

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC COVER SHEET PG 1

The GPAC INSTRUCTION GUIDE explains how to complete this form.

1 ACCOUNT #
(Ethics Commission filers)
00064962

2 PAGE #
1 of 3

3 COMMITTEE NAME
North Texas Leadership PAC

OFFICE USE ONLY

Date Received

Date Hand delivered or Date Postmarked

Receipt #

Amount

Date Processed

Date Imaged

2010 JAN 15 PM 1:05
CITY SECRETARY
DALLAS, TEXAS
RECEIVED

4 COMMITTEE ADDRESS
ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
PO Box 763143
Dallas, TX 75376
 Change of Address

5 CAMPAIGN TREASURER NAME
MS / MRS / MR FIRST MI
Ms. Mattie
NICKNAME LAST SUFFIX
Youngblood

6 CAMPAIGN TREASURER'S STREET ADDRESS
(Residence or business)
STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
PO Box 763143
Dallas, TX 75376

7 CAMPAIGN TREASURER'S MAILING ADDRESS
STREET OR PO BOX; APT/SUITE#; CITY; STATE; ZIP CODE
PO Box 763143
Dallas, TX 75376
 Change of Address

8 CAMPAIGN TREASURER PHONE
AREA CODE PHONE NUMBER EXTENSION
(214) 809-1020

9 REPORT TYPE
 January 15 30th day before election Dissolution (attach PAC-DR)
 July 15 8th day before election 10th day after campaign treasurer termination
 Runoff

10 PERIOD COVERED
Month Day Year THROUGH Month Day Year
07/01/2009 12/31/2009

11 ELECTION
ELECTION DATE ELECTION TYPE
Month Day Year Primary Runoff General Special

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GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

**FORM GPAC
COVER SHEET PG 2**

12 COMMITTEE NAME North Texas Leadership PAC

ACCOUNT #
00064962

13 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (identify by name or, if applicable, classify by party)	A. Supported
		B. Opposed
	2. Measures (describe by date and location of election and nature of issue)	A. Supported
		B. Opposed
	3. Officeholders Assisted (identify by name or, if applicable, classify by party)	

14 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED (OR \$100 OR LESS IF QUALIFIED FOR HIGHER THRESHOLD) <input type="checkbox"/> Check here if this report qualifies for the higher itemization threshold.	\$	0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	0.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	7,000.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	9,834.19
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

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 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 (FOR FORMS GPAC AND MPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 1/1 Report: 3/3

2 FILER NAME North Texas Leadership PAC

3 ACCOUNT # (Ethics Commission filers)
00064962

4 Date
12/31/2009

5 Payee name
Dwayne Caraway Campaign
6 Payee address; City; State; Zip Code
2217 Cedar Crest Blvd.
Dallas, TX 75203

7 Amount (\$)
\$1,000.00

Expenditure from corporate funds

8 Purpose of payment (See instructions regarding type of information required.)
Campaign Donation

(If travel outside of Texas, complete Schedule T)

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date
12/31/2009

Payee name
Royce West Campaign
Payee address; City; State; Zip Code
5787 S. Hampton Road
Dallas, TX 75232

Amount (\$)
\$1,000.00

Expenditure from corporate funds

Purpose of payment (See instructions regarding type of information required.)
Campaign Donation

(If travel outside of Texas, complete Schedule T)

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date
09/21/2009

Payee name
Texas Democratic Party
Payee address; City; State; Zip Code
505 W. 12th Street, Suite 200
Austin, TX 78701

Amount (\$)
\$5,000.00

Expenditure from corporate funds

Purpose of payment (See instructions regarding type of information required.)
DNC Reception Host Committee

(If travel outside of Texas, complete Schedule T)

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held: