

March 1, 2018

Robert H. McCarthy, Jr. robert.mccarthy@klgates.com

T 512 482 6836 F 512 482 6859

Rosa A. Rios City Secretary Dallas City Hall 1500 Marilla Room 5 D South Dallas, TX 75201

Re: Monthly Filing General-Purpose Committee Campaign Finance Report for the period ending February 25, 2018, for K&L Gates LLP Committee for Good Government

Dear Ms. Rios:

Enclosed, as required pursuant to Chapter 15A of the Dallas City Code, please find a copy of the K&L Gates LLP Committee for Good Government Campaign Finance Report referenced above that was filed electronically with the Texas Ethics Commission. A confirmation e-mail is attached.

Please appropriately file this document. If you have any questions, please give me a call at (512) 482-6836.

Very truly yours,

Robert H. McCarthy, Jr.

Enclosures

Goodsheller, Miranda A.

From:

do-not-reply@ethics.state.tx.us

Sent:

Tuesday, February 27, 2018 10:22 AM

To:

McCarthy, Robert

Cc:

McCarthy, Robert; Goodsheller, Miranda A.

Subject:

00016405 Texas Ethics Commissions Electronic Filing System Acknowledgment

Texas Campaign Finance Report Filing Acknowledgement for K & L Gates LLP Committee for Good Government (Filer ID:00016405) . This is to acknowledge the receipt and acceptance of your electronic filing. Your filing for K & L Gates LLP Committee for Good Government (Filer ID:00016405) was received and accepted by our system at Tue Feb 27 10:21:33 CST 2018 and was assigned the report number of: TX-100700331. Please keep this acknowledgment, as it may be necessary to refer to it in the future.

	FILING GENERAL-PURPOS E CAMPAIGN FINANCE RE		FORM MPAC COVER SHEET PG 1
The MPAC Instruction	Guide explains how to complete this form.	Filer ID (Ethics Commission Filers) 00016405	2 Total pages filed: 19
3 COMMITTEE NAME			OFFICE USE ONLY
K & L Gates LLP C	ommittee for Good Government		Date Received
			ELECTRONICALLY FILED 02/27/2018
4 COMMITTEE	ADDRESS / PO BOX; APT / SUITE #; CI	ITY; STATE; ZIP	
ADDRESS	1717 Main St., Ste. 2800		Transaction CD
—			
Change of Address	Dallas, TX 75201		Date Hand-delivered or Date Postmarked
5 CAMPAIGN	MS / MRS / MR FIRST	MI	6. Q 6. L. L.
TREASURER NAME	Mr. Robert H.		Receipt # Aphount
			Standard Standard
	NICKNAME LAST	SUFF	
	McCarthy		Date Imaged
	mocarary		
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 2801 Via Fortuna Ste. 350 Austin, TX 78746	APT / SUITE #; CITY; S	TATE; ZIP CODE
7 0445404		ADT / CLUTE #: CITY: C	TATE: 7ID CODE
7 CAMPAIGN TREASURER MAILING ADDRESS	STREET ADDRESS OR PO BOX; 2801 Via Fortuna Ste. 350	APT / SUITE #; CITY; S	TATE; ZIP CODE
Change of Address	Austin, TX 78746		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (512) 482-6836	EXTENSION	
9 REPORT TYPE	X Monthly	10th day after campaign treasurer termination	Dissolution (Attach PAC-DR)
10 MONTHLY REPORT FILING	January 5 April 5	July 5	October 5
DEADLINE	February 5 May 5	August 5	November 5
			_
	X March 5 June 5	September 5	December 5
11 PERIOD COVERED	Month Day Year 01/26/2018 TH	ROUGH Month 02/25	Day Year 5/2018
	Month Day Year	ROUGH	•
	GO TO	PAGE 2	
Forms provided by Te		cs.state.tx.us	Version V1.0.585

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME					13 Filer I	D	(Ethics Commission Filers)
K & L Gates LLP Comm	ittee for Good Governr	ment			00016	6405	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Ms. Ina Minjarez	State Repres	sentative		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed					
	Measures (Describe by date and location of election and nature of issue.)	A. Supported	1				
		B. Opposed					
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				E		
15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED PLEDGES, LOANS, check here if this report	OR GUARANTEE	ES OF LOANS)			\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLEI			OF LOANS)		\$	0.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL E	EXPENDITURES	OF \$10 OR LESS,	UNLESS ITEM	1IZED :	\$	0.00
	4. TOTAL POLITICA	AL EXPENDITU	RES			\$	29,000.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTIN		MAINTAINED AS	OF THE LAST	DAY	\$	102,678.47
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL A LAST DAY OF THE			LOANS AS OF	THE	\$	0.00
16 AFFIDAVIT		tru	wear, or affirm, unc e and correct and i der Title 15, Electio	ncludes all infor	erjury, tha rmation re	t the ace	companying report is to be reported by me
		_		Mr. Robert			
				Signature of Ca	ampaign T	reasure	er
AFFIX NOTARY	STAMP / SEAL ABOVE						
Sworn to and subscribed					this the		day
of	_, 20, to certify	which, witness my	y hand and seal of	опісе.			
Signature of officer ad	ministering oath	Printed name of	officer administerir	ng oath	Title	of office	er administering oath

MONTHLY FIL	ING GPAC R	EPORT:	PURPOSE		FORM MPAC ADDENDUM Page 3 of 19
12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
< & L Gates LLP Committ	ee for Good Governm	nent		00016405	
4 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Mr. Craig Estes State	e Senator	
(Attach lists on plain paper to complete this report if necessary.)		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.)				
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Ms. Linda Koop Stat	e Representative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)				W W W W W W W W W W W W W W W W W W W
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Mr. Roberto Alonzo	State Representative	
(Attach lists on plain paper to complete this report if necessary.)		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.)				
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MONTHLY FIL	ING GPAC R	EPORT:	PURPOSE	F ^c	ADDENDUM
					Page 4 of 19
2 COMMITTEE NAME					cs Commission Filers)
& L Gates LLP Commit	tee for Good Governn	nent		00016405	·
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Mr. Rodney Andersor	State Representative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	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.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Ms. Cindy Burkett St	ate Senator	
(Attach lists on plain paper to complete this report if necessary.)		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.)				
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Mr. Giovanni Caprigli	one State Representative	-
(Attach lists on plain paper to complete this report if necessary.)		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.)				
orms provided by Texas			w.ethics.state.tx.us		Version V1.0.5

MONTHLY FILING GPAC REPORT: PURPOSE **ADDENDUM** Page 5 of 19 13 Filer ID (Ethics Commission Filers) 12 COMMITTEE NAME 00016405 K & L Gates LLP Committee for Good Government 14 COMMITTEE 1. Candidates A. Supported Mr. Charlie Geren State Representative **ACTIVITY** (Identify by name or, if applicable, classify by party.) (Attach lists on plain B. Opposed paper to complete this report if necessary.) 2. Measures A. Supported (Describe by date and location of election and nature of issue.) B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) COMMITTEE 1. Candidates A. Supported Ms. Mary Gonzalez State Representative **ACTIVITY** (Identify by name or, if applicable, classify by party. (Attach lists on plain B. Opposed paper to complete this report if necessary.) 2. Measures A. Supported (Describe by date and location of election and nature of issue.) B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by party. COMMITTEE Candidates A. Supported Mr. Bobby Guerra State Representative **ACTIVITY** (Identify by name or, if applicable, classify by party.) (Attach lists on plain B. Opposed paper to complete this report if necessary.)

2. Measures (Describe by date and location of election and nature of issue.)

3. Officeholders Assisted (Identify by name or, if applicable, classify by party A. Supported

B. Opposed

		EPORT:			FORM MIPAC ADDENDU
					Page 6 of 1
2 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers
& L Gates LLP Commit	tee for Good Governm	nent		00016405	
4 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Mr. Eric Johnson St	ate Representative	
(Attach lists on plain paper to complete this report if necessary.)		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.)				
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Mr. Rene Oliveira S	tate Representative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			-
	Officeholders Assisted (Identify by name or, if				
COMMITTEE	applicable, classify by party.) 1. Candidates		Mr. Doub Morleman	State Depresentative	
ACTIVITY	(Identify by name or, if applicable, classify by party.)		Mr. Paul Workman	State Representative	
(Attach lists on plain paper to complete this report if necessary.)	Ų	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.)				

MONTHLY FIL	LING GPAC R	REPORT:	PURPOSE			FORM MPAC ADDENDUM
						Page 7 of 19
2 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
& L Gates LLP Commit	tee for Good Governn	nent			00016405	
4 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Mr. Ernest Bailes	State Represe	entative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		197.000		
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	Officeholders Assisted					
,	(Identify by name or, if applicable, classify by party.))				
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Mr. Scott Cosper	State Represe	ntative	
(Attach lists on plain paper to complete this report if necessary.)		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.					
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Mr. Chris Paddie	State Represe	ntative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			.,	
	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.)		,		
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MONTHLY FIL	ING GPAC R	EPORT: PU	RPOSE		ADDENDUM
				<u></u>	Page 8 of 19
L2 COMMITTEE NAME C & L Gates LLP Committ	ee for Good Governm	ent		13 Filer ID 00016405	(Ethics Commission Filers)
4 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Mr. Jo	hn Raney State F	Representative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed	1		
	3. Officeholders Assisted (Identify by name or, if				
COMMITTEE ACTIVITY	applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Mr. J.I	D. Sheffield State	Representative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)			3 4 1 1	
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Mr. Da	an Flynn State Re	epresentative	
(Attach lists on plain paper to complete this report if necessary.)		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.)				

MONTHLY FIL	ING GPAC R	EPORT:	PURPOS	E		FORM MPAC ADDENDUM
						Page 9 of 19
12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
K & L Gates LLP Committe	ee for Good Governm	nent			00016405	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Mr. Ryan Guille	n State Represe	entative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Mr. Joe Moody	State Represent	tative	· · · · · · · · · · · · · · · · · · ·
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed			. ,	
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Mr. John Wray	State Represent	tative	·
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)				,	

MONTHLY FIL	ING GPAC R	EPORT:	PURPUSE		FORM IVIPAC ADDENDUM
					Page 10 of 19
COMMITTEE NAME & L Gates LLP Committ	ree for Good Governm	nent		13 Filer ID 0001640	(Ethics Commission Filers)
COMMITTEE	Candidates		Mr. Dennis Paul St		
ACTIVITY	(Identify by name or, if applicable, classify by party.)		WII. Dellilis Faul St	ale Representative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			-
	Measures (Describe by date and location of election and nature of issue.)	A. Supported		August Use Co., The Control of Co.	
		B. Opposed			
	3. Officeholders Assisted				
	(Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Mr. Borris Miles St	ate Senator	
(Attach lists on plain paper to complete this report if necessary.)		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.)			7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7	
	applicable, classify by party.	1			

FORM MPAC

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			OVER SHEET PG 3 11 of 19
17 COMMITT K & L Ga	EE NAME tes LLP Committee for Good Government	18 Filer ID 00016405	(Ethics Commission Filers)
	E SUBTOTALS SCHEDULE		SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION)R	\$
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORAL LABOR ORGANIZATION	ATION OR	\$
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR	ORGANIZATION	\$
9.	SCHEDULE E: LOANS		\$
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$ 29,000.00
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTI	ONS	\$
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$
			,
			,
Forms provid	led by Texas Ethics Commission www.ethics.state.tx.us		Version V1.0.5850

POLITICAL EXF	PENDITURES FROM POLITICAL NS	SCHEDULE F1
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F1: Sch: 1/8 Rpt: 12/19	FILER NAME K & L Gates LLP Committee for Good Government	3 Filer ID (Ethics Commission Filers) 00016405
4 Date 02/06/2018	5 Payee name Borris Miles Campaign	
6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 5302 Almeda Road	
Expenditure from corporate funds	Houston, TX 77004	
8 PURPOSE OF EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin	outside of Texas. Complete Schedule T. n, TX, officeholder living expense ontribution to support candidate
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
Date 02/08/2018	Payee name Charlie Geren Campaign	
Amount (\$) \$2,000.00	Payee address; City; State; Zip Code P.O. Box 1440	
Expenditure from corporate funds	Fort Worth, TX 76101	
PURPOSE OF EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin	outside of Texas. Complete Schedule T. n, TX, officeholder living expense ontribution to support candidate
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
Date 02/01/2018	Payee name Chris Paddie Campaign	
Amount (\$) \$2,000.00	Payee address; City; State; Zip Code 600 Albermarle	
Expenditure from corporate funds	Marshall, TX 75672	
PURPOSE OF EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin	outside of Texas. Complete Schedule T. n, TX, officeholder living expense ontribution to support candidate
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought H	Office held

POLITICAL EXI	PENDITURES FROM POLITICAL NS	SCHEDULE F1
	EXPENDITURE CATEGORIES FOR BOX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense 7 - Gift/Awards/Memorials Expense Printing Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1. Total pages Calculate Ed		Files ID (Ethios Commission Files)
1 Total pages Schedule F1: Sch: 2/8 Rpt: 13/19		Filer ID (Ethics Commission Filers) 00016405
4 Date	5 Payee name	
02/13/2018	Cindy Burkett Campaign	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$2,000.00	P.O. Box 850975	
Expenditure from corporate funds	Mesquite, TX 75185	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Contributions/Donations Made By	le of Texas. Complete Schedule T.
	Caracaco, Cineciniación Cinaca	officeholder living expense bution to support candidate
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
Date	Payee name	
02/07/2018	Craig Estes Campaign	
Amount (\$)	Payee address; City; State; Zip Code	
\$2,000.00	P.O. Box 8287	
Expenditure from corporate funds	Wichita Falls, TX 76307	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Contributions Made by	le of Texas. Complete Schedule T. officeholder living expense
	Caranaca Cinecine acini cinaca Committee	bution to support candidate
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought H	Office held
Date	Payee name	
02/06/2018	Dan Flynn Campaign	
Amount (\$)	Payee address; City; State; Zip Code	
\$2,000.00	P.O. Box 669	
Expenditure from corporate funds	Van, TX 75790	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Contributions/Donations water by	de of Texas. Complete Schedule T. officeholder living expense
	Caracacter Cinecinctation Cinical Committee	bution to support candidate
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought H	Office held
		and the second s
Forms provided by Texas E	thics Commission www.ethics.state.tx.us	Version V1.0.585

POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1 CONTRIBUTIONS **EXPENDITURE CATEGORIES FOR BOX 8(a)** Solicitation/Fundraising Expense Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Gift/Awards/Memorials Expense Consulting Expense Contributions/ Donations Made By Polling Expense Travel in District Travel Out of District Printing Expense Legal Services OTHER (enter a category not listed above) Candidate/Officeholder/Political Committee Salaries/Wages/Contract Labor Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 3/8 Rpt: 14/19 K & L Gates LLP Committee for Good Government 00016405 4 Date Payee name 02/22/2018 Dennis Paul Campaign Payee address; City; State; Zip Code Amount (\$) \$500.00 626-1/2 Barringer Lane, Suite A Expenditure from corporate funds Webster, TX 77598 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Campaign contribution to support candidate Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Date Payee name 02/13/2018 Eric Johnson Campaign Amount (\$) Payee address; City: State; Zip Code \$1,000.00 P.O. Box 192316 Expenditure from Dallas, TX 75219 corporate funds **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Campaign contribution to support candidate Candidate/Officeholder name Office held Complete ONLY if direct Office sought expenditure to benefit C/OH Date Payee name 02/13/2018 **Ernest Bailes Campaign** Payee address; City; State; Zip Code Amount (\$) \$1,000.00 1000 Bailes Dairy Road Expenditure from Shepherd, TX 77371 corporate funds PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Campaign contribution to support candidate Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1 CONTRIBUTIONS **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Loan Repayment/Reimbursement Solicitation/Fundraising Expense Event Expense Office Overhead/Rental Expense Transportation Equipment & Related Expense Consulting Expense Contributions/ Donations Made By -Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Travel in District Travel Out of District Printing Expense OTHER (enter a category not listed above) Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 00016405 Sch: 4/8 Rpt: 15/19 K & L Gates LLP Committee for Good Government 4 Date Payee name 02/15/2018 Giovanni Capriglione Campaign Payee address: State; Zip Code Amount (\$) City; \$1,000.00 P.O. Box 92007 Expenditure from Southlake, TX 76092 corporate funds **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Campaign contribution to support candidate Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 02/22/2018 Ina Minjarez Campaign Amount (\$) Payee address; City; State; Zip Code P.O. Box 769413 \$1,000.00 Expenditure from San Antonio, TX 78245 corporate funds **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas, Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Campaign contribution to support candidate Candidate/Officeholder name Office held Office sought Complete ONLY if direct expenditure to benefit C/OH Date Pavee name 02/15/2018 J.D. Sheffield Campaign State; Zip Code Amount (\$) Payee address; City; \$2,000.00 P.O. Box 1072 Expenditure from Gatesville, TX 76528 corporate funds **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Campaign contribution to support candidate Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

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POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1 CONTRIBUTIONS **EXPENDITURE CATEGORIES FOR BOX 8(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Advertising Expense Accounting/Banking Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By Gift/Awards/Memorials Expense Printing Expense Salaries/Wages/Contract Labor Travel Out of District Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. (Ethics Commission Filers) 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID 00016405 Sch: 5/8 Rpt: 16/19 K & L Gates LLP Committee for Good Government 4 Date Payee name 02/15/2018 Joe Moody Campaign Amount (\$) Payee address; City; State; Zip Code \$2,000.00 P.O. Box 920827 Expenditure from El Paso, TX 79902 corporate funds **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas, Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Campaign contribution to support candidate Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 02/14/2018 John Raney Campaign State; Zip Code Amount (\$) Payee address; City; \$1,000.00 P.O. Box 11461 Expenditure from College Station, TX 77842-1146 corporate funds PURPOSE (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Campaign contribution to support candidate Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/07/2018 John Wray Campaign Payee address; City; State; Zip Code Amount (\$) \$500.00 P.O. Box 574 Expenditure from Waxahachie, TX 75168 corporate funds **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Campaign contribution to support candidate Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH

POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1 CONTRIBUTIONS **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Accounting/Banking Consulting Expense Transportation Equipment & Related Expense Office Overhead/Rental Expense Polling Expense Travel in District Food/Beverage Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Sch: 6/8 Rpt: 17/19 K & L Gates LLP Committee for Good Government 00016405 4 Date Payee name 02/19/2018 Linda Koop Campaign Amount (\$) Payee address; City; State; Zip Code \$1,000.00 P.O. Box 794042 Expenditure from Dallas, TX 75379 corporate funds **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas, Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Campaign contribution to support candidate Office sought Office held Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH Date Payee name 02/16/2018 Mary Gonzalez Campaign Amount (\$) Payee address; City; State; Zip Code \$500.00 P.O. Box 450349 Expenditure from corporate funds Clint, TX 79836 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Campaign contribution to support candidate Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/20/2018 Paul Workman Campaign State; Zip Code Amount (\$) Payee address; City: \$1,000.00 P.O. Box 340210 Expenditure from Austin, TX 78734 corporate funds **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Campaign contribution to support candidate Candidate/Officeholder name Office held Complete ONLY if direct Office sought expenditure to benefit C/OH

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POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1 CONTRIBUTIONS **EXPENDITURE CATEGORIES FOR BOX 8(a)** Solicitation/Fundraising Expense Transportation Equipment & Related Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Advertising Expense Event Expense Accounting/Banking Consulting Expense Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Travel in District Contributions/ Donations Made By -Travel Out of District Printing Expense Salaries/Wages/Contract Labor Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 7/8 Rpt: 18/19 K & L Gates LLP Committee for Good Government 00016405 4 Date Payee name 02/20/2018 R. D. Bobby Guerra Campaign Payee address; City; State: Zip Code Amount (\$) \$500.00 10213 N. 10th Street Expenditure from McAllen, TX 78504 corporate funds **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas, Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Campaign contribution to support candidate Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Date Payee name 02/13/2018 Rene Oliveira Campaign City; State; Zip Code Amount (\$) Payee address; \$2,000.00 855 W. Price Road, Suite 9 Expenditure from Brownsville, TX 78520 corporate funds **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Campaign contribution to support candidate Candidate/Officeholder name Office held Complete ONLY if direct Office sought expenditure to benefit C/OH Date Payee name 02/12/2018 Robert Alonzo Campaign Amount (\$) Payee address; City; State; Zip Code \$500.00 400 S. Zang Blvd., Ste 810 Expenditure from Dallas, TX 75208 corporate funds **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Campaign contribution to support candidate Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

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POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1 CONTRIBUTIONS **EXPENDITURE CATEGORIES FOR BOX 8(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Advertising Expense Transportation Equipment & Related Expense Accounting/Banking Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Gift/Awards/Memorials Expense Printing Expense Salaries/Wages/Contract Labor Travel Out of District Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. (Ethics Commission Filers) 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID 00016405 Sch: 8/8 Rpt: 19/19 K & L Gates LLP Committee for Good Government 4 Date 02/19/2018 Rodney Anderson Campaign Amount (\$) Payee address; City; State; Zip Code \$500.00 548 Edgeview Drive Expenditure from Grand Prairie, TX 75052 corporate funds **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Campaign contribution to support candidate Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 02/13/2018 Ryan Guillen Campaign City; Amount (\$) Payee address; State; Zip Code \$1,000.00 P.O. Box 1024 Expenditure from Austin, TX 78767 corporate funds **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Campaign contribution to support candidate Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/15/2018 Scott Cosper Campaign Payee address; State; Zip Code Amount (\$) \$1,000.00 2110 Southport Dr. Expenditure from Killeen, TX 76542 corporate funds **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Campaign contribution to support candidate Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH

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