

**GENERAL-PURPOSE COMMITTEE  
CAMPAIGN FINANCE REPORT**

**FORM GPAC  
COVER SHEET PG 1**

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00087022	2 Total pages filed: 380			
3 COMMITTEE NAME Cy-Fair Professional Firefighters Political Action Committee		<b>OFFICE USE ONLY</b> Date Received <b>ELECTRONICALLY FILED</b> 01/15/2026  Date Hand-delivered or Date Postmarked  Receipt # <input type="text"/> Amount <input type="text"/>  Date Processed  Date Imaged				
4 COMMITTEE ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE  9212 Fry Road Ste. 105 Pmb #333 Cypress, TX 77433					
5 CAMPAIGN TREASURER NAME  Mr.	FIRST Nicholas					
	NICKNAME LAST Rand					
	SUFFIX					
6 CAMPAIGN TREASURER STREET ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 11030 Foxbriar Ln  Beaumont, TX 77705			APT / SUITE #;	CITY;	STATE;
7 CAMPAIGN TREASURER MAILING ADDRESS  <input type="checkbox"/> Change of Address	STREET OR PO BOX; 10710 Telge Rd  Houston, TX 77095	APT / SUITE #;	CITY;	STATE;	ZIP CODE	
8 CAMPAIGN TREASURER PHONE	AREA CODE (713) 305-7665	PHONE NUMBER	EXTENSION			
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15  <input type="checkbox"/> July 15	<input type="checkbox"/> 30th day before election  <input type="checkbox"/> 8th day before election  <input type="checkbox"/> Runoff	<input type="checkbox"/> Dissolution (Attach PAC-DR)  <input type="checkbox"/> 10th day after campaign treasurer termination			
10 PERIOD COVERED	Month Day Year 07/01/2025	Month Day Year THROUGH	Month Day Year 12/31/2025			
11 ELECTION	ELECTION DATE Month Day Year	<input type="checkbox"/> Primary  <input type="checkbox"/> General	ELECTION TYPE  <input type="checkbox"/> Runoff  <input type="checkbox"/> Special	<input type="checkbox"/> Other		

**GO TO PAGE 2**

**GENERAL-PURPOSE COMMITTEE REPORT:  
PURPOSE AND TOTALS**

**FORM GPAC  
COVER SHEET PG 2**

<b>12 COMMITTEE NAME</b> Cy-Fair Professional Firefighters Political Action Committee		<b>13 FILER ID</b> (Ethics Commission Filers) 00087022
<b>14 COMMITTEE ACTIVITY</b>  (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.)	
<b>15 CONTRIBUTION TOTALS</b>	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
	<b>2. TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 21,161.00
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 0.00
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 40,714.32
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

**16 AFFIDAVIT**

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Mr. Nicholas Rand

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

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

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

**SUBTOTALS - GPAC****FORM GPAC**  
**COVER SHEET PG 3**  
3 of 380

<b>17 COMMITTEE NAME</b> Cy-Fair Professional Firefighters Political Action Committee	<b>18 FILER ID</b> (Ethics Commission Filers) 00087022
<b>19 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE	
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 21,161.00	
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$	
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS \$	
4. <input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION \$	
5. <input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION \$	
6. <input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION \$	
7. <input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION \$	
8. <input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION \$	
9. <input type="checkbox"/> SCHEDULE E: LOANS \$	
10. <input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$	
11. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$	
12. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$	
13. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$	
14. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$	
15. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER \$	

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/377 Rpt: 4/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abodeeb, Ahmad	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abodeeb, Ahmad	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abodeeb, Ahmad	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abodeeb, Ahmad	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abodeeb, Ahmad	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/377 Rpt: 5/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/15/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abodeeb, Ahmad	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abodeeb, Ahmad	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abodeeb, Ahmad	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abodeeb, Ahmad	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abodeeb, Ahmad	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/377 Rpt: 6/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/06/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abodeeb, Ahmad	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abodeeb, Ahmad	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abodeeb, Ahmad	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Albright, Andrew	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Albright, Andrew	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/377 Rpt: 7/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/26/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Albright, Andrew	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Albright, Andrew	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Albright, Andrew	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Albright, Andrew	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Albright, Andrew	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/377 Rpt: 8/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Albright, Andrew	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Albright, Andrew	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Albright, Andrew	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Albright, Andrew	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Albright, Andrew	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/377 Rpt: 9/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Albright, Andrew	<b>7</b> Amount of Contribution (\$)  \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aleman, Emmanuel	Amount of Contribution (\$)  \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aleman, Emmanuel	Amount of Contribution (\$)  \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aleman, Emmanuel	Amount of Contribution (\$)  \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aleman, Emmanuel	Amount of Contribution (\$)  \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/377 Rpt: 10/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aleman, Emmanuel	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aleman, Emmanuel	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aleman, Emmanuel	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aleman, Emmanuel	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aleman, Emmanuel	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/377 Rpt: 11/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aleman, Emmanuel	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aleman, Emmanuel	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aleman, Emmanuel	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aleman, Emmanuel	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anaya, Martin	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/377 Rpt: 12/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/10/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anaya, Martin ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anaya, Martin ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anaya, Martin ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anaya, Martin ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anaya, Martin ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 10/377 Rpt: 13/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/01/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anaya, Martin ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anaya, Martin ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anaya, Martin ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anaya, Martin ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anaya, Martin ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 11/377 Rpt: 14/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anaya, Martin ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anaya, Martin ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aranda, Martin ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aranda, Martin ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aranda, Martin ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 12/377 Rpt: 15/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/12/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aranda, Martin	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aranda, Martin	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aranda, Martin	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aranda, Martin	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aranda, Martin	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 13/377 Rpt: 16/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/03/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aranda, Martin ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aranda, Martin ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aranda, Martin ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aranda, Martin ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aranda, Martin ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 14/377 Rpt: 17/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnold, Katrina ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnold, Katrina ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnold, Katrina ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnold, Katrina ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnold, Katrina ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 15/377 Rpt: 18/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/15/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnold, Katrina	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnold, Katrina	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnold, Katrina	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnold, Katrina	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnold, Katrina	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 16/377 Rpt: 19/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/06/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnold, Katrina	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnold, Katrina	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnold, Katrina	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arredondo Jr, Bernave	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arredondo Jr, Bernave	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 17/377 Rpt: 20/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/26/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arredondo Jr, Bernave ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arredondo Jr, Bernave ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arredondo Jr, Bernave ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arredondo Jr, Bernave ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arredondo Jr, Bernave ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 18/377 Rpt: 21/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arredondo Jr, Bernave ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arredondo Jr, Bernave .....  TX	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arredondo Jr, Bernave .....  TX	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arredondo Jr, Bernave .....  TX	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arredondo Jr, Bernave .....  TX	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 19/377 Rpt: 22/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arredondo Jr, Bernave	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayala, Alexa	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayala, Alexa	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayala, Alexa	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayala, Alexa	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 20/377 Rpt: 23/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayala, Alexa	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayala, Alexa	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayala, Alexa	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayala, Alexa	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayala, Alexa	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 21/377 Rpt: 24/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayala, Alexa	<b>7</b> Amount of Contribution (\$)  \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayala, Alexa	Amount of Contribution (\$)  \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayala, Alexa	Amount of Contribution (\$)  \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayala, Alexa	Amount of Contribution (\$)  \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Bryan	Amount of Contribution (\$)  \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 22/377 Rpt: 25/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/10/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Bryan ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Bryan ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Bryan ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Bryan ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Bryan ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 23/377 Rpt: 26/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/01/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Bryan ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Bryan ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Bryan ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Bryan ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Bryan ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 24/377 Rpt: 27/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Bryan	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Bryan	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnett, Chase	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnett, Chase	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnett, Chase	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 25/377 Rpt: 28/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/12/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnett, Chase .....  <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnett, Chase .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnett, Chase .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnett, Chase .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnett, Chase .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 26/377 Rpt: 29/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/03/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnett, Chase .....  <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnett, Chase .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnett, Chase .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnett, Chase .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnett, Chase .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 27/377 Rpt: 30/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becker, Cierra ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becker, Cierra ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becker, Cierra ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becker, Cierra ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becker, Cierra ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 28/377 Rpt: 31/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/15/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becker, Cierra .....  <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becker, Cierra .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becker, Cierra .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becker, Cierra .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becker, Cierra .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 29/377 Rpt: 32/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/06/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becker, Cierra	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becker, Cierra	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becker, Cierra	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Books, Brandon	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Books, Brandon	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 30/377 Rpt: 33/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/26/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Books, Brandon ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Books, Brandon ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Books, Brandon ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Books, Brandon ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Books, Brandon ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 31/377 Rpt: 34/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Books, Brandon ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Books, Brandon ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Books, Brandon ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Books, Brandon ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Books, Brandon ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 32/377 Rpt: 35/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Books, Brandon	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bornowski, Kyle	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bornowski, Kyle	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bornowski, Kyle	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bornowski, Kyle	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 33/377 Rpt: 36/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bornowski, Kyle	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bornowski, Kyle	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bornowski, Kyle	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bornowski, Kyle	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bornowski, Kyle	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 34/377 Rpt: 37/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bornowski, Kyle	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bornowski, Kyle	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bornowski, Kyle	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bornowski, Kyle	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowers, Braxton	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 35/377 Rpt: 38/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/10/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowers, Braxton ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$15.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowers, Braxton ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowers, Braxton ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowers, Braxton ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowers, Braxton ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 36/377 Rpt: 39/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/01/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowers, Braxton ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$15.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowers, Braxton ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowers, Braxton ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowers, Braxton ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowers, Braxton ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 37/377 Rpt: 40/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowers, Braxton ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$15.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowers, Braxton ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brewer, Jason ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brewer, Jason ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brewer, Jason ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 38/377 Rpt: 41/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/03/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brewer, Jason ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brewer, Jason ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brewer, Jason ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brewer, Jason ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brewer, Jason ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 39/377 Rpt: 42/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Briant, Tucker	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Briant, Tucker	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Briant, Tucker	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Briant, Tucker	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Briant, Tucker	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 40/377 Rpt: 43/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/15/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Briant, Tucker	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Briant, Tucker	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Briant, Tucker	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Briant, Tucker	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Briant, Tucker	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 41/377 Rpt: 44/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/06/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Briant, Tucker	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Briant, Tucker	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Briant, Tucker	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buonarosa, Nicholas	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buonarosa, Nicholas	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 42/377 Rpt: 45/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/26/2025	<b>5</b> Full name of contributor Buonarosa, Nicholas	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor Buonarosa, Nicholas	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor Buonarosa, Nicholas	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor Buonarosa, Nicholas	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor Buonarosa, Nicholas	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 43/377 Rpt: 46/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/17/2025	<b>5</b> Full name of contributor Buonarosa, Nicholas	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor Buonarosa, Nicholas	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor Buonarosa, Nicholas	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor Buonarosa, Nicholas	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor Buonarosa, Nicholas	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 44/377 Rpt: 47/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buonarosa, Nicholas	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caceres, Michael	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caceres, Michael	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caceres, Michael	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caceres, Michael	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 45/377 Rpt: 48/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caceres, Michael	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caceres, Michael	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caceres, Michael	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caceres, Michael	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caceres, Michael	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 46/377 Rpt: 49/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caceres, Michael	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caceres, Michael	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caceres, Michael	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caceres, Michael	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carabantes, Marylin	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 47/377 Rpt: 50/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/10/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carabantes, Marylin	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carabantes, Marylin	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carabantes, Marylin	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carabantes, Marylin	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carabantes, Marylin	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 48/377 Rpt: 51/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/01/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carabantes, Marylin	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carabantes, Marylin	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carabantes, Marylin	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carabantes, Marylin	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carabantes, Marylin	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 49/377 Rpt: 52/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carabantes, Marylin	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carabantes, Marylin	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cardenas, Carlos	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cardenas, Carlos	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cardenas, Carlos	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 50/377 Rpt: 53/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cardenas, Carlos ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cardenas, Carlos ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlos, Juan ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlos, Juan ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlos, Juan ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 51/377 Rpt: 54/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/12/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlos, Juan	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlos, Juan	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlos, Juan	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlos, Juan	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlos, Juan	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 52/377 Rpt: 55/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/03/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlos, Juan	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
<b>Date</b> 08/20/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlos, Juan	<b>Amount of Contribution (\$)</b> \$5.00
	<b>Contributor address; City; State; Zip Code</b>  TX	
<b>Principal occupation / Job title (See Instructions)</b> Firefighter		<b>Employer (See Instructions)</b> Cyfair Fire Department HCESD9
<b>Date</b> 08/06/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlos, Juan	<b>Amount of Contribution (\$)</b> \$5.00
	<b>Contributor address; City; State; Zip Code</b>  TX	
<b>Principal occupation / Job title (See Instructions)</b> Firefighter		<b>Employer (See Instructions)</b> Cyfair Fire Department HCESD9
<b>Date</b> 07/23/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlos, Juan	<b>Amount of Contribution (\$)</b> \$5.00
	<b>Contributor address; City; State; Zip Code</b>  TX	
<b>Principal occupation / Job title (See Instructions)</b> Firefighter		<b>Employer (See Instructions)</b> Cyfair Fire Department HCESD9
<b>Date</b> 07/09/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlos, Juan	<b>Amount of Contribution (\$)</b> \$5.00
	<b>Contributor address; City; State; Zip Code</b>  TX	
<b>Principal occupation / Job title (See Instructions)</b> Firefighter		<b>Employer (See Instructions)</b> Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 53/377 Rpt: 56/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Russell .....  <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$2.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Russell .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Russell .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Russell .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Russell .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 54/377 Rpt: 57/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/15/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Russell .....  <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$2.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Russell .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Russell .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Russell .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Russell .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 55/377 Rpt: 58/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/06/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Russell	<b>7</b> Amount of Contribution (\$) \$2.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Russell	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Russell	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chavez, Alex	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chavez, Alex	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 56/377 Rpt: 59/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/26/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chavez, Alex .....  <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chavez, Alex .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chavez, Alex .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chavez, Alex .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chavez, Alex .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 57/377 Rpt: 60/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chavez, Alex ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chavez, Alex ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chavez, Alex ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chavez, Alex ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chavez, Alex ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 58/377 Rpt: 61/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chavez, Alex	<b>7</b> Amount of Contribution (\$)  \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chin, Stephen	Amount of Contribution (\$)  \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chin, Stephen	Amount of Contribution (\$)  \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chin, Stephen	Amount of Contribution (\$)  \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chin, Stephen	Amount of Contribution (\$)  \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 59/377 Rpt: 62/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chin, Stephen	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chin, Stephen	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chin, Stephen	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chin, Stephen	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chin, Stephen	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 60/377 Rpt: 63/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chin, Stephen	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chin, Stephen	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chin, Stephen	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chin, Stephen	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choma, Jonathan	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 61/377 Rpt: 64/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/10/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choma, Jonathan	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choma, Jonathan	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choma, Jonathan	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choma, Jonathan	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choma, Jonathan	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 62/377 Rpt: 65/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/01/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choma, Jonathan	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choma, Jonathan	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choma, Jonathan	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choma, Jonathan	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choma, Jonathan	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 63/377 Rpt: 66/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choma, Jonathan	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choma, Jonathan	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christiansen, Blaine	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christiansen, Blaine	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christiansen, Blaine	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 64/377 Rpt: 67/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/12/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christiansen, Blaine	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christiansen, Blaine	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christiansen, Blaine	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christiansen, Blaine	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christiansen, Blaine	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 65/377 Rpt: 68/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/03/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christiansen, Blaine	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christiansen, Blaine	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christiansen, Blaine	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christiansen, Blaine	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christiansen, Blaine	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 66/377 Rpt: 69/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Daniel .....  <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Daniel .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Daniel .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Daniel .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Daniel .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 67/377 Rpt: 70/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/15/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Daniel .....  <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Daniel .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Daniel .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Daniel .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Daniel .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 68/377 Rpt: 71/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/06/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Daniel	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Daniel	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Daniel	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Combs, Travis	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Combs, Travis	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 69/377 Rpt: 72/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/26/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Combs, Travis ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Combs, Travis ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Combs, Travis ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Combs, Travis ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Combs, Travis ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 70/377 Rpt: 73/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Combs, Travis ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Combs, Travis ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Combs, Travis ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Combs, Travis ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Combs, Travis ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 71/377 Rpt: 74/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Combs, Travis	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cowan, Jeremy	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cowan, Jeremy	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cowan, Jeremy	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cowan, Jeremy	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 72/377 Rpt: 75/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cowan, Jeremy .....  <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cowan, Jeremy .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cowan, Jeremy .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cowan, Jeremy .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cowan, Jeremy .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 73/377 Rpt: 76/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cowan, Jeremy .....  <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cowan, Jeremy .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cowan, Jeremy .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cowan, Jeremy .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Currier, Andrew .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 74/377 Rpt: 77/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/10/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Currier, Andrew ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Currier, Andrew ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Currier, Andrew ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Currier, Andrew ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Currier, Andrew ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 75/377 Rpt: 78/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/01/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Currier, Andrew ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Currier, Andrew ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Currier, Andrew ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Currier, Andrew ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Currier, Andrew ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 76/377 Rpt: 79/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Currier, Andrew ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Currier, Andrew .....  TX	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Daniel .....  TX	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Daniel .....  TX	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Daniel .....  TX	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 77/377 Rpt: 80/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/12/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Daniel ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Daniel ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Daniel ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Daniel ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Daniel ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 78/377 Rpt: 81/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/03/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Daniel ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Daniel ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Daniel ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Daniel ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Daniel ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 79/377 Rpt: 82/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Otto ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Otto ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Otto ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Otto ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Otto ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 80/377 Rpt: 83/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/15/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Otto ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Otto ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Otto ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Otto ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Otto ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 81/377 Rpt: 84/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/06/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Otto ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Otto ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Otto ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deas, Andrew ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deas, Andrew ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 82/377 Rpt: 85/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/26/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deas, Andrew ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deas, Andrew ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deas, Andrew ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deas, Andrew ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deas, Andrew ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 83/377 Rpt: 86/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deas, Andrew ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deas, Andrew ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deas, Andrew ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deas, Andrew ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deas, Andrew ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 84/377 Rpt: 87/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deas, Andrew	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Derden, Ashely	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Derden, Ashely	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Derden, Ashely	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Derden, Ashely	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 85/377 Rpt: 88/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Derden, Ashely ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Derden, Ashely ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Derden, Ashely ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Derden, Ashely ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Derden, Ashely ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 86/377 Rpt: 89/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Derden, Ashely	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Derden, Ashely	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Derden, Ashely	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Derden, Ashely	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diaz, Reborto	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 87/377 Rpt: 90/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/10/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diaz, Reborto ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diaz, Reborto ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diaz, Reborto ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diaz, Reborto ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diaz, Reborto ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 88/377 Rpt: 91/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/01/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diaz, Reborto ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diaz, Reborto ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diaz, Reborto ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diaz, Reborto ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diaz, Reborto ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 89/377 Rpt: 92/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diaz, Reaborto ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diaz, Reaborto ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dickinson, Brandon ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dickinson, Brandon ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dickinson, Brandon ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 90/377 Rpt: 93/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/12/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dickinson, Brandon	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dickinson, Brandon	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dickinson, Brandon	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dickinson, Brandon	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dickinson, Brandon	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 91/377 Rpt: 94/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/03/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dickinson, Brandon	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dickinson, Brandon	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dickinson, Brandon	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dickinson, Brandon	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dickinson, Brandon	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 92/377 Rpt: 95/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dockens, Christopher	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dockens, Christopher	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dockens, Christopher	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dockens, Christopher	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dockery, Kenneth	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 93/377 Rpt: 96/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/10/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dockery, Kenneth	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dockery, Kenneth	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dockery, Kenneth	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dockery, Kenneth	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dockery, Kenneth	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 94/377 Rpt: 97/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/01/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dockery, Kenneth	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dockery, Kenneth	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dockery, Kenneth	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dockery, Kenneth	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dockery, Kenneth	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 95/377 Rpt: 98/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dockery, Kenneth	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dockery, Kenneth	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dornak, Blake	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dornak, Blake	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dornak, Blake	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 96/377 Rpt: 99/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/12/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dornak, Blake ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dornak, Blake ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dornak, Blake ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dornak, Blake ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dornak, Blake ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 97/377 Rpt: 100/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/03/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dornak, Blake ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dornak, Blake ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dornak, Blake ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dornak, Blake ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dornak, Blake ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 98/377 Rpt: 101/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duckworth, Tyler ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duckworth, Tyler ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duckworth, Tyler ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duckworth, Tyler ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duckworth, Tyler ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 99/377 Rpt: 102/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/15/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duckworth, Tyler	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duckworth, Tyler	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duckworth, Tyler	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duckworth, Tyler	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duckworth, Tyler	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 100/377 Rpt: 103/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/06/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duckworth, Tyler	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duckworth, Tyler	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duckworth, Tyler	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duncan, Cooper	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duncan, Cooper	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 101/377 Rpt: 104/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/26/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duncan, Cooper	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duncan, Cooper	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duncan, Cooper	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duncan, Cooper	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duncan, Cooper	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 102/377 Rpt: 105/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duncan, Cooper	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duncan, Cooper	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duncan, Cooper	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duncan, Cooper	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duncan, Cooper	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 103/377 Rpt: 106/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duncan, Cooper	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elaffouri, Zachariah	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elaffouri, Zachariah	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elaffouri, Zachariah	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elaffouri, Zachariah	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 104/377 Rpt: 107/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elaffouri, Zachariah ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elaffouri, Zachariah ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elaffouri, Zachariah ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elaffouri, Zachariah ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Kevin ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 105/377 Rpt: 108/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/10/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Kevin ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Kevin ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Kevin ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Kevin ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Kevin ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 106/377 Rpt: 109/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/01/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Kevin ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Kevin ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Kevin ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Kevin ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Kevin ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 107/377 Rpt: 110/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Kevin	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Kevin	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferretiz, Angel	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferretiz, Angel	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferretiz, Angel	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 108/377 Rpt: 111/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/12/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferretiz, Angel	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferretiz, Angel	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferretiz, Angel	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferretiz, Angel	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferretiz, Angel	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 109/377 Rpt: 112/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/03/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferretiz, Angel ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferretiz, Angel ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferretiz, Angel ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferretiz, Angel ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferretiz, Angel ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 110/377 Rpt: 113/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fillmore, Christopher	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fillmore, Christopher	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fillmore, Christopher	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fillmore, Christopher	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fillmore, Christopher	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 111/377 Rpt: 114/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/15/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fillmore, Christopher	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fillmore, Christopher	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fillmore, Christopher	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fillmore, Christopher	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fillmore, Christopher	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 112/377 Rpt: 115/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/06/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fillmore, Christopher	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fillmore, Christopher	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fillmore, Christopher	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flannelly, Connor	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flannelly, Connor	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 113/377 Rpt: 116/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/26/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flannelly, Connor .....  <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flannelly, Connor .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flannelly, Connor .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flannelly, Connor .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flannelly, Connor .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 114/377 Rpt: 117/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flannelly, Connor .....  <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flannelly, Connor .....  Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flannelly, Connor .....  Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flannelly, Connor .....  Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flannelly, Connor .....  Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 115/377 Rpt: 118/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flannelly, Connor	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frazier, Garrett	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frazier, Garrett	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frazier, Garrett	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frazier, Garrett	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 116/377 Rpt: 119/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frazier, Garrett	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frazier, Garrett	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frazier, Garrett	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frazier, Garrett	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frazier, Garrett	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 117/377 Rpt: 120/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frazier, Garrett	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frazier, Garrett	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frazier, Garrett	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frazier, Garrett	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fromholz, Mitchell	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 118/377 Rpt: 121/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/10/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fromholz, Mitchell ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$15.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fromholz, Mitchell .....  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fromholz, Mitchell .....  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fromholz, Mitchell .....  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fromholz, Mitchell .....  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 119/377 Rpt: 122/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/01/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fromholz, Mitchell ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$15.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fromholz, Mitchell .....  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fromholz, Mitchell .....  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fromholz, Mitchell .....  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fromholz, Mitchell .....  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 120/377 Rpt: 123/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fromholz, Mitchell ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$15.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fromholz, Mitchell .....  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia Carabantes, Marylin .....  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia Carabantes, Marylin .....  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia Carabantes, Marylin .....  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 121/377 Rpt: 124/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/12/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Garcia Carabantes, Marylin	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Garcia Carabantes, Marylin	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Garcia Carabantes, Marylin	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Garcia Carabantes, Marylin	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Garcia Carabantes, Marylin	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 122/377 Rpt: 125/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/03/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia Carabantes, Marylin	<b>7</b> Amount of Contribution (\$)  \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia Carabantes, Marylin	Amount of Contribution (\$)  \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia Carabantes, Marylin	Amount of Contribution (\$)  \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia Carabantes, Marylin	Amount of Contribution (\$)  \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia Carabantes, Marylin	Amount of Contribution (\$)  \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 123/377 Rpt: 126/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerardi, Scott .....  <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$15.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerardi, Scott .....  Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerardi, Scott .....  Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerardi, Scott .....  Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerardi, Scott .....  Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 124/377 Rpt: 127/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/15/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerardi, Scott .....  <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$15.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerardi, Scott .....  Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerardi, Scott .....  Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerardi, Scott .....  Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerardi, Scott .....  Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 125/377 Rpt: 128/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/06/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerardi, Scott	<b>7</b> Amount of Contribution (\$) \$15.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerardi, Scott	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerardi, Scott	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Matthew	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Matthew	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 126/377 Rpt: 129/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/26/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Matthew ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Matthew ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Matthew ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Matthew ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Matthew ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 127/377 Rpt: 130/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Matthew ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Matthew ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Matthew ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Matthew ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Matthew ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 128/377 Rpt: 131/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Matthew	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gooch-Caceres, Michael	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gooch-Caceres, Michael	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gooch-Caceres, Michael	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gooch-Caceres, Michael	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 129/377 Rpt: 132/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gooch-Caceres, Michael	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gooch-Caceres, Michael	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gooch-Caceres, Michael	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gooch-Caceres, Michael	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gooch-Caceres, Michael	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 130/377 Rpt: 133/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gooch-Caceres, Michael	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gooch-Caceres, Michael	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gooch-Caceres, Michael	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gooch-Caceres, Michael	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gore, Caleb	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 131/377 Rpt: 134/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/10/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gore, Caleb	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gore, Caleb	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gore, Caleb	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gore, Caleb	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gore, Caleb	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 132/377 Rpt: 135/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/01/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gore, Caleb	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gore, Caleb	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gore, Caleb	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gore, Caleb	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gore, Caleb	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 133/377 Rpt: 136/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gore, Caleb	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gore, Caleb	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Hilary	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Hilary	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Hilary	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 134/377 Rpt: 137/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/12/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Hilary	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Hilary	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Hilary	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Hilary	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Hilary	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 135/377 Rpt: 138/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/03/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Hilary	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Hilary	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Hilary	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Hilary	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Hilary	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 136/377 Rpt: 139/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Gregg	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Gregg	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Gregg	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Gregg	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Gregg	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 137/377 Rpt: 140/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/15/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Gregg	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Gregg	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Gregg	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Gregg	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Gregg	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 138/377 Rpt: 141/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/06/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Gregg	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Gregg	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Gregg	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, Rafael	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, Rafael	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 139/377 Rpt: 142/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, Rafael	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, Rafael	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, Rafael	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, Rafael	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, Rafael	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 140/377 Rpt: 143/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, Rafael	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holmes, Erin	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holmes, Erin	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holmes, Erin	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holmes, Erin	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 141/377 Rpt: 144/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holmes, Erin	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holmes, Erin	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holmes, Erin	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holmes, Erin	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holmes, Erin	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 142/377 Rpt: 145/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holmes, Erin	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holmes, Erin	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holmes, Erin	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holmes, Erin	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horton, Elizabeth	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 143/377 Rpt: 146/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/10/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horton, Elizabeth	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horton, Elizabeth	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horton, Elizabeth	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horton, Elizabeth	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horton, Elizabeth	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 144/377 Rpt: 147/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/01/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horton, Elizabeth	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horton, Elizabeth	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horton, Elizabeth	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horton, Elizabeth	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horton, Elizabeth	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 145/377 Rpt: 148/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horton, Elizabeth	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horton, Elizabeth	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hybert-Bice, Nicholas	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hybert-Bice, Nicholas	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hybert-Bice, Nicholas	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 146/377 Rpt: 149/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/12/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hybert-Bice, Nicholas	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hybert-Bice, Nicholas	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hybert-Bice, Nicholas	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hybert-Bice, Nicholas	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hybert-Bice, Nicholas	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 147/377 Rpt: 150/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/03/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hybert-Bice, Nicholas	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hybert-Bice, Nicholas	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hybert-Bice, Nicholas	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hybert-Bice, Nicholas	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hybert-Bice, Nicholas	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 148/377 Rpt: 151/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jaramillo, Magdaleno ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jaramillo, Magdaleno ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jaramillo, Magdaleno ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jaramillo, Magdaleno ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jaramillo, Magdaleno ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 149/377 Rpt: 152/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/15/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jaramillo, Magdaleno ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jaramillo, Magdaleno ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jaramillo, Magdaleno ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jaramillo, Magdaleno ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jaramillo, Magdaleno ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 150/377 Rpt: 153/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/06/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jaramillo, Magdaleno	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jaramillo, Magdaleno	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jaramillo, Magdaleno	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Travis	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Travis	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 151/377 Rpt: 154/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/26/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Travis .....  <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Travis .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Travis .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Travis .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Travis .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 152/377 Rpt: 155/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Travis ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Travis ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Travis ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Travis ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Travis ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 153/377 Rpt: 156/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Travis	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, William	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, William	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, William	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, William	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 154/377 Rpt: 157/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, William	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, William	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, William	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, William	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, William	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 155/377 Rpt: 158/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, William	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, William	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, William	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, William	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kalbow, Timothy	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 156/377 Rpt: 159/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/10/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kalbow, Timothy	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kalbow, Timothy	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kalbow, Timothy	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kalbow, Timothy	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kalbow, Timothy	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 157/377 Rpt: 160/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/01/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kalbow, Timothy	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kalbow, Timothy	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kalbow, Timothy	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kalbow, Timothy	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kalbow, Timothy	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 158/377 Rpt: 161/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kalbow, Timothy	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kalbow, Timothy	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kanewske, Cohen	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kanewske, Cohen	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kanewske, Cohen	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 159/377 Rpt: 162/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/12/2025	<b>5</b> Full name of contributor Kanewske, Cohen	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor Kanewske, Cohen	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor Kanewske, Cohen	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor Kanewske, Cohen	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor Kanewske, Cohen	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 160/377 Rpt: 163/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/03/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kanewske, Cohen	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kanewske, Cohen	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kanewske, Cohen	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kanewske, Cohen	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kanewske, Cohen	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 161/377 Rpt: 164/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, William	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, William	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, William	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, William	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, William	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 162/377 Rpt: 165/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/15/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, William	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, William	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, William	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, William	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, William	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 163/377 Rpt: 166/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/06/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, William	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, William	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, William	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelsie, John	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelsie, John	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 164/377 Rpt: 167/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/26/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelsie, John ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelsie, John ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelsie, John ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelsie, John ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelsie, John ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 165/377 Rpt: 168/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelsie, John ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelsie, John ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelsie, John ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelsie, John ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelsie, John ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 166/377 Rpt: 169/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelsie, John	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lanzas, Mauricio	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lanzas, Mauricio	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lanzas, Mauricio	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lanzas, Mauricio	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 167/377 Rpt: 170/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lanzas, Mauricio ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lanzas, Mauricio ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lanzas, Mauricio ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lanzas, Mauricio ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lanzas, Mauricio ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 168/377 Rpt: 171/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lanzas, Mauricio ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lanzas, Mauricio ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lanzas, Mauricio ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lanzas, Mauricio ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laws, Roshun ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 169/377 Rpt: 172/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/10/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laws, Roshun ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laws, Roshun ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laws, Roshun ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laws, Roshun ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laws, Roshun ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 170/377 Rpt: 173/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/01/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laws, Roshun ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laws, Roshun ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laws, Roshun ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laws, Roshun ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laws, Roshun ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 171/377 Rpt: 174/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laws, Roshun ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laws, Roshun ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) League, Cory ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) League, Cory ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) League, Cory ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 172/377 Rpt: 175/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/12/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) League, Cory	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
<b>Date</b> 10/29/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) League, Cory	<b>Amount of Contribution (\$)</b> \$20.00
	<b>Contributor address; City; State; Zip Code</b>  TX	
<b>Principal occupation / Job title (See Instructions)</b> Firefighter		<b>Employer (See Instructions)</b> Cyfair Fire Department HCESD9
<b>Date</b> 10/15/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) League, Cory	<b>Amount of Contribution (\$)</b> \$20.00
	<b>Contributor address; City; State; Zip Code</b>  TX	
<b>Principal occupation / Job title (See Instructions)</b> Firefighter		<b>Employer (See Instructions)</b> Cyfair Fire Department HCESD9
<b>Date</b> 10/01/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) League, Cory	<b>Amount of Contribution (\$)</b> \$20.00
	<b>Contributor address; City; State; Zip Code</b>  TX	
<b>Principal occupation / Job title (See Instructions)</b> Firefighter		<b>Employer (See Instructions)</b> Cyfair Fire Department HCESD9
<b>Date</b> 09/17/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) League, Cory	<b>Amount of Contribution (\$)</b> \$20.00
	<b>Contributor address; City; State; Zip Code</b>  TX	
<b>Principal occupation / Job title (See Instructions)</b> Firefighter		<b>Employer (See Instructions)</b> Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 173/377 Rpt: 176/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/03/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) League, Cory	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
<b>Date</b> 08/20/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) League, Cory	<b>Amount of Contribution (\$)</b> \$20.00
	<b>Contributor address; City; State; Zip Code</b>  TX	
<b>Principal occupation / Job title (See Instructions)</b> Firefighter		<b>Employer (See Instructions)</b> Cyfair Fire Department HCESD9
<b>Date</b> 08/06/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) League, Cory	<b>Amount of Contribution (\$)</b> \$20.00
	<b>Contributor address; City; State; Zip Code</b>  TX	
<b>Principal occupation / Job title (See Instructions)</b> Firefighter		<b>Employer (See Instructions)</b> Cyfair Fire Department HCESD9
<b>Date</b> 07/23/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) League, Cory	<b>Amount of Contribution (\$)</b> \$20.00
	<b>Contributor address; City; State; Zip Code</b>  TX	
<b>Principal occupation / Job title (See Instructions)</b> Firefighter		<b>Employer (See Instructions)</b> Cyfair Fire Department HCESD9
<b>Date</b> 07/09/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) League, Cory	<b>Amount of Contribution (\$)</b> \$20.00
	<b>Contributor address; City; State; Zip Code</b>  TX	
<b>Principal occupation / Job title (See Instructions)</b> Firefighter		<b>Employer (See Instructions)</b> Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 174/377 Rpt: 177/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leauge, Cory ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leauge, Cory ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leauge, Cory ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leauge, Cory ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leauge, Cory ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 175/377 Rpt: 178/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/15/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leauge, Cory	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leauge, Cory	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leauge, Cory	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leauge, Cory	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leauge, Cory	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 176/377 Rpt: 179/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/06/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leauge, Cory	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leauge, Cory	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leauge, Cory	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Lillie	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Lillie	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 177/377 Rpt: 180/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/26/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Lillie ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Lillie ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Lillie ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Lillie ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Lillie ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 178/377 Rpt: 181/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Lillie ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Lillie ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Lillie ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Lillie ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Lillie ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 179/377 Rpt: 182/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Lillie	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Nicholas	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Nicholas	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Nicholas	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Nicholas	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 180/377 Rpt: 183/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Nicholas ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Nicholas ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Nicholas ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Nicholas ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Nicholas ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 181/377 Rpt: 184/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Nicholas	<b>7</b> Amount of Contribution (\$)  \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lieder, Nicole	Amount of Contribution (\$)  \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lieder, Nicole	Amount of Contribution (\$)  \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lieder, Nicole	Amount of Contribution (\$)  \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lieder, Nicole	Amount of Contribution (\$)  \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 182/377 Rpt: 185/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lieder, Nicole	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lieder, Nicole	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lieder, Nicole	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lieder, Nicole	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lieder, Nicole	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 183/377 Rpt: 186/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lieder, Nicole	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lieder, Nicole	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lieder, Nicole	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lieder, Nicole	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Embry	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 184/377 Rpt: 187/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/10/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Embry	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Embry	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Embry	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Embry	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Embry	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

## MONETARY POLITICAL CONTRIBUTIONS

## **SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 185/377 Rpt: 188/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/01/2025	<b>5</b> Full name of contributor Lopez, Embry <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor Lopez, Embry Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor Lopez, Embry Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor Lopez, Embry Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor Lopez, Embry Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 186/377 Rpt: 189/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Embry	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Embry	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luque, Alexis	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luque, Alexis	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luque, Alexis	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 187/377 Rpt: 190/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/12/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lュー, Alexis	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lュー, Alexis	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lュー, Alexis	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lュー, Alexis	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lュー, Alexis	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 188/377 Rpt: 191/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/03/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lュー, Alexis	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lュー, Alexis	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lュー, Alexis	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lュー, Alexis	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lュー, Alexis	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 189/377 Rpt: 192/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maher, Jordan	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maher, Jordan	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maher, Jordan	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maher, Jordan	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maher, Jordan	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 190/377 Rpt: 193/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/15/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maher, Jordan	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maher, Jordan	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maher, Jordan	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maher, Jordan	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maher, Jordan	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 191/377 Rpt: 194/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/06/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maher, Jordan	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maher, Jordan	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maher, Jordan	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maldonado, Adolfo	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maldonado, Adolfo	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 192/377 Rpt: 195/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/26/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maldonado, Adolfo ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maldonado, Adolfo ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maldonado, Adolfo ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maldonado, Adolfo ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maldonado, Adolfo ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 193/377 Rpt: 196/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maldonado, Adolfo ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maldonado, Adolfo ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maldonado, Adolfo ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maldonado, Adolfo ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maldonado, Adolfo ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 194/377 Rpt: 197/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maldonado, Adolfo	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maloney, Joshua	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maloney, Joshua	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maloney, Joshua	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maloney, Joshua	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 195/377 Rpt: 198/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maloney, Joshua .....  <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$15.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maloney, Joshua .....  Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maloney, Joshua .....  Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maloney, Joshua .....  Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maloney, Joshua .....  Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 196/377 Rpt: 199/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maloney, Joshua ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$15.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maloney, Joshua ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maloney, Joshua ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maloney, Joshua ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manriquez, Carlos ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 197/377 Rpt: 200/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/10/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manriquez, Carlos .....  <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manriquez, Carlos .....  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manriquez, Carlos .....  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manriquez, Carlos .....  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manriquez, Carlos .....  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 198/377 Rpt: 201/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/01/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manriquez, Carlos .....  <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manriquez, Carlos .....  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manriquez, Carlos .....  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manriquez, Carlos .....  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manriquez, Carlos .....  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 199/377 Rpt: 202/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manriquez, Carlos ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manriquez, Carlos ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Adrian ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Adrian ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Adrian ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 200/377 Rpt: 203/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/12/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Adrian	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Adrian	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Adrian	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Adrian	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Adrian	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 201/377 Rpt: 204/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/03/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Adrian	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Adrian	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Adrian	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Adrian	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Adrian	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 202/377 Rpt: 205/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mata, Said ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mata, Said ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mata, Said ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mata, Said ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mata, Said ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 203/377 Rpt: 206/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/15/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mata, Said	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mata, Said	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mata, Said	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mata, Said	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mata, Said	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 204/377 Rpt: 207/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/06/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mata, Said	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mata, Said	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mata, Said	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maywald, Timothy	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maywald, Timothy	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 205/377 Rpt: 208/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/26/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maywald, Timothy .....  <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maywald, Timothy .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maywald, Timothy .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maywald, Timothy .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maywald, Timothy .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 206/377 Rpt: 209/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maywald, Timothy .....  <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maywald, Timothy .....  Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maywald, Timothy .....  Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maywald, Timothy .....  Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maywald, Timothy .....  Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 207/377 Rpt: 210/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maywald, Timothy	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMahan, Jonathan	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMahan, Jonathan	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMahan, Jonathan	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMahan, Jonathan	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 208/377 Rpt: 211/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMahan, Jonathan	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMahan, Jonathan	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMahan, Jonathan	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMahan, Jonathan	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMahan, Jonathan	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 209/377 Rpt: 212/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMahan, Jonathan	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMahan, Jonathan	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMahan, Jonathan	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMahan, Jonathan	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonald, Justin	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 210/377 Rpt: 213/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/10/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonald, Justin	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonald, Justin	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonald, Justin	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonald, Justin	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonald, Justin	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 211/377 Rpt: 214/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/01/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonald, Justin	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonald, Justin	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonald, Justin	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonald, Justin	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonald, Justin	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 212/377 Rpt: 215/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonald, Justin	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonald, Justin	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNeil, Patrick	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNeil, Patrick	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNeil, Patrick	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 213/377 Rpt: 216/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/12/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcniel, Patrick .....  <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcniel, Patrick .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcniel, Patrick .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcniel, Patrick .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcniel, Patrick .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 214/377 Rpt: 217/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/03/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcniel, Patrick ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcniel, Patrick ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcniel, Patrick ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcniel, Patrick ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcniel, Patrick ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 215/377 Rpt: 218/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/23/2025	<b>5</b> Full name of contributor Meyer, Levi	<b>7</b> Amount of Contribution (\$) \$15.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor Meyer, Levi	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor Meyer, Levi	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor Meyer, Levi	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor Meyer, Levi	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 216/377 Rpt: 219/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/15/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Levi	<b>7</b> Amount of Contribution (\$) \$15.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Levi	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Levi	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Levi	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Levi	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 217/377 Rpt: 220/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/06/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Levi	<b>7</b> Amount of Contribution (\$) \$15.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Levi	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Levi	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minks, Chris	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minks, Chris	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 218/377 Rpt: 221/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/26/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minks, Chris ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minks, Chris ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minks, Chris ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minks, Chris ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minks, Chris ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 219/377 Rpt: 222/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minks, Chris	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minks, Chris	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minks, Chris	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minks, Chris	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minks, Chris	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 220/377 Rpt: 223/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minks, Chris	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miranda, Jordy	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miranda, Jordy	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miranda, Jordy	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miranda, Jordy	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 221/377 Rpt: 224/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miranda, Jordy	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miranda, Jordy	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miranda, Jordy	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miranda, Jordy	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miranda, Jordy	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 222/377 Rpt: 225/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miranda, Jordy	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miranda, Jordy	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miranda, Jordy	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miranda, Jordy	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moon, Christopher	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 223/377 Rpt: 226/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moon, Christopher	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mursuli, Robert	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mursuli, Robert	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mursuli, Robert	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mursuli, Robert	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 224/377 Rpt: 227/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/06/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mursuli, Robert	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mursuli, Robert	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mursuli, Robert	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muse, Joseph	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muse, Joseph	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 225/377 Rpt: 228/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/26/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muse, Joseph .....  <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muse, Joseph .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muse, Joseph .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muse, Joseph .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muse, Joseph .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 226/377 Rpt: 229/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muse, Joseph ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muse, Joseph ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muse, Joseph ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muse, Joseph ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muse, Joseph ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 227/377 Rpt: 230/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muse, Joseph	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neblett, Marco	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neblett, Marco	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neblett, Marco	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neblett, Marco	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 228/377 Rpt: 231/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neblett, Marco	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neblett, Marco	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neblett, Marco	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neblett, Marco	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neblett, Marco	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 229/377 Rpt: 232/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neblett, Marco ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neblett, Marco ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neblett, Marco ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neblett, Marco ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nettles, David ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 230/377 Rpt: 233/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/10/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nettles, David ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nettles, David ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nettles, David ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nettles, David ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nettles, David ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 231/377 Rpt: 234/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/01/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nettles, David ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nettles, David ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nettles, David ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nettles, David ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nettles, David ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 232/377 Rpt: 235/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nettles, David	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nettles, David	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nguyen, Nicolas	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nguyen, Nicolas	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nguyen, Nicolas	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 233/377 Rpt: 236/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/12/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nguyen, Nicolas	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nguyen, Nicolas	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nguyen, Nicolas	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nguyen, Nicolas	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nguyen, Nicolas	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 234/377 Rpt: 237/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/03/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nguyen, Nicolas	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nguyen, Nicolas	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nguyen, Nicolas	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nguyen, Nicolas	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nguyen, Nicolas	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 235/377 Rpt: 238/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nilsen, Gjermund ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nilsen, Gjermund ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nilsen, Gjermund ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nilsen, Gjermund ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nilsen, Gjermund ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 236/377 Rpt: 239/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/15/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nilsen, Gjermund ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nilsen, Gjermund ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nilsen, Gjermund ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nilsen, Gjermund ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nilsen, Gjermund ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 237/377 Rpt: 240/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/06/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nilsen, Gjermund ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nilsen, Gjermund ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nilsen, Gjermund ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ocasio, Joel ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ocasio, Joel ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 238/377 Rpt: 241/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/26/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ocasio, Joel ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ocasio, Joel ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ocasio, Joel ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ocasio, Joel ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ocasio, Joel ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 239/377 Rpt: 242/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ocasio, Joel ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ocasio, Joel ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ocasio, Joel ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ocasio, Joel ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ocasio, Joel ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 240/377 Rpt: 243/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ocasio, Joel	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oetker, Chance	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oetker, Chance	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oetker, Chance	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oetker, Chance	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 241/377 Rpt: 244/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oetker, Chance ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oetker, Chance ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oetker, Chance ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oetker, Chance ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orek, Tony ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 242/377 Rpt: 245/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/10/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orek, Tony ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orek, Tony ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orek, Tony ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oros, Kris ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oros, Kris ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 243/377 Rpt: 246/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/26/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oros, Kris ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oros, Kris ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oros, Kris ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oros, Kris ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oros, Kris ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 244/377 Rpt: 247/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oros, Kris ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oros, Kris ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oros, Kris ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oros, Kris ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oros, Kris ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 245/377 Rpt: 248/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oros, Kris	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pace, Travis	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pace, Travis	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pace, Travis	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pace, Travis	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 246/377 Rpt: 249/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pace, Travis	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pace, Travis	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pace, Travis	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pace, Travis	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pace, Travis	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 247/377 Rpt: 250/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pace, Travis ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pace, Travis ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pace, Travis ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pace, Travis ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Andy ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 248/377 Rpt: 251/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/10/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Andy	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Andy	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Andy	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Andy	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Andy	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>			<b>1</b> Total pages Schedule A1: Sch: 249/377 Rpt: 252/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee			<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/01/2025	<b>5</b> Full name of contributor Perez, Andy	<b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9	
<b>Date</b> 09/17/2025	<b>Full name of contributor</b> Perez, Andy	<b>Contributor address; City; State; Zip Code</b>	<b>Amount of Contribution (\$)</b> \$5.00
<b>Principal occupation / Job title (See Instructions)</b> Firefighter		<b>Employer (See Instructions)</b> Cyfair Fire Department HCESD9	
<b>Date</b> 09/03/2025	<b>Full name of contributor</b> Perez, Andy	<b>Contributor address; City; State; Zip Code</b>	<b>Amount of Contribution (\$)</b> \$5.00
<b>Principal occupation / Job title (See Instructions)</b> Firefighter		<b>Employer (See Instructions)</b> Cyfair Fire Department HCESD9	
<b>Date</b> 08/20/2025	<b>Full name of contributor</b> Perez, Andy	<b>Contributor address; City; State; Zip Code</b>	<b>Amount of Contribution (\$)</b> \$5.00
<b>Principal occupation / Job title (See Instructions)</b> Firefighter		<b>Employer (See Instructions)</b> Cyfair Fire Department HCESD9	
<b>Date</b> 08/06/2025	<b>Full name of contributor</b> Perez, Andy	<b>Contributor address; City; State; Zip Code</b>	<b>Amount of Contribution (\$)</b> \$5.00
<b>Principal occupation / Job title (See Instructions)</b> Firefighter		<b>Employer (See Instructions)</b> Cyfair Fire Department HCESD9	

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 250/377 Rpt: 253/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Andy	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Andy	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pham, Dylan	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pham, Dylan	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pham, Dylan	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 251/377 Rpt: 254/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/12/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pham, Dylan	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pham, Dylan	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pham, Dylan	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pham, Dylan	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pham, Dylan	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 252/377 Rpt: 255/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/03/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pham, Dylan	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pham, Dylan	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pham, Dylan	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pham, Dylan	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pham, Dylan	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 253/377 Rpt: 256/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinglia, Herman ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinglia, Herman ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinglia, Herman ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinglia, Herman ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinglia, Herman ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 254/377 Rpt: 257/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/15/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinglia, Herman ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinglia, Herman ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinglia, Herman ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinglia, Herman ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinglia, Herman ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 255/377 Rpt: 258/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/06/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinglia, Herman	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinglia, Herman	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinglia, Herman	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plengemeyer, Kyle	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plengemeyer, Kyle	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 256/377 Rpt: 259/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/26/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plengemeyer, Kyle ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$15.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plengemeyer, Kyle ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plengemeyer, Kyle ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plengemeyer, Kyle ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plengemeyer, Kyle ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 257/377 Rpt: 260/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plengemeyer, Kyle ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$15.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plengemeyer, Kyle ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plengemeyer, Kyle ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plengemeyer, Kyle ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plengemeyer, Kyle ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 258/377 Rpt: 261/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plengemeyer, Kyle	<b>7</b> Amount of Contribution (\$) \$15.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Potenza, John	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Potenza, John	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Potenza, John	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Potenza, John	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 259/377 Rpt: 262/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Potenza, John ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Potenza, John ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Potenza, John ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Potenza, John ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Potenza, John ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 260/377 Rpt: 263/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Potenza, John ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Potenza, John ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Potenza, John ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Potenza, John ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rand, Nicholas ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 261/377 Rpt: 264/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/10/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rand, Nicholas	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rand, Nicholas	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rand, Nicholas	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rand, Nicholas	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rand, Nicholas	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 262/377 Rpt: 265/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/01/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rand, Nicholas	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rand, Nicholas	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rand, Nicholas	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rand, Nicholas	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rand, Nicholas	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 263/377 Rpt: 266/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rand, Nicholas	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rand, Nicholas	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyes, Jonathan	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyes, Jonathan	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyes, Jonathan	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 264/377 Rpt: 267/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/12/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyes, Jonathan ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyes, Jonathan ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyes, Jonathan ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyes, Jonathan ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyes, Jonathan ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 265/377 Rpt: 268/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/03/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyes, Jonathan ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$)  \$10.00
	<b>8</b> Principal occupation / Job title (See Instructions) Firefighter	
<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9		
<b>Date</b> 08/20/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyes, Jonathan ..... <b>Contributor address; City; State; Zip Code</b>  TX	<b>Amount of Contribution (\$)</b>  \$10.00
	<b>Principal occupation / Job title (See Instructions)</b> Firefighter	
<b>Employer (See Instructions)</b> Cyfair Fire Department HCESD9		
<b>Date</b> 08/06/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyes, Jonathan ..... <b>Contributor address; City; State; Zip Code</b>  TX	<b>Amount of Contribution (\$)</b>  \$10.00
	<b>Principal occupation / Job title (See Instructions)</b> Firefighter	
<b>Employer (See Instructions)</b> Cyfair Fire Department HCESD9		
<b>Date</b> 07/23/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyes, Jonathan ..... <b>Contributor address; City; State; Zip Code</b>  TX	<b>Amount of Contribution (\$)</b>  \$10.00
	<b>Principal occupation / Job title (See Instructions)</b> Firefighter	
<b>Employer (See Instructions)</b> Cyfair Fire Department HCESD9		
<b>Date</b> 07/09/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyes, Jonathan ..... <b>Contributor address; City; State; Zip Code</b>  TX	<b>Amount of Contribution (\$)</b>  \$10.00
	<b>Principal occupation / Job title (See Instructions)</b> Firefighter	
<b>Employer (See Instructions)</b> Cyfair Fire Department HCESD9		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 266/377 Rpt: 269/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Jason ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Jason ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Jason ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Jason ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Jason ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 267/377 Rpt: 270/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/15/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Jason ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Jason ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Jason ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Jason ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Jason ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 268/377 Rpt: 271/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/06/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Jason	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Jason	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Jason	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robertson, Jordan	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robertson, Jordan	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 269/377 Rpt: 272/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/26/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robertson, Jordan ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robertson, Jordan ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robertson, Jordan ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robertson, Jordan ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robertson, Jordan ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 270/377 Rpt: 273/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robertson, Jordan ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robertson, Jordan ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robertson, Jordan ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robertson, Jordan ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robertson, Jordan ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 271/377 Rpt: 274/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robertson, Jordan ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Christine ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Christine ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Christine ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Christine ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 272/377 Rpt: 275/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/26/2025	<b>5</b> Full name of contributor Rodriguez, Christine	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor Rodriguez, Christine	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor Rodriguez, Christine	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor Rodriguez, Christine	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor Rodriguez, Christine	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 273/377 Rpt: 276/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/29/2025	<b>5</b> Full name of contributor Rodriguez, Christine	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor Rodriguez, Christine	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor Rodriguez, Christine	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor Rodriguez, Christine	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor Rodriguez, Christine	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 274/377 Rpt: 277/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/03/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Christine	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Christine	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Christine	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Christine	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Christine	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 275/377 Rpt: 278/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Michael	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Michael	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Michael	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Michael	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Michael	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 276/377 Rpt: 279/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/15/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Michael	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Michael	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Michael	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Michael	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Michael	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 277/377 Rpt: 280/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/06/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Michael	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Michael	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Michael	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruiz, Randolph	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruiz, Randolph	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 278/377 Rpt: 281/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/26/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruiz, Randolph	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruiz, Randolph	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruiz, Randolph	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruiz, Randolph	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruiz, Randolph	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 279/377 Rpt: 282/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruiz, Randolph	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruiz, Randolph	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruiz, Randolph	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruiz, Randolph	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruiz, Randolph	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 280/377 Rpt: 283/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruiz, Randolph	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanchez, David	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanchez, David	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanchez, David	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanchez, David	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 281/377 Rpt: 284/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanchez, David ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanchez, David ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanchez, David ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanchez, David ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanchez, David ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 282/377 Rpt: 285/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanchez, David ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanchez, David ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanchez, David ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanchez, David ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sauceda, Antony ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 283/377 Rpt: 286/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/10/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sauceda, Antony ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$15.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sauceda, Antony ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sauceda, Antony ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sauceda, Antony ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sauceda, Antony ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 284/377 Rpt: 287/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/01/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sauceda, Antony ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$15.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sauceda, Antony ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sauceda, Antony ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sauceda, Antony ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sauceda, Antony ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 285/377 Rpt: 288/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sauceda, Antony	<b>7</b> Amount of Contribution (\$) \$15.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sauceda, Antony	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sayago, Jesus	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sayago, Jesus	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sayago, Jesus	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 286/377 Rpt: 289/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/12/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sayago, Jesus	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sayago, Jesus	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sayago, Jesus	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sayago, Jesus	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sayago, Jesus	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 287/377 Rpt: 290/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/03/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sayago, Jesus	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sayago, Jesus	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sayago, Jesus	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sayago, Jesus	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sayago, Jesus	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 288/377 Rpt: 291/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scalise, Beau ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scalise, Beau ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scalise, Beau ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scalise, Beau ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scalise, Beau ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 289/377 Rpt: 292/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/15/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scalise, Beau .....  <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scalise, Beau .....  Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scalise, Beau .....  Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scalise, Beau .....  Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scalise, Beau .....  Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 290/377 Rpt: 293/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/06/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scalise, Beau ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scalise, Beau ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scalise, Beau ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwab, Curt ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwab, Curt ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 291/377 Rpt: 294/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/26/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwab, Curt	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwab, Curt	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwab, Curt	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwab, Curt	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwab, Curt	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 292/377 Rpt: 295/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwab, Curt	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwab, Curt	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwab, Curt	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwab, Curt	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwab, Curt	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 293/377 Rpt: 296/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwab, Curt	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seguerra, Joshua	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seguerra, Joshua	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seguerra, Joshua	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seguerra, Joshua	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 294/377 Rpt: 297/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seguerra, Joshua .....  <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seguerra, Joshua .....  Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seguerra, Joshua .....  Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seguerra, Joshua .....  Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seguerra, Joshua .....  Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 295/377 Rpt: 298/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seguerra, Joshua ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seguerra, Joshua ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seguerra, Joshua ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seguerra, Joshua ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherrod, Jacob ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 296/377 Rpt: 299/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherrod, Jacob .....  <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$15.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherrod, Jacob .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherrod, Jacob .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherrod, Jacob .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherrod, Jacob .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 297/377 Rpt: 300/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/12/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherrod, Jacob	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherrod, Jacob	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherrod, Jacob	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherrod, Jacob	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherrod, Jacob	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 298/377 Rpt: 301/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/15/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherrod, Jacob .....  <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$15.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherrod, Jacob .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherrod, Jacob .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherrod, Jacob .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherrod, Jacob .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 299/377 Rpt: 302/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/03/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherrod, Jacob	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherrod, Jacob	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherrod, Jacob	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherrod, Jacob	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherrod, Jacob	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 300/377 Rpt: 303/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/06/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherrod, Jacob	<b>7</b> Amount of Contribution (\$) \$15.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherrod, Jacob	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherrod, Jacob	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherrod, Jacob	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherrod, Jacob	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 301/377 Rpt: 304/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simmons, Delani	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simmons, Delani	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simmons, Delani	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simmons, Delani	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simmons, Delani	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 302/377 Rpt: 305/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/15/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simmons, Delani	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simmons, Delani	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simmons, Delani	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simmons, Delani	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simmons, Delani	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 303/377 Rpt: 306/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/06/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simmons, Delani	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simmons, Delani	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simmons, Delani	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skow, Bryce	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skow, Bryce	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 304/377 Rpt: 307/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skow, Bryce	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skow, Bryce	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skow, Bryce	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skow, Bryce	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skow, Bryce	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 305/377 Rpt: 308/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skow, Bryce	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sloper, Aaron	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sloper, Aaron	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sloper, Aaron	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sloper, Aaron	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 306/377 Rpt: 309/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sloper, Aaron	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sloper, Aaron	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sloper, Aaron	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sloper, Aaron	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sloper, Aaron	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 307/377 Rpt: 310/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sloper, Aaron	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sloper, Aaron	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sloper, Aaron	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sloper, Aaron	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smithey, Justin	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 308/377 Rpt: 311/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/10/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smithey, Justin .....  <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$15.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smithey, Justin .....  Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smithey, Justin .....  Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smithey, Justin .....  Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smithey, Justin .....  Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 309/377 Rpt: 312/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/01/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smithey, Justin .....  <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$15.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smithey, Justin .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smithey, Justin .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smithey, Justin .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smithey, Justin .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 310/377 Rpt: 313/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smithey, Justin .....  <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$15.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smithey, Justin .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steadman, Kyle .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steadman, Kyle .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steadman, Kyle .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 311/377 Rpt: 314/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/12/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steadman, Kyle	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steadman, Kyle	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steadman, Kyle	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steadman, Kyle	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steadman, Kyle	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 312/377 Rpt: 315/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/03/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steadman, Kyle	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steadman, Kyle	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steadman, Kyle	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steadman, Kyle	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steadman, Kyle	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 313/377 Rpt: 316/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steele, Quinton	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steele, Quinton	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steele, Quinton	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steele, Quinton	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steele, Quinton	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 314/377 Rpt: 317/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/15/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steele, Quinton	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steele, Quinton	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steele, Quinton	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steele, Quinton	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steele, Quinton	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 315/377 Rpt: 318/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/06/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steele, Quinton	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steele, Quinton	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steele, Quinton	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevens, Darci	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevens, Darci	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 316/377 Rpt: 319/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/26/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevens, Darci ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevens, Darci ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevens, Darci ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevens, Darci ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevens, Darci ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 317/377 Rpt: 320/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevens, Darci ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevens, Darci ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevens, Darci ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevens, Darci ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevens, Darci ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 318/377 Rpt: 321/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevens, Darci	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sturgis, Casey	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sturgis, Casey	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sturgis, Casey	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sturgis, Casey	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 319/377 Rpt: 322/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sturgis, Casey	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sturgis, Casey	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sturgis, Casey	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sturgis, Casey	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sturgis, Casey	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 320/377 Rpt: 323/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sturgis, Casey	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sturgis, Casey	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sturgis, Casey	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sturgis, Casey	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swonke, Shaun	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 321/377 Rpt: 324/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/10/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swonke, Shaun	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swonke, Shaun	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swonke, Shaun	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swonke, Shaun	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swonke, Shaun	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 322/377 Rpt: 325/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/01/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swonke, Shaun	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swonke, Shaun	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swonke, Shaun	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swonke, Shaun	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swonke, Shaun	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 323/377 Rpt: 326/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swonke, Shaun	<b>7</b> Amount of Contribution (\$)  \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swonke, Shaun	Amount of Contribution (\$)  \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tapia, Samuel	Amount of Contribution (\$)  \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tapia, Samuel	Amount of Contribution (\$)  \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tapia, Samuel	Amount of Contribution (\$)  \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 324/377 Rpt: 327/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/12/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tapia, Samuel ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tapia, Samuel ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tapia, Samuel ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tapia, Samuel ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tapia, Samuel ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 325/377 Rpt: 328/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/03/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tapia, Samuel ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tapia, Samuel ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tapia, Samuel ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tapia, Samuel ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tapia, Samuel ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 326/377 Rpt: 329/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Brian	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Brian	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Brian	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Brian	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Brian	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 327/377 Rpt: 330/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/15/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Brian	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Brian	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Brian	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Brian	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Brian	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 328/377 Rpt: 331/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/06/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Brian	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Brian	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Brian	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thetford, Zachary	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thetford, Zachary	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 329/377 Rpt: 332/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/26/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thetford, Zachary	<b>7</b> Amount of Contribution (\$) \$15.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thetford, Zachary	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thetford, Zachary	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thetford, Zachary	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thetford, Zachary	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 330/377 Rpt: 333/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thetford, Zachary	<b>7</b> Amount of Contribution (\$) \$15.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thetford, Zachary	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thetford, Zachary	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thetford, Zachary	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thetford, Zachary	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 331/377 Rpt: 334/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thetford, Zachary	<b>7</b> Amount of Contribution (\$) \$15.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thudium, Patrick	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thudium, Patrick	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thudium, Patrick	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thudium, Patrick	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 332/377 Rpt: 335/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thudium, Patrick ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thudium, Patrick ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thudium, Patrick ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thudium, Patrick ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thudium, Patrick ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 333/377 Rpt: 336/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thudium, Patrick ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thudium, Patrick ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thudium, Patrick ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thudium, Patrick ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Marcos ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 334/377 Rpt: 337/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/10/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Marcos ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Marcos ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Marcos ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Marcos ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Marcos ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 335/377 Rpt: 338/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/01/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Marcos ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Marcos ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Marcos ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Marcos ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Marcos ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 336/377 Rpt: 339/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Marcos ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Marcos ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Roy ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Roy ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Roy ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 337/377 Rpt: 340/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/12/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Roy .....  <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Roy .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Roy .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Roy .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Roy .....  <b>6</b> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 338/377 Rpt: 341/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/03/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Roy	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Roy	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Roy	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Roy	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Roy	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 339/377 Rpt: 342/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Toussaint, John ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Toussaint, John ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Toussaint, John ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Toussaint, John ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Toussaint, John ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 340/377 Rpt: 343/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/15/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Toussaint, John ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Toussaint, John ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Toussaint, John ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Toussaint, John ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Toussaint, John ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 341/377 Rpt: 344/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/06/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Toussaint, John ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Toussaint, John ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Toussaint, John ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Velasquez, William ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Velasquez, William ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 342/377 Rpt: 345/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/26/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Velasquez, William	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Velasquez, William	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Velasquez, William	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Velasquez, William	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Velasquez, William	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 343/377 Rpt: 346/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Velasquez, William	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Velasquez, William	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Velasquez, William	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Velasquez, William	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Velasquez, William	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 344/377 Rpt: 347/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Velasquez, William	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vorheier, Joshua	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vorheier, Joshua	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vorheier, Joshua	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vorheier, Joshua	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 345/377 Rpt: 348/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vorheier, Joshua ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vorheier, Joshua ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vorheier, Joshua ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vorheier, Joshua ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vorheier, Joshua ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 346/377 Rpt: 349/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vorheier, Joshua ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vorheier, Joshua ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vorheier, Joshua ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vorheier, Joshua ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Jeffery ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 347/377 Rpt: 350/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/10/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Jeffery ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Jeffery ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Jeffery ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Jeffery ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Jeffery ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 348/377 Rpt: 351/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/01/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Jeffery ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Jeffery ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Jeffery ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Jeffery ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Jeffery ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 349/377 Rpt: 352/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Jeffery	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Jeffery	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Jeffrey	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Jeffrey	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Jeffrey	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 350/377 Rpt: 353/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/12/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Jeffrey ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Jeffrey ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Jeffrey ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Jeffrey ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Jeffrey ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 351/377 Rpt: 354/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/03/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Jeffrey ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Jeffrey ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Jeffrey ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Jeffrey ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Jeffrey ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 352/377 Rpt: 355/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Lanesa ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Lanesa ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Lanesa ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Lanesa ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Lanesa ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 353/377 Rpt: 356/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/15/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Lanesa ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Lanesa ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Lanesa ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Lanesa ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Lanesa ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 354/377 Rpt: 357/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/06/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Lanesa ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Lanesa ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Lanesa ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waters, Ryan ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waters, Ryan ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 355/377 Rpt: 358/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/26/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waters, Ryan	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waters, Ryan	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waters, Ryan	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waters, Ryan	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waters, Ryan	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 356/377 Rpt: 359/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waters, Ryan ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waters, Ryan ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waters, Ryan ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waters, Ryan ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waters, Ryan ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 357/377 Rpt: 360/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waters, Ryan	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webber, Noel	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webber, Noel	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webber, Noel	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webber, Noel	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 358/377 Rpt: 361/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webber, Noel ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webber, Noel ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webber, Noel ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webber, Noel ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webber, Noel ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 359/377 Rpt: 362/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webber, Noel	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webber, Noel	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webber, Noel	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webber, Noel	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weingart, Colin	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 360/377 Rpt: 363/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/10/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weingart, Colin ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weingart, Colin ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weingart, Colin ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weingart, Colin ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weingart, Colin ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 361/377 Rpt: 364/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/01/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weingart, Colin ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weingart, Colin ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weingart, Colin ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weingart, Colin ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weingart, Colin ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 362/377 Rpt: 365/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weingart, Colin ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weingart, Colin ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weldon, Tyler ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weldon, Tyler ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weldon, Tyler ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 363/377 Rpt: 366/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/12/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weldon, Tyler	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weldon, Tyler	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weldon, Tyler	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weldon, Tyler	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weldon, Tyler	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 364/377 Rpt: 367/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/03/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weldon, Tyler	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weldon, Tyler	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weldon, Tyler	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weldon, Tyler	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weldon, Tyler	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 365/377 Rpt: 368/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Raime	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
<b>Date</b> 12/10/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Raime	<b>Amount of Contribution (\$)</b> \$10.00
	<b>Contributor address; City; State; Zip Code</b>  TX	
<b>Principal occupation / Job title (See Instructions)</b> Firefighter		<b>Employer (See Instructions)</b> Cyfair Fire Department HCESD9
<b>Date</b> 11/26/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Raime	<b>Amount of Contribution (\$)</b> \$10.00
	<b>Contributor address; City; State; Zip Code</b>  TX	
<b>Principal occupation / Job title (See Instructions)</b> Firefighter		<b>Employer (See Instructions)</b> Cyfair Fire Department HCESD9
<b>Date</b> 11/12/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Raime	<b>Amount of Contribution (\$)</b> \$10.00
	<b>Contributor address; City; State; Zip Code</b>  TX	
<b>Principal occupation / Job title (See Instructions)</b> Firefighter		<b>Employer (See Instructions)</b> Cyfair Fire Department HCESD9
<b>Date</b> 10/29/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Raime	<b>Amount of Contribution (\$)</b> \$10.00
	<b>Contributor address; City; State; Zip Code</b>  TX	
<b>Principal occupation / Job title (See Instructions)</b> Firefighter		<b>Employer (See Instructions)</b> Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 366/377 Rpt: 369/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/15/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Raime	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Raime	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Raime	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Raime	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Raime	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 367/377 Rpt: 370/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/06/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Raime	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Raime	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Raime	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Adam	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Adam	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 368/377 Rpt: 371/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/26/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Adam ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Adam ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Adam ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Adam ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Adam ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 369/377 Rpt: 372/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Adam ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Adam ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Adam ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Adam ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Adam ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 370/377 Rpt: 373/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Adam	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Jack	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Jack	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Jack	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Jack	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 371/377 Rpt: 374/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Jack	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Jack	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Jack	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Jack	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Jack	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 372/377 Rpt: 375/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 08/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Jack	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Jack	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Jack	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Jack	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Trevor	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 373/377 Rpt: 376/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 12/10/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Trevor	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Trevor	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Trevor	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Trevor	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Trevor	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 374/377 Rpt: 377/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 10/01/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Trevor	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Trevor	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Trevor	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Trevor	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Trevor	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 375/377 Rpt: 378/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 07/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Trevor	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  TX	
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Trevor	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yezak, Darren	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yezak, Darren	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yezak, Darren	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  TX	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 376/377 Rpt: 379/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 11/12/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yezak, Darren ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yezak, Darren ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yezak, Darren ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yezak, Darren ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yezak, Darren ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 377/377 Rpt: 380/380
<b>2</b> FILER NAME Cy-Fair Professional Firefighters Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00087022
<b>4</b> Date 09/03/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yezak, Darren ..... <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$) \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Firefighter		<b>9</b> Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yezak, Darren ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yezak, Darren ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yezak, Darren ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yezak, Darren ..... Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Cyfair Fire Department HCESD9