

# GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

## FORM GPAC COVER SHEET PG 1

|                                                                                        |                                                                                                                                                                                                                                                                                                                                                      |                                                      |                                                                                                                                                                                                  |  |
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| The GPAC Instruction Guide explains how to complete this form.                         |                                                                                                                                                                                                                                                                                                                                                      | 1 Filer ID<br>(Ethics Commission Filers)<br>00015754 | 2 Total pages filed:<br>5                                                                                                                                                                        |  |
| 3 COMMITTEE NAME<br>Houston Professional Fire Fighters Assn. Local #341 PAC            |                                                                                                                                                                                                                                                                                                                                                      |                                                      | <b>OFFICE USE ONLY</b><br>Date Received<br>ELECTRONICALLY FILED<br>02/02/2026<br>Date Hand-delivered or Date Postmarked<br>Receipt # Amount<br>Date Processed<br>Date Imaged                     |  |
| 4 COMMITTEE ADDRESS<br><br><input type="checkbox"/> Change of Address                  | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE<br>1907 Freeman St<br><br>Houston, TX 77009                                                                                                                                                                                                                                                   |                                                      |                                                                                                                                                                                                  |  |
| 5 CAMPAIGN TREASURER NAME                                                              | MS / MRS / MR FIRST MI<br>Roy<br>NICKNAME LAST SUFFIX<br>Cormier                                                                                                                                                                                                                                                                                     |                                                      |                                                                                                                                                                                                  |  |
| 6 CAMPAIGN TREASURER STREET ADDRESS<br>(Residence or Business)                         | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE<br>9630 Pagewood Ln.<br><br>Houston, TX 77063                                                                                                                                                                                                                                |                                                      |                                                                                                                                                                                                  |  |
| 7 CAMPAIGN TREASURER MAILING ADDRESS<br><br><input type="checkbox"/> Change of Address | STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE<br>1907 Freeman Street<br><br>Houston, TX 77009                                                                                                                                                                                                                                               |                                                      |                                                                                                                                                                                                  |  |
| 8 CAMPAIGN TREASURER PHONE                                                             | AREA CODE PHONE NUMBER EXTENSION<br>(281) 250-8250                                                                                                                                                                                                                                                                                                   |                                                      |                                                                                                                                                                                                  |  |
| 9 REPORT TYPE                                                                          | <input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR)<br><input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination<br><input type="checkbox"/> Runoff |                                                      |                                                                                                                                                                                                  |  |
| 10 PERIOD COVERED                                                                      | Month Day Year Month Day Year<br>01/01/2026 THROUGH 01/22/2026                                                                                                                                                                                                                                                                                       |                                                      |                                                                                                                                                                                                  |  |
| 11 ELECTION                                                                            | ELECTION DATE<br>Month Day Year<br>03/03/2026                                                                                                                                                                                                                                                                                                        |                                                      | ELECTION TYPE<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other<br><input type="checkbox"/> General <input type="checkbox"/> Special |  |

GO TO PAGE 2

# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**  
COVER SHEET PG 2

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                      |                                                                                                                                                                                                                                                   |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>12 COMMITTEE NAME</b><br>Houston Professional Fire Fighters Assn. Local #341 PAC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                      | <b>13 Filer ID</b> (Ethics Commission Filers)<br>00015754                                                                                                                                                                                         |
| <b>14 COMMITTEE ACTIVITY</b><br><br>(Attach lists on plain paper to complete this report if necessary.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <b>1. Candidates</b><br>(Identify by name or, if applicable, classify by party.)                     | A. Supported    The Honorable Joseph Cole Hefner    State Representative                                                                                                                                                                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                      | B. Opposed                                                                                                                                                                                                                                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <b>2. Measures</b><br>(Describe by date and location of election and nature of issue.)               | A. Supported                                                                                                                                                                                                                                      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                      | B. Opposed                                                                                                                                                                                                                                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <b>3. Officeholders Assisted</b><br>(Identify by name or, if applicable, classify by party.)         |                                                                                                                                                                                                                                                   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <b>15 CONTRIBUTION TOTALS</b>                                                                        | <b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</b><br><input type="checkbox"/> check here if this report qualifies for the higher itemization threshold |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <b>2. TOTAL POLITICAL CONTRIBUTIONS</b><br>(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)       | \$ 0.00                                                                                                                                                                                                                                           |
| EXPENDITURE TOTALS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>                                                    | \$ 0.00                                                                                                                                                                                                                                           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <b>4. TOTAL POLITICAL EXPENDITURES</b>                                                               | \$ 16,627.00                                                                                                                                                                                                                                      |
| CONTRIBUTION BALANCE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>        | \$ 148,325.16                                                                                                                                                                                                                                     |
| OUTSTANDING LOAN TOTALS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b> | \$ 0.00                                                                                                                                                                                                                                           |
| <b>16 AFFIDAVIT</b><br><br><div style="text-align: right;">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.</div><br><div style="text-align: right;">_____<br/>Roy Cormier<br/>Signature of Campaign Treasurer</div><br><div>AFFIX NOTARY STAMP / SEAL ABOVE</div><br>Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.<br><br>_____<br>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 5

|                                                                                     |                                                                                                                   |                                                           |           |
|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|-----------|
| <b>17 COMMITTEE NAME</b><br>Houston Professional Fire Fighters Assn. Local #341 PAC |                                                                                                                   | <b>18 Filer ID</b> (Ethics Commission Filers)<br>00015754 |           |
| <b>19 SCHEDULE SUBTOTALS</b><br>NAME OF SCHEDULE                                    |                                                                                                                   | SUBTOTAL AMOUNT                                           |           |
| 1.                                                                                  | <input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                                            | \$                                                        |           |
| 2.                                                                                  | <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS                              | \$                                                        |           |
| 3.                                                                                  | <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS                                                        | \$                                                        |           |
| 4.                                                                                  | <input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION               | \$                                                        |           |
| 5.                                                                                  | <input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$                                                        |           |
| 6.                                                                                  | <input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION                     | \$                                                        |           |
| 7.                                                                                  | <input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION                 | \$                                                        |           |
| 8.                                                                                  | <input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION                 | \$                                                        |           |
| 9.                                                                                  | <input type="checkbox"/> SCHEDULE E: LOANS                                                                        | \$                                                        |           |
| 10.                                                                                 | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS              | \$                                                        | 15,400.00 |
| 11.                                                                                 | <input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS                                      | \$                                                        | 1,227.00  |
| 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       | \$                                                        |           |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

|                                                                                                     |                                                                                                                                                          |                                                                                                                                                                                                                           |
|-----------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1</b> Total pages Schedule F1:<br>Sch: 1/1 Rpt: 4/5                                              | <b>2</b> FILER NAME<br>Houston Professional Fire Fighters Assn. Local #341 PAC                                                                           | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015754                                                                                                                                                                  |
| <b>4</b> Date<br>01/15/2026                                                                         | <b>5</b> Payee name<br>Cole Hefner Campaign                                                                                                              |                                                                                                                                                                                                                           |
| <b>6</b> Amount (\$)<br>\$2,500.00<br><br><input type="checkbox"/> Expenditure from corporate funds | <b>7</b> Payee address; City; State; Zip Code<br>P.O. Box 167<br><br>Mount Pleasant, TX 75456                                                            |                                                                                                                                                                                                                           |
| <b>8</b> PURPOSE OF EXPENDITURE                                                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign contribution           |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                 | Candidate/Officeholder name                                                                                                                              | Office sought Office held                                                                                                                                                                                                 |
| Date<br>01/02/2026                                                                                  | Payee name<br>MEM & Associates                                                                                                                           |                                                                                                                                                                                                                           |
| Amount (\$)<br>\$10,000.00<br><br><input type="checkbox"/> Expenditure from corporate funds         | Payee address; City; State; Zip Code<br>823 Congress Ave Ste 900<br><br>Austin, TX 78701                                                                 |                                                                                                                                                                                                                           |
| PURPOSE OF EXPENDITURE                                                                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Consulting Expense                                                            | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>PAC Political consultant        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                          | Candidate/Officeholder name                                                                                                                              | Office sought Office held                                                                                                                                                                                                 |
| Date<br>01/15/2026                                                                                  | Payee name<br>Melton & Melton LLP                                                                                                                        |                                                                                                                                                                                                                           |
| Amount (\$)<br>\$2,900.00<br><br><input type="checkbox"/> Expenditure from corporate funds          | Payee address; City; State; Zip Code<br>6002 Rogerdale Ste 200<br><br>Houston, TX 77072                                                                  |                                                                                                                                                                                                                           |
| PURPOSE OF EXPENDITURE                                                                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Accounting/Banking                                                            | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>PAC tax and accounting services |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                          | Candidate/Officeholder name                                                                                                                              | Office sought Office held                                                                                                                                                                                                 |

# UNPAID INCURRED OBLIGATIONS

## SCHEDULE F2

### EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

|                                                                                                     |                                                                                               |                                                                                                                                                                                                                                 |
|-----------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1</b> Total pages Schedule F2:<br>Sch: 1/1 Rpt: 5/5                                              | <b>2</b> FILER NAME<br>Houston Professional Fire Fighters Assn. Local #341 PAC                | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015754                                                                                                                                                                        |
| <b>4</b> TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS                                            |                                                                                               | \$                                                                                                                                                                                                                              |
| <b>5</b> Date<br>01/16/2026                                                                         | <b>6</b> Payee name<br>Atchley & Associates LLP                                               |                                                                                                                                                                                                                                 |
| <b>7</b> Amount (\$)<br>\$1,227.00<br><br><input type="checkbox"/> Expenditure from corporate funds | <b>8</b> Payee address; City; State; Zip Code<br>1005 La Posada Dr<br><br>Austin, TX 78752    |                                                                                                                                                                                                                                 |
| <b>9</b> TYPE OF EXPENDITURE                                                                        | <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political          |                                                                                                                                                                                                                                 |
| <b>10</b> PURPOSE OF EXPENDITURE                                                                    | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Accounting/Banking | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>PAC accounting and reporting services |
| <b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                | Candidate/Officeholder name                                                                   | Office sought<br>Office held                                                                                                                                                                                                    |