

April 2, 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 March 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.

LH 0

**Enclosures** 

185045

#### Goodsheller, Miranda A.

From:

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

Sent:

Wednesday, March 28, 2018 12:31 PM

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 Wed Mar 28 12:30:53 CDT 2018 and was assigned the report number of: TX-100703823. Please keep this acknowledgment, as it may be necessary to refer to it in the future.

#### FORM MPAC MONTHLY FILING GENERAL-PURPOSE 185045 COVER SHEET PG 1 COMMITTEE CAMPAIGN FINANCE REPORT Filer ID 2 Total pages filed: (Ethics Commission Filers) The MPAC Instruction Guide explains how to complete this form. 00016405 3 COMMITTEE NAME OFFICE USE ONLY K & L Gates LLP Committee for Good Government Date Received ELECTRONICAL FILED 03/28/2018 ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP COMMITTEE **ADDRESS** 1717 Main St., Ste. 2800 Change of Address Dallas, TX 75201 Date Hand-delivered or Date Postmarked CAMPAIGN MS/MRS/MR **FIRST** MI **TREASURER** Receipt # Robert H. NAME Date Processed SUFFIX NICKNAME LAST McCarthy Date Imaged STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY: STATE; ZIP CODE CAMPAIGN **TREASURER** 2801 Via Fortuna Ste. 350 STREET **ADDRESS** (Residence or Business) Austin, TX 78746 STREET ADDRESS OR PO BOX; APT / SUITE #: CITY: STATE: ZIP CODE CAMPAIGN **TREASURER** 2801 Via Fortuna Ste. 350 MAILING **ADDRESS** Change of Address Austin, TX 78746 CAMPAIGN AREA CODE PHONE NUMBER **EXTENSION TREASURER** PHONE (512) 482-6836 9 REPORT TYPE 10th day after campaign Dissolution (Attach PAC-DR) X Monthly treasurer termination 10 MONTHLY X April 5 July 5 October 5 January 5 REPORT FILING DEADLINE May 5 August 5 November 5 February 5 March 5 September 5 December 5 June 5 Day Year 11 PERIOD Month Day Year Month THROUGH COVERED 03/25/2018 02/26/2018 **GO TO PAGE 2** Version V1.0.6153 www.ethics.state.tx.us Forms provided by Texas Ethics Commission

# MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

185045 FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME 13 File			13 Filer ID	(Ethics Commission Filers)
K & L Gates LLP Committee for Good Government 000				
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Trent Ashby State Representa	ative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	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.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS	ED POLITICAL CONTRIBUTIONS (OTHER THAN , OR GUARANTEES OF LOANS) rt qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA	AL CONTRIBUTIONS	\$	0.00
	(OTHER THAN PLE	EDGES, LOANS, OR GUARANTEES OF LOANS)		0.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL	EXPENDITURES OF \$10 OR LESS, UNLESS ITEM	S \$	0.00
	4. TOTAL POLITICA	AL EXPENDITURES	\$	10,000.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST NG PERIOD	DAY \$	99,176.47
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT				
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.		
		Mr. Robert	H. McCarthy	
		Signature of Ca		
			-	
, , , , , , , , ,	Y STAMP / SEAL ABOVE			
		, t	his the	day
of	, 20, to certify	which, witness my hand and seal of office.		
Signature of officer a	administering oath	Printed name of officer administering oath	Title of office	cer administering oath
orms provided by Texas	Ethics Commission	www.ethics.state.tx.us	*	Version V1.0.6153

### MONTHLY FILING GPAC REPORT: PURPOSE

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185045 FORM MPAC ADDENDUM

Page 3 of 7

12 COMMITTEE NAME					(Ethics Commission Filers)
K & L Gates LLP Committe	e for Good Governm	nent		00016405	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Drew Darby State Representation	ve	
(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		A Supported	Capia Marrison, Stata Danrasa	ntative	
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Geanie Morrison State Represe	mauve	
(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.)				
			Davis Caraball State Carata		
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Donna Campbell State 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.)				
	L				

### MONTHLY FILING GPAC REPORT: PURPOSE

185045 FORM MPAC ADDENDUM

K & L Gates LLP Committee for Good Government 00016405							Pa	ge 4 of 7
1. Candidates desirety by name or, if applicated, classify by partial (Attach lists on plain paper to complete this report if necessary.)  2. Measures Describe by date and total lists on plain paper to complete this report if necessary.)  3. Officeholders Assisted destriby by name or, if applicable, classify by partial describe by date and tocation of destribe name entairs of describe name entairs of security applicable, classify by party).  A. Supported  Charlie Geren State Representative  B. Opposed  B. Opposed  Steve Allison State Representative  State Representative  Describe by date and tocation of election and entairs of describe name entairs of describe name entairs of describe name entairs of security by party).  B. Opposed  B. Opposed  B. Opposed	12 COMMITTEE NAME					13 Filer ID	(Ethics Commis	sion Filers)
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Committee   Comm	paper to complete this		B. Opposed		All and the second seco			
3. Officeholders Assisted density by name or, if applicable, classify the party.)  COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  2. Measures (Describe by date and location of efsction and nature of issue.)  3. Officeholders A. Supported  B. Opposed  B. Opposed  3. Officeholders Assisted (dentify by name or, if applicable, classify by party.)		(Describe by date and location of election and	A. Supported					
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ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  B. Opposed  A. Supported  B. Opposed  B. Opposed  B. Opposed  A. Supported  (Identify by name or, if applicable, classify by party.)		Assisted						
paper to complete this report if necessary.)  2. Measures (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.)		(Identify by name or, if		Steve Allison	State Representa	ative		
(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.)	paper to complete this		B. Opposed			·		
3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	-	(Describe by date and location of election and	A. Supported					
Assisted (Identify by name or, if applicable, classify by party.)	-		B. Opposed					
		Assisted						

## **SUBTOTALS - MPAC**

185045

## FORM MPAC COVER SHEET PG 3

	5 K.		5 0f /
17 COMMITTE K & L Gate	E NAME es LLP Committee for Good Government	18 Filer ID 00016405	(Ethics Commission Filers)
19 SCHEDULE NAME OF S	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	DR	\$
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR 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	\$ 10,000.00
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	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	\$
-			
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

Forms provided by Texas Ethics Commission

185045

SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)** Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Loan Repayment/Reimbursement Advertising Expense Accounting/Banking Event Expense Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Consulting Expense Contributions/ Donations Made By Travel Out of District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Candidate/Officeholder/Political Committee Credit Card Payment The Instruction Guide explains how to complete this form. (Ethics Commission Filers) 1 Total pages Schedule F1: 2 Filer ID FILER NAME 00016405 K & L Gates LLP Committee for Good Government Sch: 1/2 Rpt: 6/7 4 Date Payee name Charlie Geren Campaign 03/02/2018 State; Zip Code Payee address; City; Amount (\$) \$1,000.00 P.O. Box 1440 Expenditure from Fort Worth, TX 76101 corporate funds **PURPOSE** (b) Description 8 (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 sought Office held Candidate/Officeholder name Complete ONLY if direct expenditure to benefit C/OH Date Pavee name Donna Campbell Campaign 02/28/2018 Amount (\$) Payee address; State; Zip Code \$1,000.00 P.O. Box 171002 Expenditure from San Antonio, TX 78217 corporate funds (b) Description **PURPOSE** (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** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Campaign contribution to support candidate Office held Office sought Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH Date Payee name 02/26/2018 Drew Darby Campaign Payee address; State; Zip Code Amount (\$) \$2,000.00 P.O. Box 3284 Expenditure from San Angelo, TX 76902 corporate funds (b) Description PURPOSE (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. OF Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Campaign contribution to support candidate Office held Candidate/Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH

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### POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

185045

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee
Credit Card Payment

Forms provided by Texas Ethics Commission

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

Sister Street Lyman	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 2/2 Rpt: 7/7	K & L Gates LLP Committee for Good Government 00016405
4 Date	5 Payee name
02/27/2018	Geanie Morrison Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,000.00	P.O. Box 4642
Expenditure from corporate funds	Victoria, TX 77903-4642
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  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Campaign contribution to support candidate
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
03/19/2018	Steve Allison Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$2,000.00	1819 N. Main Ave. #211
Expenditure from corporate funds	San Antonio, TX 78212
PURPOSE OF	(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	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Campaign contribution to support candidate
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/26/2018	Trent Ashby Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$2,000.00	P.O. Box 412
Expenditure from corporate funds	Lufkin, TX 75902
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Contributions (Donations Made By  Contributions (Donations Made By
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Campaign contribution to support candidate
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
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