

SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM SPAC COVER SHEET PG 1

The SPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 3
3 COMMITTEE NAME Round Rock Firefighters Association		OFFICE USE ONLY	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address [REDACTED]		Date Received	
		JAN 20 '26 AM 10:53	
5 CAMPAIGN TREASURER NAME Mr. Bradley Silva		Date Hand-delivered or Date Postmarked	
		Receipt #	Amount \$
		Date Processed	
		Date Imaged	
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business) [REDACTED]		STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: ZIP CODE Austin Tx 78723	
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address [REDACTED]		STREET ADDRESS OR PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE Round Rock Tx 78664	
8 CAMPAIGN TREASURER PHONE		AREA CODE PHONE NUMBER EXTENSION [REDACTED]	
9 REPORT TYPE		<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Dissolution Report (Attached PAC-FR) <input type="checkbox"/> Runoff <input type="checkbox"/> 10th day after campaign treasurer termination	
10 PERIOD COVERED		Month Day Year THROUGH Month Day Year 09 / 19 / 2025 THROUGH 12 / 31 / 2025	
11 ELECTION		ELECTION DATE ELECTION TYPE Month Day Year Primary Runoff Other 05 / 02 / 2026 General Special Description _____	

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SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM SPAC
COVER SHEET PG 2

12 COMMITTEE NAME <i>Round Rock Firefighters Association</i>		13 Filer ID (Ethics Commission Filers)
14 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.)		CANDIDATE / OFFICEHOLDER NAME OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)
<input checked="" type="checkbox"/> SUPPORT (Candidate or Measure) <input type="checkbox"/> OPPOSE (Candidate or Measure) <input type="checkbox"/> ASSIST (Officeholder)		BALLOT IDENTIFICATION # Proposition B ELECTION DATE Month <u>05</u> Day <u>02</u> Year <u>2026</u> DESCRIPTION NFPA 1710 Minimum Staffing Levels and Response
15 CONTRIBUTION TOTALS EXPENDITURE TOTALS CONTRIBUTION BALANCE OUTSTANDING LOAN TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ <u>0</u>
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <u>0</u>
	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ <u>0</u>
	4. TOTAL POLITICAL EXPENDITURES	\$ <u>0</u>
	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>0</u>
	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>0</u>

16 SIGNATURE 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.

Signature of Campaign Treasurer (Declarant)

Please complete either option below:

(1) Affidavit

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

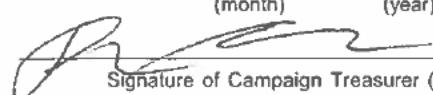
OR

(2) Unsworn Declaration

My name is Bradley Silva, and my date of birth is _____

My address is _____ (Street) _____ (city) To 78723 (state) (zip code)(country)

Executed in Traud County, State of Texas, on the 14 day of January, 20 26
(month) (year)



Signature of Campaign Treasurer (Declarant)

SUBTOTALS - SPAC**FORM SPAC
COVER SHEET PG 3**

17 COMMITTEE NAME <i>Round Rock Firefighter Association</i>	18 Filer ID (Ethics Commission Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 0
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0
4. <input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$ 0
5. <input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$ 0
6. <input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$ 0
7. <input type="checkbox"/> SCHEDULE E: LOANS	\$ 0
8. <input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
9. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0
10. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
11. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0
12. <input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/O/H	\$ 0
13. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
14. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0

**AMENDMENT: APPOINTMENT OF A CAMPAIGN
TREASURER BY A SPECIFIC-PURPOSE COMMITTEE**

**FORM ASTA
PG 1**

<p>See ASTA Instruction Guide for detailed instructions. If you are involved in a School District Bond Election, you must file Form ASTA with the local filing authority BEFORE sending a file-stamped copy to the Texas Ethics Commission.</p>				<p>1 Total pages filed: <i>2</i></p>	<p>OFFICE USE ONLY</p>		
<p>2 COMMITTEE NAME <i>Round Rock Firefighters Association</i></p>				<p>3 FILER ID #</p>	<p>Date Received</p>		
<p>4 COMMITTEE NAME <input type="checkbox"/> NEW</p>							
<p>5 COMMITTEE ADDRESS <input type="checkbox"/> NEW</p>		ADDRESS / PO BOX:	APT / SUITE #:	CITY:	STATE:	ZIP CODE	
<p>6 CAMPAIGN TREASURER NAME <input type="checkbox"/> NEW</p>		MS / MRS / MR	FIRST	MI	<p><input type="checkbox"/> Receipt # <input type="checkbox"/> Amount \$</p>		
		NICKNAME	LAST	SUFFIX	<p><input type="checkbox"/> Date Hand-delivered or Postmarked</p>		
		<p><input type="checkbox"/> Date Processed</p>					
		<p><input type="checkbox"/> Date Imaged</p>					
<p>7 CAMPAIGN TREASURER STREET ADDRESS (residence or business) <input type="checkbox"/> same as above</p>		<p><input type="checkbox"/> NEW</p>	STREET ADDRESS:	APT / SUITE #:	CITY:	STATE:	ZIP CODE
<p>8 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> same as above</p>		<p><input type="checkbox"/> NEW</p>	ADDRESS / PO BOX:	APT / SUITE #:	CITY:	STATE:	ZIP CODE
<p>9 CAMPAIGN TREASURER PHONE</p>		<p><input type="checkbox"/> NEW</p>	AREA CODE	PHONE NUMBER	EXTENSION		
		<p>()</p>					
<p>10 PERSON APPOINTING TREASURER</p>		<p>FIRST</p>			MI	LAST	SUFFIX
<p>11 SIGNATURE</p>		<p>I understand that I have been appointed as the campaign treasurer for this specific-purpose committee and that I am responsible for filing all required reports and that I may be subject to fines for failure to do so. I am aware of the restrictions in title 15 of the Election Code on contributions from corporations and labor organizations.</p>					
<p style="text-align: right;">_____ Signature of Campaign Treasurer</p>							
<p>12 ASSISTANT CAMPAIGN TREASURER (see instructions)</p>		<p><input type="checkbox"/> NEW</p>	FIRST	MI	LAST	SUFFIX	
<p>13 ASSISTANT CAMPAIGN TREASURER ADDRESS</p>		<p><input type="checkbox"/> NEW</p>	ADDRESS / PO BOX:	APT / SUITE #:	CITY:	STATE:	ZIP CODE
<p>14 ASSISTANT CAMPAIGN TREASURER PHONE</p>		<p><input type="checkbox"/> NEW</p>	AREA CODE	PHONE NUMBER	EXTENSION		
<p style="text-align: center;">()</p>							

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**AMENDMENT: SPECIFIC-PURPOSE COMMITTEE
PURPOSE AND MODIFIED REPORTING DECLARATION**

FORM ASTA

PG 2

15 COMMITTEE NAME

Round Rock Firefighters Association

16 FILER ID #

17 COMMITTEE
PURPOSE

NEW ADD
 SUPPORT CANDIDATE
 OPPOSE CANDIDATE
 ASSIST OFFICEHOLDER

CANDIDATE / OFFICEHOLDER NAME

OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)

NEW ADD
 SUPPORT MEASURE
 OPPOSE MEASURE

BALLOT IDENTIFICATION OF MEASURE / #

Proposition B

ELECTION DATE

Month Day Year
05 / 02 / 2026

DESCRIPTION

NFPA 1710 Minimum Staffing and Response times.

18 MODIFIED
REPORTING
DECLARATION

NEW

**COMPLETE THIS SECTION ONLY IF YOU ARE CHOOSING
MODIFIED REPORTING.**

**••This declaration must be filed no later than the 30th day
before the first election to which the declaration applies. ••**

••The modified reporting declaration is valid for one election cycle only. ••
(An election cycle includes a primary election, a general election, and any related runoffs.)

The committee does not intend to accept more than \$1,110 in political contributions or make more than \$1,110 in political expenditures (excluding filing fees) in connection with any future election within the election cycle. The committee understands that if either one of those limits is exceeded, the committee's campaign treasurer will be required to file pre-election reports and, if necessary, a runoff report.

Year of election(s) or election cycle to
which declaration applies

Signature of Campaign Treasurer

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

TEC Filers may send this form to the TEC electronically at treasappoint@ethics.state.tx.us

or mail to
Texas Ethics Commission
P.O. Box 12070
Austin, TX 78711-2070

Non-TEC Filers must file this form with the local filing authority
DO NOT SEND TO TEC

For more information about where to file go to:
<https://www.ethics.state.tx.us/filinginfo/QuickFileAReport.php>

This appointment is effective on the date it is filed with the appropriate filing authority.