

RECEIVED

2022 MAY 10 AM 10: 16

CITY SECRETARY DALLAS, TEXAS

April 29, 2022

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

T 512 482 6836 F 512 482 6859

City Secretary's Office 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 April 25, 2022, for K&L Gates LLP Committee for Good Government

To Whom It May Concern:

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.

Robert H McCarthy Jr

Enclosures

RECEIVED

From:

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

To:

McCarthy, Robert

Cc:

Fleming, Sandy M.; Goodsheller, Miranda A. 2022 MAY 10 AM 10: 16

Subject: Date:

Tuesday, May 3, 2022 9:42:17 PM

External Sender:

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 May 03 21:42:08 CDT 2022 and was assigned the report number of: TX-100860958. Please keep this acknowledgment, as it may be necessary to refer to it in the future.

		FILING GENERAL-PURF E CAMPAIGN FINANCE			FORM MPAC COVER SHEET PG 1
Т	he MPAC Instruction	Guide explains how to complete this form	1 Filer ID (Ethics Commission Filers) 00016405		2 Total pages filed: 17
3	COMMITTEE NAME				OFFICE USE ONLY
4	K & L Gates LLP C	ADDRESS / PO BOX; APT / SUITE #;	CITY; STATE; ZIP		Date Received ELECTRONICALLY FILED 05/03/2022
	ADDRESS	1717 Main St., Ste. 2800	on i		
Ļ		Dallas, TX 75201			Date Hand-delivered or Date Postmarked
5	CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST Mr. Robert	H.		Receipt # Amount
		NICKNAME LAST		FFIX	Date Processed
		McCar	thy		Date imaged
6	CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASI 2801 Via Fortuna, Suite 650	E); APT / SUITE #; CITY;	STA	TE; ZIP CODE
_	CAMPAICN	Austin, TX 78746	ADT LOUITE II. OFTY	07.1	TE 710 0005
,	CAMPAIGN TREASURER MAILING ADDRESS Change of Address	STREET ADDRESS OR PO BOX; 2801 Via Fortuna, Suite 650 Austin, TX 78746	APT / SUITE #; CITY;	STA	.TE; ZIP CODE
8	CAMPAIGN	AREA CODE PHONE NUMBER	EXTENSION		
	TREASURER PHONE	(512) 482-6836	27, 27, 67		
	REPORT TYPE	X Monthly	10th day after campaign treasurer termination		Dissolution (Attach PAC-DR)
10	MONTHLY REPORT FILING DEADLINE	January 5 Ap	oril 5 🔲 July 5		October 5
	DEADLINE	February 5	ay 5 August 5		November 5
		March 5 Ju	ne 5 September	5	December 5
11	PERIOD COVERED	Month Day Year 03/26/2022	THROUGH Moi	nth 25/20	Day Year D22
		GC	TO PAGE 2		RECEIVED 2022 MAY 10 AM 10: 16 CITY SECRETARY DALLAS, TEXAS

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME	13 Filer ID	(Ethics Commission Filers)		
K & L Gates LLP Comm	00016405			
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Ben Bumgarner State Represe	entative	
(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		
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)		2	
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, (CONTRIBUTIONS M	O POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
Majalajanajary ar na ipa pa na na taanaan qapya	2. TOTAL POLITICA (OTHER THAN PLEE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	25,000.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL O OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	49,393.42
OUTSTANDING LOAN TOTALS		MOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT				
		I swear, or affirm, under penalty of per true and correct and includes all inforr under Title 15, Election Code.		
		Mr. Robert I	H. McCarthy	
		Signature of Car	npaign Treasurer	*
AFFIX NOTARY	STAMP / SEAL ABOVE			
Sworn to and subscribed	pefore me, by the said	th	is the	day
of	, 20, to certify w	hich, witness my hand and seal of office.		
Cignoture of officer - In	sinistoring astle	Drieted name of officer administration and	Tide of W	
Signature of officer adn	mustering oath	Printed name of officer administering oath	Title of officer	administering oath

MONTHLY FIL	ING GPAC R	≀EPORT:	PURPOS	E		FORM MPAC ADDENDUM Page 3 of 17
12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
K & L Gates LLP Committ	tee for Good Governr	ment			00016405	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Caroline Harris	State Represent	tative	
(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	Candidates (Identify by name or, if applicable, classify by party.)		Ana Hernandez	State Represen	tative	
(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				
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY		A. Supported	Tom Oliverson S	State Representa	ative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	(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.)					

FORM MPAC MONTHLY FILING GPAC REPORT: PURPOSE **ADDENDUM** Page 4 of 17 12 COMMITTEE NAME 13 Filer ID (Ethics Commission Filers) 00016405 K & L Gates LLP Committee for Good Government 14 COMMITTEE 1. Candidates A. Supported Shawn Thierry 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.) 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 A. Supported Brian Birdwell State Senator 1. Candidates **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 Joan Huffman State Senator **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

FORM MPAC MONTHLY FILING GPAC REPORT: PURPOSE **ADDENDUM** Page 5 of 17 12 COMMITTEE NAME 13 Filer ID (Ethics Commission Filers) K & L Gates LLP Committee for Good Government 00016405 14 COMMITTEE 1. Candidates A. Supported Borris Miles State Senator **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 Charles Schwertner State Senator **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 Officeholders Assisted (Identify by name or, if applicable, classify by party. COMMITTEE 1. Candidates A. Supported Gina Hinojosa 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.

MONTHLY FILING GPAC REPORT: PURPOSE

FORM MPAC **ADDENDUM**

						Page 6 of 17
12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
K & L Gates LLP Committe	ee for Good Governn	nent			00016405	
14 COMMITTEE	1. Candidates	A. Supr	oorted	Sarah Eckhardt State Senator		
ACTIVITY	(Identify by name or if	1	,	Salah Lomaide Side Schools.		9
	applicable, classify by party.)	1				1
(Attach lists on plain		В. Орро	osed			
paper to complete this report if necessary.)						
Topole, , ,						
1	2. Measures	A. Supp	orted			
	(Describe by date and location of election and			80		
	nature of issue,)					
	1	В. Орро	osed			
	1					
)	3. Officeholders					
	Assisted					
	(Identify by name or, if applicable, classify by party.)					
COMMITTEE			orted	Rhetta Bowers State Represent	tativo	
ACTIVITY	(Identify by name or, if		Orto.	Kiletta Dowers State Neprese,	.duve	
	applicable, classify by party.)					
(Attach lists on plain paper to complete this	1	В. Оррс	sed			
report if necessary.)	1	1				
		A. Supp	orted			
	(Describe by date and location of election and nature of issue.)					
	1	B. Oppo	hazer			
!	1	D. Oppo	Seu			
1	3. Officeholders					
	Assisted					
	(Identify by name or, if applicable, classify by party.)					
COMMITTEE		A. Supp	orted	Julie Johnson State Representa	ıtive	
ACTIVITY	(Identify by name or, if applicable, classify by party.)					
(Attach lists on plain						
(Attach lists on plain paper to complete this		В. Орро	sed			
report if necessary.)	l j					
1	2. Measures	A. Supp	orted			
1	(Describe by date and	A. Cerr	UILO			
1	location of election and nature of issue,)					
	l j	В. Орро	sed			
	Officeholders Assisted)¥
	(Identify by name or, if					
	applicable, classify by party.)					
				a a		

MONTHLY FILING GPAC REPORT: PURPOSE

FORM MPAC ADDENDUM

					Page 7 of 17	
12 COMMITTEE NAME 13 Filer ID (Ethics Commission Filers)						
K & L Gates LLP Committ		ment		00016405		
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Stan Lambert State Represe	entative		
(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				
	Officeholders Assisted (Identify by name or, if applicable, classify by party.))				
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Trey Martinez-Fischer State	Representative		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	(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.)		Will Metcalf State Represent	tative		
(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				
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
		,				

MONTHLY FIL	ING GPAC F	REPORT:	: PURPOSE		FORM MPAC
					ADDENDUM Page 8 of 17
12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
K & L Gates LLP Committ	tee for Good Governn	nent		00016405	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Morgan Meyer State Represen	itative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		n	
	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.)		Eddie Morales State Represer	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			
ng.		B. Opposed			
	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	Senfronia Thompson State Rep	oresentative	3
(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			
7.	Officeholders Assisted (Identify by name or, if applicable, classify by party.)				

MONTHLY FIL	ING GPAC R	EPORT:	PURPOSE		FORM MPAC ADDENDUM
				T	Page 9 of 17
12 COMMITTEE NAME K & L Gates LLP Committe	ee for Good Governm	nent		13 Filer ID 00016405	(Ethics Commission Filers)
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Armando Walle State Represer	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			
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)				

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

		C	10 of 17						
	17 COMMITTEE NAME18 Filer IDK & L Gates LLP Committee for Good Government00016405								
	19 SCHEDULE SUBTOTALS NAME OF SCHEDULE								
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$						
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$						
з. 🔲	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$						
	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	R	\$						
	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	TION OR	\$						
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$						
	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$						
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (DRGANIZATION	\$						
9.	SCHEDULE E: LOANS		\$						
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$ 25,000.00						
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$						
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$						
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$						
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$						
	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$						

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 Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense 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. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 1/7 Rpt: 11/17 K & L Gates LLP Committee for Good Government 00016405 Date Payee name 04/22/2022 Ana Hernandez Campaign 6 Amount (\$) Payee address; City; State; Zip Code \$500.00 P.O. Box 15538 Expenditure from corporate funds Houston, TX 77220 **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** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Campaign contribution to support candidate Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/19/2022 Armando Walle Campaign Amount (\$) Payee address; City; State; Zip Code \$1,000.00 4826 Hollybrook Lane Expenditure from Houston, TX 77039 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** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Campaign contribution to support candidate Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Pavee name Ben Bumgarner Campaign 04/20/2022 Amount (\$) Payee address; City; State; Zip Code \$500.00 1520 Redwood Crest Ln. Expenditure from Flower Mound, TX 75028 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 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

CONTRIBUTIO	PENDITURES FROM POLITICAL NS	SCHEDULE F1
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	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: 2/7 Rpt: 12/17	FILER NAME K & L Gates LLP Committee for Good Government	3 Filer ID (Ethics Commission Filers) 00016405
4 Date 04/08/2022	5 Payee name Borris Miles Campaign	
6 Amount (\$) \$1,000.00 Expenditure from corporate funds	7 Payee address; City; State; Zip Code 5302 Almeda Road Houston, TX 77004	
8 PURPOSE OF EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin,	outside of Texas, Complete Schedule T. TX, officeholder living expense ntribution to support candidate
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought H	Office held
Date 04/14/2022	Payee name Brian Birdwell Campaign	
Amount (\$) \$2,000.00 Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 1111 Granbury, TX 76048	
PURPOSE OF EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin,	outside of Texas. Complete Schedule T. TX, officeholder living expense ntribution to support candidate
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
Date 04/21/2022	Payee name Caroline Harris Campaign	
Amount (\$) \$500.00	Payee address; City; State; Zip Code P.O. Box 700	
Expenditure from corporate funds	Round Rock, TX 78680	
PURPOSE OF EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin,	utside of Texas. Complete Schedule T. TX, officeholder living expense ntribution to support candidate
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
Forms provided by Texas F	thics Commission www.ethics state ty us	Version V3 5 1 fc88a75c

POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1 CONTRIBUTIONS **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Fees Transportation Equipment & Related Expense Consulting Expense Contributions/ Donations Made By -Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Travel Out of District Candidate/Officeholder/Political Committee Legal Services OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME (Ethics Commission Filers) 3 Filer ID Sch: 3/7 Rpt: 13/17 K & L Gates LLP Committee for Good Government 00016405 Date Payee name 04/05/2022 Charles Schwertner Campaign 6 Amount (\$) Payee address; City: State; Zip Code \$2,000.00 P.O. Box 2448 Expenditure from Georgetown, TX 78627 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** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Campaign contribution to support candidate Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/20/2022 Eddie Morales Campaign Amount (\$) Payee address; State; Zip Code \$1,000.00 352 Hillcrest Blvd. Expenditure from corporate funds Eagle Pass, TX 78852 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T_{ϵ} Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Campaign contribution to support candidate Office sought Complete ONLY if direct Candidate/Officeholder name Office held expenditure to benefit C/OH Date Payee name 03/29/2022 Gina Hinojosa Campaign Amount (\$) Payee address; City; State; Zip Code \$1,000.00 PO Box 300095 Expenditure from Austin, TX 78703 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

POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1 CONTRIBUTIONS **EXPENDITURE CATEGORIES FOR BOX 8(a)** Loan Repayment/Reimbursement Event Expense Solicitation/Fundraising Expense Advertising Expense Accounting/Banking Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Consulting Expense Contributions/ Donations Made By Polling Expense Travel in District Gift/Awards/Memorials Expense Printing Expense Travel Out of District Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Legal Services Salaries/Wages/Contract Labor Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME (Ethics Commission Filers) Filer ID Sch: 4/7 Rpt: 14/17 K & L Gates LLP Committee for Good Government 00016405 4 Date Payee name Joan Huffman Campaign 04/14/2022 6 Amount (\$) Payee address; City: State: Zip Code \$5,000.00 3733 Westheimer Road, Ste. 135 Expenditure from corporate funds Houston, TX 77005 **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 Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 04/08/2022 Julie Johnson for Texas Amount (\$) Payee address; City; State; Zip Code \$500.00 P.O. Box 110937 Expenditure from Carrollton, TX 75011 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** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Campaign contribution to support candidate Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/08/2022 Morgan Meyer Campaign Amount (\$) Payee address; City; State; Zip Code \$1,000.00 3838 Oak Lawn, Suite 400 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 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

POLITICAL EXI	PENDITURES FROM POLITICAL SCHEDULE F1
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1: Sch: 5/7 Rpt: 15/17	2 FILER NAME K & L Gates LLP Committee for Good Government 3 Filer ID (Ethics Commission Filers) 00016405
4 Date 04/20/2022	5 Payee name Rhetta Bowers Campaign
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 3526 Lakeview Pkwy., Suite B-211
corporate funds	Rowlett, TX 75088
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
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
04/08/2022 Amount (\$)	Sarah Eckhardt Campaign Payee address; City; State; Zip Code
\$2,000.00	P.O. Box 301586
Expenditure from corporate funds	Austin, TX 78703
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/Oh	Candidate/Officeholder name Office sought Office held
Date 04/19/2022	Payee name Senfronia Thompson Campaign
Amount (\$) \$2,000.00	Payee address; City; State; Zip Code 4828 Loop Central Dr., Suite 600
Expenditure from corporate funds	Houston, TX 77081
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Campaign contribution to support candidate
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1 CONTRIBUTIONS **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Transportation Equipment & Related Expense Office Overhead/Rental Expense Fees Consulting Expense Contributions/ Donations Made By -Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Travel in District Travel Out of District Printing Expense Candidate/Officeholder/Political Committee Credit Card Payment Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME (Ethics Commission Filers) Filer ID Sch: 6/7 Rpt: 16/17 K & L Gates LLP Committee for Good Government 00016405 Date Payee name Shawn Thierry Campaign 04/19/2022 6 Amount (\$) Payee address; City; State; Zip Code \$500.00 5100 Westheimer Suite 200 Expenditure from Houston, TX 77056 corporate funds **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Contributions/Donations Made By Check if travel outside of Texas, Complete Schedule T. **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Campaign contribution to support candidate Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/08/2022 Stan Lambert Campaign Amount (\$) Payee address; State; Zip Code \$1,000.00 P.O. Box 3752 Expenditure from corporate funds Abilene, TX 79604 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas, Complete Schedule Ti 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 04/22/2022 Tom Oliverson Campaign Amount (\$) Payee address; City: State; Zip Code \$1,000.00 1 Greenway Plaza Suite 225 Expenditure from Houston, TX 77046 corporate funds **PURPOSE**

OF

EXPENDITURE

Complete ONLY if direct

expenditure to benefit C/OH

Office sought

(b) Description

Check if travel outside of Texas. Complete Schedule T.

Campaign contribution to support candidate

Office held

Check if Austin, TX, officeholder living expense

(a) Category (See Categories listed at the top of this schedule)

Candidate/Officeholder/Political Committee

Contributions/Donations Made By

Candidate/Officeholder name

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 Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Contributions/ Donations Made By -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. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 7/7 Rpt: 17/17 K & L Gates LLP Committee for Good Government 00016405 4 Date Payee name 04/08/2022 Trey Martinez Fischer Campaign 6 Amount (\$) Payee address; City; State; Zip Code \$1,000.00 104 Babcock Road, Suite 107 Expenditure from corporate funds San Antonio, TX 78201 **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** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Campaign contribution to support candidate Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name Will Metcalf Campaign 04/13/2022 Amount (\$) Payee address; State; Zip Code \$1,000.00 P.O. Box 454 Expenditure from Conroe, TX 77305 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** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Campaign contribution to support candidate Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH