; Zip Code SPRING, TX 77840	7 Amount of Contribution (\$) \$0.00
8 Principal occupation / Job title (See Instructions) FIREFIGHTER		9 Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greer, Patrick <hr/> Contributor address; City; State; Zip Code MONTGOMERY, TX 77316	Amount of Contribution (\$) \$165.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALE, ERIC <hr/> Contributor address; City; State; Zip Code CONROE, TX 77302	Amount of Contribution (\$) \$0.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMILTON, JOSH <hr/> Contributor address; City; State; Zip Code WOODLANDS, TX 77382	Amount of Contribution (\$) \$55.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMMOND, JUSTIN <hr/> Contributor address; City; State; Zip Code MONTGOMERY, TX 77316	Amount of Contribution (\$) \$385.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/26 Rpt: 13/39
2 FILER NAME Conroe Professional Firefighters Association - PAC		3 Filer ID (Ethics Commission Filers) 00067651
4 Date 06/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARDY, FARAND <hr/> 6 Contributor address; City; State; Zip Code SPRING, TX 77389	7 Amount of Contribution (\$) \$0.00
8 Principal occupation / Job title (See Instructions) FIREFIGHTER		9 Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARFORD, SARAH <hr/> Contributor address; City; State; Zip Code TOMBALL, TX 77385	Amount of Contribution (\$) \$385.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERNANDEZ, ANTHONY <hr/> Contributor address; City; State; Zip Code TOMBALL, TX 77375	Amount of Contribution (\$) \$165.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, MICHAEL <hr/> Contributor address; City; State; Zip Code TOMBALL, TX 77375	Amount of Contribution (\$) \$385.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HIPPESTIEL, SCOTT <hr/> Contributor address; City; State; Zip Code WOODLANDS, TX 77381	Amount of Contribution (\$) \$165.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/26 Rpt: 14/39
2 FILER NAME Conroe Professional Firefighters Association - PAC		3 Filer ID (Ethics Commission Filers) 00067651
4 Date 06/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOSLER, ZACHARY <hr/> 6 Contributor address; City; State; Zip Code SPRING, TX 77376	7 Amount of Contribution (\$) \$220.00
8 Principal occupation / Job title (See Instructions) FIREFIGHTER		9 Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUIZINGA, CLAY <hr/> Contributor address; City; State; Zip Code COLLEGE STATION, TX 77840	Amount of Contribution (\$) \$0.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUNSAKER, ADAM <hr/> Contributor address; City; State; Zip Code HUNTSVILLE, TX 77340	Amount of Contribution (\$) \$220.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hayden, Kenneth <hr/> Contributor address; City; State; Zip Code Cleveland, TX 77328	Amount of Contribution (\$) \$220.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) INGLE, JAMES <hr/> Contributor address; City; State; Zip Code CONROE, TX 77303	Amount of Contribution (\$) \$385.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/26 Rpt: 15/39
2 FILER NAME Conroe Professional Firefighters Association - PAC		3 Filer ID (Ethics Commission Filers) 00067651
4 Date 06/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, DAVID <hr/> 6 Contributor address; City; State; Zip Code CONROE, TX 77303	7 Amount of Contribution (\$) \$0.00
8 Principal occupation / Job title (See Instructions) FIREFIGHTER		9 Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, JOSH <hr/> Contributor address; City; State; Zip Code Brenham, TX 77833	Amount of Contribution (\$) \$275.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KASBERG, GREG <hr/> Contributor address; City; State; Zip Code COLLEGE STATION, TX 77845	Amount of Contribution (\$) \$385.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, Brockton <hr/> Contributor address; City; State; Zip Code HUNTSVILLE, TX 77340	Amount of Contribution (\$) \$165.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, KEVIN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77070	Amount of Contribution (\$) \$275.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/26 Rpt: 16/39
2 FILER NAME Conroe Professional Firefighters Association - PAC		3 Filer ID (Ethics Commission Filers) 00067651
4 Date 06/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOLB, STEPHEN <hr/> 6 Contributor address; City; State; Zip Code WILLIS, TX 77318	7 Amount of Contribution (\$) \$385.00
8 Principal occupation / Job title (See Instructions) FIREFIGHTER		9 Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAVELLE, KEVIN <hr/> Contributor address; City; State; Zip Code CONROE, TX 77384	Amount of Contribution (\$) \$165.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LECROY, CODY <hr/> Contributor address; City; State; Zip Code SPRING, TX 77379	Amount of Contribution (\$) \$385.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, JONATHAN <hr/> Contributor address; City; State; Zip Code WEBSTER, TX 77598	Amount of Contribution (\$) \$165.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEVRIER, BRADLEY <hr/> Contributor address; City; State; Zip Code MONTGOMERY, TX 77356	Amount of Contribution (\$) \$220.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/26 Rpt: 17/39
2 FILER NAME Conroe Professional Firefighters Association - PAC		3 Filer ID (Ethics Commission Filers) 00067651
4 Date 06/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIS, JAMES <hr/> 6 Contributor address; City; State; Zip Code CONROE, TX 77384	7 Amount of Contribution (\$) \$385.00
8 Principal occupation / Job title (See Instructions) FIREFIGHTER		9 Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MADDOX, JOSEPH <hr/> Contributor address; City; State; Zip Code CONROE, TX 77304	Amount of Contribution (\$) \$275.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAIDEN, THOMAS <hr/> Contributor address; City; State; Zip Code CONROE, TX 77302	Amount of Contribution (\$) \$385.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARGRAFF, MICHAEL <hr/> Contributor address; City; State; Zip Code CONROE, TX 75070	Amount of Contribution (\$) \$385.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDONALD, RAYMOND <hr/> Contributor address; City; State; Zip Code MONTGOMERY, TX 77317	Amount of Contribution (\$) \$385.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/26 Rpt: 18/39
2 FILER NAME Conroe Professional Firefighters Association - PAC		3 Filer ID (Ethics Commission Filers) 00067651
4 Date 06/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERILAT, CHAD <hr/> 6 Contributor address; City; State; Zip Code MONTGOMERY, TX 77316	7 Amount of Contribution (\$) \$165.00
8 Principal occupation / Job title (See Instructions) FIREFIGHTER		9 Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERRICK, ALEX <hr/> Contributor address; City; State; Zip Code CONROE, TX 77384	Amount of Contribution (\$) \$55.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEYER, CALEB <hr/> Contributor address; City; State; Zip Code LEXINGTON, TX 78947	Amount of Contribution (\$) \$275.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MIERZWA, NATE <hr/> Contributor address; City; State; Zip Code WILLIS, TX 77378	Amount of Contribution (\$) \$385.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, JOE <hr/> Contributor address; City; State; Zip Code CONROE, TX 77301	Amount of Contribution (\$) \$220.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/26 Rpt: 19/39
2 FILER NAME Conroe Professional Firefighters Association - PAC		3 Filer ID (Ethics Commission Filers) 00067651
4 Date 06/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, KENTON 6 Contributor address; City; State; Zip Code CONROE, TX 77384	7 Amount of Contribution (\$) \$385.00
8 Principal occupation / Job title (See Instructions) FIREFIGHTER		9 Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITCHELL, BYRON Contributor address; City; State; Zip Code CONROE, TX 77301	Amount of Contribution (\$) \$220.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MIZRANY, GORDON Contributor address; City; State; Zip Code WILLIS, TX 77318	Amount of Contribution (\$) \$385.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONTOKA, ESTEBAN Contributor address; City; State; Zip Code CONROE, TX 77384	Amount of Contribution (\$) \$385.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORGAN, CHASE Contributor address; City; State; Zip Code CONROE, TX 77304	Amount of Contribution (\$) \$385.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/26 Rpt: 20/39
2 FILER NAME Conroe Professional Firefighters Association - PAC		3 Filer ID (Ethics Commission Filers) 00067651
4 Date 06/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOSQUEDA, DANIEL <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77093	7 Amount of Contribution (\$) \$275.00
8 Principal occupation / Job title (See Instructions) FIREFIGHTER		9 Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MULLINAX, RYAN <hr/> Contributor address; City; State; Zip Code WILLIS, TX 77378	Amount of Contribution (\$) \$385.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURPHY, KEVIN <hr/> Contributor address; City; State; Zip Code SPRING, TX 77388	Amount of Contribution (\$) \$275.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mathis, Trevor <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$385.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Tyler <hr/> Contributor address; City; State; Zip Code Lexington, TX 78947	Amount of Contribution (\$) \$385.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/26 Rpt: 21/39
2 FILER NAME Conroe Professional Firefighters Association - PAC		3 Filer ID (Ethics Commission Filers) 00067651
4 Date 06/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEITZEL, CORY 6 Contributor address; City; State; Zip Code MAGNOLIA, TX 77354	7 Amount of Contribution (\$) \$385.00
8 Principal occupation / Job title (See Instructions) FIREFIGHTER		9 Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NESOM, GREG Contributor address; City; State; Zip Code CONROE, TX 77301	Amount of Contribution (\$) \$275.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSTH, HANS Contributor address; City; State; Zip Code CONROE, TX 77384	Amount of Contribution (\$) \$165.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PABEN, ROBERT Contributor address; City; State; Zip Code WARREN, TX 77664	Amount of Contribution (\$) \$165.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAINTER, GENE Contributor address; City; State; Zip Code CONROE, TX 77303	Amount of Contribution (\$) \$165.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/26 Rpt: 22/39
2 FILER NAME Conroe Professional Firefighters Association - PAC		3 Filer ID (Ethics Commission Filers) 00067651
4 Date 06/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEETERS, RYDER 6 Contributor address; City; State; Zip Code CONROE, TX 77304	7 Amount of Contribution (\$) \$275.00
8 Principal occupation / Job title (See Instructions) FIREFIGHTER		9 Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERKINS, MATTHEW Contributor address; City; State; Zip Code TOMBALL, TX 77377	Amount of Contribution (\$) \$385.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POLNICK, KALEB Contributor address; City; State; Zip Code SPRING, TX 77386	Amount of Contribution (\$) \$0.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RANDALL, TRACE Contributor address; City; State; Zip Code HOUSTON, TX 77070	Amount of Contribution (\$) \$385.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REED, RYAN Contributor address; City; State; Zip Code WILLIS, TX 77318	Amount of Contribution (\$) \$165.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/26 Rpt: 23/39
2 FILER NAME Conroe Professional Firefighters Association - PAC		3 Filer ID (Ethics Commission Filers) 00067651
4 Date 06/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, BYRON <hr/> 6 Contributor address; City; State; Zip Code NEW WAVERLY, TX 77358	7 Amount of Contribution (\$) \$175.00
8 Principal occupation / Job title (See Instructions) FIREFIGHTER		9 Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, JAKOB <hr/> Contributor address; City; State; Zip Code CONROE, TX 77304	Amount of Contribution (\$) \$440.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROMEO, ANTHONY <hr/> Contributor address; City; State; Zip Code SEABROOK, TX 77586	Amount of Contribution (\$) \$275.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROY, PHILLIP <hr/> Contributor address; City; State; Zip Code SPRING, TX 77373	Amount of Contribution (\$) \$385.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDEFER, LLOYD <hr/> Contributor address; City; State; Zip Code WILLIS, TX 77318	Amount of Contribution (\$) \$440.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/26 Rpt: 24/39
2 FILER NAME Conroe Professional Firefighters Association - PAC		3 Filer ID (Ethics Commission Filers) 00067651
4 Date 06/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHWARZ, DANE <hr/> 6 Contributor address; City; State; Zip Code CONROE, TX 77304	7 Amount of Contribution (\$) \$0.00
8 Principal occupation / Job title (See Instructions) FIREFIGHTER		9 Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEMORA, SEAN <hr/> Contributor address; City; State; Zip Code CONROE, TX 77301	Amount of Contribution (\$) \$385.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SENCHAL, BRAYLAN <hr/> Contributor address; City; State; Zip Code NEW WAVERLY, TX 77358	Amount of Contribution (\$) \$165.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHELY, RYAN <hr/> Contributor address; City; State; Zip Code MONTGOMERY, TX 77356	Amount of Contribution (\$) \$385.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMMONS, ZACHARY <hr/> Contributor address; City; State; Zip Code MONTGOMERY, TX 77316	Amount of Contribution (\$) \$385.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/26 Rpt: 25/39
2 FILER NAME Conroe Professional Firefighters Association - PAC		3 Filer ID (Ethics Commission Filers) 00067651
4 Date 06/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SKREHOT, SHAUN <hr/> 6 Contributor address; City; State; Zip Code MONTGOMERY, TX 77356	7 Amount of Contribution (\$) \$385.00
8 Principal occupation / Job title (See Instructions) FIREFIGHTER		9 Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, BRIAN <hr/> Contributor address; City; State; Zip Code COLLEGE STATION, TX 77845	Amount of Contribution (\$) \$165.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, KEVIN <hr/> Contributor address; City; State; Zip Code WOODLANDS, TX 77381	Amount of Contribution (\$) \$385.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STATON, DONALD <hr/> Contributor address; City; State; Zip Code CONROE, TX 77303	Amount of Contribution (\$) \$275.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUAREZ, STEVEN <hr/> Contributor address; City; State; Zip Code SPRING, TX 77379	Amount of Contribution (\$) \$385.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/26 Rpt: 26/39
2 FILER NAME Conroe Professional Firefighters Association - PAC		3 Filer ID (Ethics Commission Filers) 00067651
4 Date 06/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Savacool, Dakota <hr/> 6 Contributor address; City; State; Zip Code MAGNOLIA, TX 77354	7 Amount of Contribution (\$) \$165.00
8 Principal occupation / Job title (See Instructions) FIREFIGHTER		9 Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, PETER <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$385.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TELANO, LANDON <hr/> Contributor address; City; State; Zip Code CONROE, TX 77384	Amount of Contribution (\$) \$0.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEMPLETON, JOSHUA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77070	Amount of Contribution (\$) \$275.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, CASEY <hr/> Contributor address; City; State; Zip Code SPRING, TX 77386	Amount of Contribution (\$) \$165.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/26 Rpt: 27/39
2 FILER NAME Conroe Professional Firefighters Association - PAC		3 Filer ID (Ethics Commission Filers) 00067651
4 Date 06/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, DAVID <hr/> 6 Contributor address; City; State; Zip Code SPRING, TX 77380	7 Amount of Contribution (\$) \$0.00
8 Principal occupation / Job title (See Instructions) FIREFIGHTER		9 Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TUCKER, JASON <hr/> Contributor address; City; State; Zip Code WOODLANDS, TX 77380	Amount of Contribution (\$) \$385.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURNER, JOHN <hr/> Contributor address; City; State; Zip Code CONROE, TX 77301	Amount of Contribution (\$) \$385.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vanden Hul, Ryan <hr/> Contributor address; City; State; Zip Code Pasadena, TX 77505	Amount of Contribution (\$) \$429.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WAGNER, TYLER <hr/> Contributor address; City; State; Zip Code CONROE, TX 77384	Amount of Contribution (\$) \$165.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/26 Rpt: 28/39
2 FILER NAME Conroe Professional Firefighters Association - PAC		3 Filer ID (Ethics Commission Filers) 00067651
4 Date 06/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLER, PHILLIP <hr/> 6 Contributor address; City; State; Zip Code MONTGOMERY, TX 77356	7 Amount of Contribution (\$) \$165.00
8 Principal occupation / Job title (See Instructions) FIREFIGHTER		9 Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WIDASKI, BRANDON <hr/> Contributor address; City; State; Zip Code CONROE, TX 77384	Amount of Contribution (\$) \$385.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, MATTHEW <hr/> Contributor address; City; State; Zip Code SPRING, TX 77389	Amount of Contribution (\$) \$275.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, JOHN <hr/> Contributor address; City; State; Zip Code CONROE, TX 77304	Amount of Contribution (\$) \$165.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOOLERY, ROBERT <hr/> Contributor address; City; State; Zip Code CLEVELAND, TX 77328	Amount of Contribution (\$) \$407.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/26 Rpt: 29/39
2 FILER NAME Conroe Professional Firefighters Association - PAC		3 Filer ID (Ethics Commission Filers) 00067651
4 Date 06/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WYATT, JONATHON <hr/> 6 Contributor address; City; State; Zip Code CONROE, TX 77301	7 Amount of Contribution (\$) \$0.00
8 Principal occupation / Job title (See Instructions) FIREFIGHTER		9 Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wisnowski, Christopher <hr/> Contributor address; City; State; Zip Code Spring, TX 77388	Amount of Contribution (\$) \$385.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZACHARY, BRYCE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$165.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF CONROE

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: 1/4 Rpt: 30/39	2 FILER NAME Conroe Professional Firefighters Association - PAC	3 Filer ID (Ethics Commission Filers) 00067651
4 Date 02/12/2025	5 Payee name 202 Main	
6 Amount (\$) \$78.98 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 202 Main St Conroe, TX 77301	
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 political candidate dinner bill
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/18/2025	Payee name Allen, Bobby	
Amount (\$) \$767.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13998 Shoreline Dr Willis, TX 77384	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Trip to Capitol
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/20/2025	Payee name Doubletree Austin hotel	
Amount (\$) \$10.99 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 303 W. 15TH ST AUSTIN, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hotel fees for capitol visit
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/4 Rpt: 31/39	2 FILER NAME Conroe Professional Firefighters Association - PAC	3 Filer ID (Ethics Commission Filers) 00067651
4 Date 03/20/2025	5 Payee name Doubletree Austin hotel	
6 Amount (\$) \$129.40 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 303 W. 15TH ST AUSTIN, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking at capitol
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/21/2025	Candidate/Officeholder name Office sought Office held	
Payee name Doubletree Austin hotel		
Amount (\$) \$437.58 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 303 W. 15TH ST AUSTIN, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense HOTEL FEES
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/21/2025	Candidate/Officeholder name Office sought Office held	
Payee name Doubletree Austin hotel		
Amount (\$) \$437.58 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 303 W. 15TH ST AUSTIN, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense HOTEL FEES
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/21/2025	Candidate/Officeholder name Office sought Office held	
Payee name Doubletree Austin hotel		
Amount (\$) \$437.58 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 303 W. 15TH ST AUSTIN, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense HOTEL FEES
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: 3/4 Rpt: 32/39	2 FILER NAME Conroe Professional Firefighters Association - PAC	3 Filer ID (Ethics Commission Filers) 00067651
4 Date 02/18/2025	5 Payee name Pacific Yard House	
6 Amount (\$) \$151.78 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 101 Metcalf St Conroe, TX 77301	
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 PAC fund board lunch
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/08/2025	Payee name Painter, Michael	
Amount (\$) \$280.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1814 ARBOR GLEN DR Conroe, TX 77301	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling 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 paid Poll hours
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/18/2025	Payee name ULINE	
Amount (\$) \$735.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 12575 ULINE DR PLEASANT PRAIRIE, WI 53158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Office Supplies and other necessities for candidate support
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: 4/4 Rpt: 33/39	2 FILER NAME Conroe Professional Firefighters Association - PAC	3 Filer ID (Ethics Commission Filers) 00067651
4 Date 03/24/2025	5 Payee name Vanden Hul, Ryan	
6 Amount (\$) \$411.40 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 30685 FM 2978 Magnolia, TX 77354	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PER DIEM and MILEAGE FOR CAPITOL
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/30/2025	Payee name Wilke's Badass Pits	
Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 98 Avenue A Conroe, TX 77301	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials 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 FUNDRAISER DONATION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 1/6 Rpt:	2 FILER NAME Conroe Professional Firefighters Association - PAC	3 Filer ID (Ethics Commission Filers) 00067651
4 Date 03/24/2025	5 Payee name CHAVIS, THOMAS (Mr.)	
6 Amount (\$) 400.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 10542 F.M. 1485 CONROE, TX 77306	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) SHIFT SWAP	(b) Description (See instructions regarding type of information required.) SHIFT COVERAGE FOR VISIT TO ATX
Date 03/05/2025	Payee name Conroe/Lake Conroe Chamber of Commerce	
Amount (\$) 750.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip P.O. Box 2347 Conroe, TX 77305	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) CHAMBER MEMBERSHIP
Date 06/05/2025	Payee name Conroe/Lake Conroe Chamber of Commerce	
Amount (\$) 750.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip P.O. Box 2347 Conroe, TX 77305	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) CHAMBER DUES
Date 03/21/2025	Payee name Doubletree Austin hotel	
Amount (\$) 548.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 303 W. 15TH ST AUSTIN, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Travel In District	(b) Description (See instructions regarding type of information required.) HOTEL EXPENSE

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 2/6 Rpt:	2 FILER NAME Conroe Professional Firefighters Association - PAC	3 Filer ID (Ethics Commission Filers) 00067651
4 Date 01/02/2025	5 Payee name MCCALEB ROAD STORAGE	
6 Amount (\$) 346.50 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 1150 McCaleb rd #100 Montgomery, TX 77316	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	(b) Description (See instructions regarding type of information required.) STORAGE FEE
Date 02/03/2025	Payee name MCCALEB ROAD STORAGE	
Amount (\$) 346.50 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1150 McCaleb rd #100 Montgomery, TX 77316	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	(b) Description (See instructions regarding type of information required.) STORAGE FEE
Date 03/03/2025	Payee name MCCALEB ROAD STORAGE	
Amount (\$) 346.50 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1150 McCaleb rd #100 Montgomery, TX 77316	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) STORAGE FEES
Date 04/02/2025	Payee name MCCALEB ROAD STORAGE	
Amount (\$) 346.50 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1150 McCaleb rd #100 Montgomery, TX 77316	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) STORAGE FEES

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 3/6 Rpt:	2 FILER NAME Conroe Professional Firefighters Association - PAC	3 Filer ID (Ethics Commission Filers) 00067651
4 Date 05/02/2025	5 Payee name MCCALEB ROAD STORAGE	
6 Amount (\$) 346.50 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 1150 McCaleb rd #100 Montgomery, TX 77316	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	(b) Description (See instructions regarding type of information required.) STORAGE FEES
Date 06/02/2025	Payee name MCCALEB ROAD STORAGE	
Amount (\$) 346.50 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1150 McCaleb rd #100 Montgomery, TX 77316	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	(b) Description (See instructions regarding type of information required.) STORAGE FEE
Date 02/14/2025	Payee name SIDDONSON-MARTIN	
Amount (\$) 2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1362 E. RICHEY RD HOUSTON, TX 77073	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) APPARATUS	(b) Description (See instructions regarding type of information required.) MAINTENACE COST
Date 01/22/2025	Payee name VERIZON WIRELESS	
Amount (\$) 59.67 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip PO BOX 660108 Dallas, TX 75266	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	(b) Description (See instructions regarding type of information required.) CELL PHONE EXPENSE (MIFI)

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 4/6 Rpt:	2 FILER NAME Conroe Professional Firefighters Association - PAC	3 Filer ID (Ethics Commission Filers) 00067651
4 Date 01/27/2025	5 Payee name VERIZON WIRELESS	
6 Amount (\$) 50.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip PO BOX 660108 Dallas, TX 75266	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	(b) Description (See instructions regarding type of information required.) CELL PHONE EXPENSE (MIFI)
Date 02/20/2025	Payee name VERIZON WIRELESS	
Amount (\$) 59.67 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip PO BOX 660108 Dallas, TX 75266	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) CELL PHONE EXPENSE (MIFI)
Date 02/27/2025	Payee name VERIZON WIRELESS	
Amount (\$) 50.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip PO BOX 660108 Dallas, TX 75266	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) CELL PHONE EXPENSE (MIFI)
Date 03/26/2025	Payee name VERIZON WIRELESS	
Amount (\$) 50.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip PO BOX 660108 Dallas, TX 75266	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) CELL PHONE EXPENSE (MIFI)

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 5/6 Rpt:	2 FILER NAME Conroe Professional Firefighters Association - PAC	3 Filer ID (Ethics Commission Filers) 00067651
4 Date 04/21/2025	5 Payee name VERIZON WIRELESS	
6 Amount (\$) 59.67 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip PO BOX 660108 Dallas, TX 75266	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) CELL PHONE EXPENSE (MIFI)
Date 04/28/2025	Payee name VERIZON WIRELESS	
Amount (\$) 50.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip PO BOX 660108 Dallas, TX 75266	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) CELL PHONE EXPENSE (MIFI)
Date 05/20/2025	Payee name VERIZON WIRELESS	
Amount (\$) 59.67 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip PO BOX 660108 Dallas, TX 75266	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) CELL PHONE EXPENSE (MIFI)
Date 05/27/2025	Payee name VERIZON WIRELESS	
Amount (\$) 50.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip PO BOX 660108 Dallas, TX 75266	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) CELL PHONE EXPENSE (MIFI)

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 6/6 Rpt:	2 FILER NAME Conroe Professional Firefighters Association - PAC	3 Filer ID (Ethics Commission Filers) 00067651
4 Date 06/23/2025	5 Payee name VERIZON WIRELESS	
6 Amount (\$) 59.67 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip PO BOX 660108 Dallas, TX 75266	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) CELL PHONE EXPENSE (MIFI)
Date 06/26/2025	Payee name VERIZON WIRELESS	
Amount (\$) 50.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip PO BOX 660108 Dallas, TX 75266	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) CELL PHONE EXPENSE (MIFI)
Date 03/24/2025	Payee name Vanden Hul, Ryan	
Amount (\$) 350.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 30685 FM 2978 Magnolia, TX 77354	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) SHIFT SWAP	(b) Description (See instructions regarding type of information required.) SHIFT COVERAGE