

125145

RECEIVED

Camp, Linda

From: oracle@txprod.ethics.state.tx.us
Sent: Monday, October 01, 2012 10:56 AM
To: Camp, Linda
Subject: 00016405 Texas filing Acknowledgment

2012 OCT -4 AM 10: 35

CITY SECRETARY
DALLAS, TEXAS

TXP sent to: linda.camp@klgates.com

Texas Campaign Finance Report Filing Acknowledgement for K&L Gates LLP Committee for Good Government(00016405). This is to acknowledge the receipt and acceptance of your electronic filing. Your filing for K&L Gates LLP Committee for Good Government(00016405) was received and accepted by our system at MON October 01,2012 10:56:04 AM, and was assigned the Filing ID of: TX-544426. Please make a note of this, as it will be necessary to refer to this information in the future.

125145

Texas Ethics Commission

P.O.Box 12070

Austin, Texas 78711-2070

(512)463-5800 TDD 1-800-735-2989

MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM MPAC COVER SHEET PG 1

The MPAC INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers) 00016405	2 PAGE # 1 of 3
3 COMMITTEE NAME K&L Gates LLP Committee for Good Government		OFFICE USE ONLY Date Received Date Hand-delivered or Date Postmarked	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT/SUITE #; CITY; STATE ZIP CODE 1717 Main Street, Suite 2800 Dallas, TX 75201	CITY SECRETARY DALLAS, TEXAS 2012 OCT -4 AM 10:5	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mr. Edward O. NICKNAME LAST SUFFIX Coultas	Receipt #	Amount
		Date Processed	
		Date Imaged	
6 CAMPAIGN TREASURER'S STREET ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 111 Congress Avenue, Suite 900 Austin, TX 78701		
7 CAMPAIGN TREASURER'S MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 111 Congress Avenue, Suite 900 Austin, TX 78701		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 482-6823		
9 REPORT TYPE	<input checked="" type="checkbox"/> Monthly (Enter date below) <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Dissolution (attach PAC-DR)		
10 MONTHLY REPORT FILING DEADLINE	<input type="checkbox"/> January 5 <input type="checkbox"/> April 5 <input type="checkbox"/> July 5 <input checked="" type="checkbox"/> October 5 <input type="checkbox"/> February 5 <input type="checkbox"/> May 5 <input type="checkbox"/> August 5 <input type="checkbox"/> November 5 <input type="checkbox"/> March 5 <input type="checkbox"/> June 5 <input type="checkbox"/> September 5 <input type="checkbox"/> December 5		
11 PERIOD COVERED	Month Day Year THROUGH Month Day Year 08/26/2012 THROUGH 09/25/2012		

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**MONTHLY FILING GPAC REPORT:
PURPOSE AND TOTALS**

**FORM MPAC
COVER SHEET PG 2**

12 COMMITTEE NAME		K&L Gates LLP Committee for Good Government		ACCOUNT #	00016405
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	SEE SCHEDULE F FOR NAMES OF CANDIDATES 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 \$10 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED (OR \$20 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 \$10 OR LESS, UNLESS ITEMIZED	\$	0.00	
	4.	TOTAL POLITICAL EXPENDITURES	\$	1,000.00	
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	11,638.98	
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

EXPENDITURE CATEGORIES

- | | | | |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gifts/Awards/Memorial Expense | Salaries/Wages/Contract Labor | Loan Repayment/Reimbursement |
| Accounting/Banking | Legal Services | Solicitation/Fundraising Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Travel In District | Contributions/Donations Made By |
| Event Expense | Polling Expense | Travel Out Of District | Candidate/Officeholder/Political Committee |
| Fees | Printing Expense | Office Overhead/Rental Expense | OTHER (enter a category not listed above) |

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 1/1 Report: 3/3		2 FILER NAME K&L Gates LLP Committee for Good Government		3 ACCOUNT # (TEC filers) 00016405	
4 Date 09/19/2012		5 Payee name Rafael Anchia Campaign			
6 Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds		7 Payee address City; State; Zip Code P.O. Box 4468 Dallas, TX 75208			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign contribution to support candidate.	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought:	Office held: