

SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

6250

FORM SPAC COVER SHEET PG 1

The SPAC INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers)	2 Total pages filed:
3 COMMITTEE NAME <i>Firefighters For Public Safety</i>		OFFICE USE ONLY Date Received: APR - 6 AM 14 Date Hand-delivered or Date Postmarked: APR 14	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <i>503 Hyde Cove Leander TX, 78641</i>	Receipt # Amount Date Processed Date Imaged	
5 CAMPAIGN TREASURER NAME <input type="checkbox"/> Change of Address	MS / MRS / MR NICKNAME FIRST LAST MI SUFFIX <i>Mr. Steven Salazar</i>		
6 CAMPAIGN TREASURER'S STREET ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <i>503 Hyde Cove Leander TX, 78641</i>		
7 CAMPAIGN TREASURER'S MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <i>Same</i>		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION <i>(512) 260-6483</i>		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Dissolution (attach PAC-DR) <input type="checkbox"/> April 3 <input type="checkbox"/> Runoff <input type="checkbox"/> 10th day after campaign treasurer termination		
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year <i>2 / 26 / 06 4 / 3 / 06</i>		
11 ELECTION	ELECTION DATE Month Day Year <i>5 / 13 / 06</i>	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special	

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SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

**FORM SPAC
COVER SHEET PG 2**

12 COMMITTEE NAME *Fire Fighters For Public Safety* **ACCOUNT #**
(Ethics Commission filers)

13 COMMITTEE PURPOSE
(Attach lists on plain paper to complete this report if necessary.)

CANDIDATE

SUPPORT
(Candidate or Measure)

OPPOSE
(Candidate or Measure)

ASSIST
(Officeholder)

OFFICEHOLDER

MEASURE

CANDIDATE / OFFICEHOLDER NAME

OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)

BALLOT IDENTIFICATION / # *not assigned* **ELECTION DATE**
Month Day Year *5 / 13 / 06*

DESCRIPTION
TCESS #6 Collective Bargaining

14 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ <i>0</i>
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <i>0</i>
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ <i>4263</i>
	4. TOTAL POLITICAL EXPENDITURES	\$ <i>832.73</i>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <i>3,366.71</i>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <i>0</i>

15 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.

[Signature]
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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F: <u>1</u>
2 FILER NAME <u>Steven Palazar</u>		3 ACCOUNT # (Ethics Commission filers)
4 Date <u>3-6-06</u>	5 Payee name <u>Mr. Gattis Pizza</u> 6 Payee address; City; State; Zip Code <u>3305 RR 620 Austin TX 78734</u>	7 Amount (\$) <u>116.47</u>
8 Purpose of payment (See instructions regarding type of information required.) <u>Food For Signature Collection</u>		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date <u>3-7-06</u>	Payee name <u>Mr. Gattis Pizza</u> Payee address; City; State; Zip Code <u>3305 RR620 Austin TX 78734</u>	Amount (\$) <u>95.16</u>
Purpose of payment (See instructions regarding type of information required.) <u>Food For Signature Collection</u>		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date <u>3-17-06</u>	Payee name <u>Lynne Watts (Notary Public)</u> Payee address; City; State; Zip Code <u>1104 Space Lane Austin TX 78758</u>	Amount (\$) <u>443.47</u>
Purpose of payment (See instructions regarding type of information required.) <u>Signature Notary</u>		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date <u>3-28-06</u>	Payee name <u>Elizabeth Rygg</u> Payee address; City; State; Zip Code	Amount (\$) <u>135.00</u>
Purpose of payment (See instructions regarding type of information required.) <u>Signature Collection money due</u>		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED		



TEXAS ETHICS COMMISSION AFFIDAVIT

OFFICE USE ONLY

Date Received

HD / PM

Date Processed

Date Imaged

Complete this affidavit if you are raising a defense to late filing.

Filer Name <i>Steven Palazar</i>	Account #
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I swear, or affirm, under penalty of perjury that the following statement is in all things true and correct.

The financial report covering the dates of Feb. 26, 2006 - April 1, 2006 are late because the campaign treasurer was hospitalized from March 29 - April 2.

Steven Palazar
Signature of filer

NOTARY STAMP / SEAL

Sworn to and subscribed before me by _____ 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

503 Hyde Co.
Leander TX 78641

AUSTIN TX 787
04 APR 2006 PM 5 T



Dana DeBeauvoir
Travis County Clerk (Elections)

5501 Airport
Austin TX 78751

78751+1410 0010