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2024 MAY -9 AM IO: 55 CITY SECRETARY DALLAS. TEXAS

May 3, 2024

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 5D South Dallas, TX 75201

Re: Monthly Filing General-Purpose Committee Campaign Finance Report for the period ending April 25, 2024, 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

GUVERS

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MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM MPAC

COVER SHEET PG 1

			Filer ID	
Th	e MPAC Instruction C	2 Total pages filed: 16		
3	COMMITTEE NAME			OFFICE USE ONLY
		ommittee for Good Government		OTTICE 032 ONET
	N & L Gales LLF C			Date Received
				ELECTRONICALLY FILED
				05/03/2024
4	COMMITTEE	ADDRESS / PO BOX; APT / SUITE #; C	CITY; STATE; ZIP	RE 2024 HA CITY DALL
	ADDRESS	1717 Main St., Ste. 2800		
		1717 Main 31., Ste. 2000		ALL AL
	_			
	Change of Address	Dallas, TX 75201		Date Hand-delivitied of Dale Postmarked
5	CAMPAIGN	MS / MRS / MR FIRST	MI	S.C. 9 m
5	TREASURER			N. S.
	NAME	Mr. Robert H.		Receipt # Amount
				Date Processed
		NICKNAME LAST	SUFFIX	
		McCarthy		Date Imaged
		weeditiy		
				8 H H H H H
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #; CITY; ST.	ATE; ZIP CODE
L	TREASURER	2801 Via Fortuna, Suite 650		
	STREET			
	ADDRESS			
	(Residence or Business)	Austin, TX 78746		
-				
7	CAMPAIGN	STREET ADDRESS OR PO BOX;	APT / SUITE #; CITY; ST	ATE; ZIP CODE
L	TREASURER	2801 Via Fortuna, Suite 650		
	MAILING ADDRESS			
L				
L	Change of Address	Austin, TX 78746		
8	CAMPAIGN	AREA CODE PHONE NUMBER	EXTENSION	
ľ	TREASURER			
L	PHONE	(512) 482-6836		
9	REPORT TYPE		10th day after campaign	
L		X Monthly	treasurer termination	Dissolution (Attach PAC-DR)
L				
10) MONTHLY			
1	REPORT FILING	January 5 April 5	5 July 5	October 5
1	DEADLINE			November 5
1		February 5 X May 5	August 5	
L		March 5 June 9	5 September 5	December 5
1				
1		Month Day Year	Month	Day Year
1-1	COVERED	I - TH	HDUICH	
L	COVERED	03/26/2024	04/25/	2024
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		GO T	O PAGE 2	

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

245157

FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
K & L Gates LLP Cor	nmittee for Good Govern	ment	00016405	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, If applicable, classify by party.)	with Built Patient Electremant Obvern		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
, 1 S	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.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLEE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	82.27
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	38,000.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL C OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST	DAY \$	48,811.15
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.	rjury, that the a nation required	accompanying report is d to be reported by me
		Mr. Robert H	H. McCarthy	
		Signature of Car	npaign Treasu	rer
AFFIX NOTAF	RY STAMP / SEAL ABOVE			
		, th	nis the	day
01	, 20, to certify w	hich, witness my hand and seal of office.		
Signature of officer a	administering oath	Printed name of officer administering oath	Title of offic	cer administering oath
orms provided by Texas	Ethics Commission	www.ethics.state.tx.us		Version V3.5.1.5b35d027

MONTHLY FILING GPAC REPORT: PURPOSE

FORM MPAC

Page 3 of 16

					Fage 3 01 10
12 COMMITTEE NAME K & L Gates LLP Committe	e for Good Governm	nent		13 Filer ID 00016405	(Ethics Commission Filers)
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Mr. Tan Parker 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.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Ms. Claudia Ordaz State Repr	esentative	
(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. Gary VanDeaver State Re	presentative	
(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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FORM MPAC

Page 4 of 16

12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
K & L Gates LLP Committe	e for Good Governn	nent		00016405	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Mr. James Talarico State Repre	sentative	
(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	1. Candidates		Ma Lunn Chucky State Deprese	· 4 - 41 6	
ACTIVITY	L. Candidates (Identify by name or, if applicable, classify by party.)	1	Mr. Lynn Stucky State Represer	itative	
(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.)				
	1. Candidates (Identify by name or, if applicable, classify by party.)		Ms. Stephanie Klick State Repre	sentative	
(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

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ADDENDUM Page 5 of 16

12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
K & L Gates LLP Committe					00016405	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		1r. Todd Huntere	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				
5		B. Opposed				
	 Officeholders Assisted (Identify by name or, if applicable, classify by party.) 					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		1r. Brad Buckley	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.) 		1r. Kevin Sparks	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				
	 Officeholders Assisted (Identify by name or, if applicable, classify by party.) 					

MONTHLY FILING GPAC REPORT: PURPOSE

FORM MPAC

Page 6 of 16

12 COMMITTEE NAME					13 Filer ID	(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.)		Mr. Charles Schwer	tner State S	enator	
(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. Brian Birdwell S	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.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Mr. Royce West Sta	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.)					

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12 COMMITTEE NAME	13 Filer ID	(Ethics Commission Filers)			
K & L Gates LLP Committe	ee for Good Governn	nent		00016405	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Mr. Terry Canales State Repres	L;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			
	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. Chuy Hinojosa State Senato	r	
(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			Mr. Glenn Hegar Comptroller		
ACTIVITY	(Identify by name or, if applicable, classify by party.)		Mr. Glenn negar Compitolier		
(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.) 				
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						Page 8 of 16
12 COMMITTEE NAME	12 COMMITTEE NAME 13 Filer ID (Ethics Commission Filers					
K & L Gates LLP Committe	e for Good Governm	nent			00016405	
14 COMMITTEE ACTIVITY	1. Candidates (Identity by name or, If applicable, classify by party.)		Mr. Ramon Romer	o State Repre	esentative	
(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.)					

SUBTOTALS - MPAC

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FORM MPAC

C	0	VER	SHEET	PG	3
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17 COMMIT	TTEE NAME			
K&LG	Sates LLP Committee for Good Government	18 Filer ID 00016405	(Et	hics Commission Filers)
	ULE SUBTOTALS DF SCHEDULE			SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	82.27
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABC ORGANIZATION)R	\$	
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA LABOR ORGANIZATION	ATION OR	\$	
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG.		\$	
7. 🔲	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$	
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR C	ORGANIZATION	\$	
9. 🔲	SCHEDULE E: LOANS		\$	
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$	38,000.00
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIO	ONS	\$	
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
14. 🔲	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLIT!CAL CONTRIBUTIC	SNS	\$	
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS R TO FILER	₹ETURNED	\$	

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A2: Sch: 1/1 Rpt: 10/16				
2 FILER NAME K & L Gates LLP Committee for Good Government	3 Filer ID (Ethics Commission Filers) 00016405				
⁴ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS	\$				
5 Date 6 Full name of contributor out-of-state PAC (ID#:	8 Amount of contribution (\$) In-kind contribution description \$82.27 In-kind contribution for reception for Rep. Stucky on 2/5/24. Check if travel outside of Texas. Complete Schedule T.				
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR N	ION-JUDICIAL) (See instructions)				
12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job t	13 Contributor's job title (FOR JUDICIAL) (See instructions)				
14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contri	butor's spouse (if any) (FOR JUDICIAL)				
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					

POLITICAL EX CONTRIBUTIO	PENDITURES FROM POLITICAL SCHEDULE F1	
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense al Committee Event Expense Food/Beverage Expense Bitt/Awards/Memorials Expense Legal Services Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Travel Out of District Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1: Sch: 1/6 Rpt: 11/16		
Date 04/05/2024	5 Payee name Brad Buckley Campaign	
Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 1321 Pershing Dr.	
Expenditure from corporate funds	Killeen, TX 76549	
3 PURPOSE OF EXPENDITURE	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 03/26/2024	Payee name Brian Birdwell Campaign	
Amount (\$) \$2,000.00	Payee address; City; State; Zip Code P.O. Box 1111	
Expenditure from corporate funds	Granbury, TX 76048	
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 04/05/2024	Payee name Charles Schwertner Campaign	
Amount (\$) \$2,000.00	Payee address;City;State; Zip CodeP.O. Box 2448	
Expenditure from corporate funds	Georgetown, TX 78627	
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>QNLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held	

	245157				
POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1					
Advertising Expense Accounting/Banking Consulling Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment					
1 Total pages Schedule F1: Sch: 2/6 Rpt: 12/16	2 FILER NAME 3 Filer ID (Ethics Commission Filers) K & L Gates LLP Committee for Good Government 00016405				
4 Date 04/23/2024	5 Payee name Chuy Hinojosa Campaign				
\$2,000.00	7 Payee address; City; State; Zip Code 1508 S. Lone Star Way, Ste. 5B				
Expenditure from corporate funds	Edinburg, TX 78539				
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/OF 	Candidate/Officeholder name Office sought Office held				
Date	Payee name				
04/03/2024	Claudia Ordaz Campaign				
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code P.O. Box 71738				
corporate funds	El Paso, TX 79917				
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				
04/12/2024	Dan Patrick Campaign				
Amount (\$) \$10,000.00	Payee address; City; State; Zip Code P.O. Box 685085				
Expenditure from corporate funds	Austin, TX 78768				
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				

CONTRIBUTIO	PENDITURES FROM POLITICAL 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 OTHER (enter a category not listed above)
Total pages Schedule F1:	The Instruction Guide explains how to complete this form. 2 FILER NAME (Ethics Commission Eiler
Sch: 3/6 Rpt: 13/16	2 FILER NAME 3 Filer ID (Ethics Commission Filer K & L Gates LLP Committee for Good Government 00016405
Date	5 Payee name
04/03/2024	Gary VanDeaver Campaign
Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code P.O. Box 866
Expenditure from corporate funds	New Boston, TX 75570
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
04/15/2024	Glenn Hegar Campaign
Amount (\$) \$5,000.00	Payee address; City; State; Zip Code P.O. Box 1008
Expenditure from corporate funds	Katy, TX 77492
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 H
Date 04/05/2024	Payee name James Talarico Campaign
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code P.O. Box 15207
Expenditure from corporate funds	Austin, TX 78761
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

		245157
POLITICAL EXP CONTRIBUTION	PENDITURES FROM POLITICAL	SCHEDULE F1
Advertising Expense Accounting/Banking Conoulting Expenso Contributions/ Donations Made By Candidate/Officeholder/Political 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: 4/6 Rpt: 14/16	2 FILER NAME K & L Gates LLP Committee for Good Government	3 Filer ID (Ethics Commission Filers) 00016405
4 Date 04/04/2024	5 Payee name Kevin Sparks Campaign	
6 Amount (\$) \$2,000.00 Expenditure from corporate funds	 7 Payee address; City; State; Zip Code 2600 Mockingbird Ln. Midland, TX 79705 	
8 PURPOSE OF EXPENDITURE	Candidate/Officeholder/Political Committee	el outside of Texas. Complete Schedule T. in, TX, officeholder living expense contribution to support candidate
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought H	Office held
Date	Payee name	
04/03/2024	Lynn Stucky Campaign	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code P.O. Box 464	
Expenditure from corporate funds	Denton, TX 76202	
PURPOSE OF EXPENDITURE	Candidate/Officeholder/Political Committee	el outside of Texas, Complete Schedule T. IIn, TX, officeholder living expense contribution to support candidate
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought H	Office held
Date	Payee name	
04/24/2024	Ramon Romero Campaign	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code PO Box 181	
Expenditure from corporate funds	Fort Worth, TX 76101	
PURPOSE OF EXPENDITURE	Candidate/Officeholder/Political Committee	rcl outside of Texas. Complete Schedule T. stin, TX, officeholder living expense contribution to support candidate
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought H	Office held

POLITICAL EX	PENDITURES FROM POLITICAL NS	SCHEDULE F1
	EXPENDITURE CATEGORIES FOR BOX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense / - Gilt/Awards/Memorials Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
Total pages Schedule F1: Sch: 5/6 Rpt: 15/16		3 Filer ID (Ethics Commission Filers) 00016405
Date 04/19/2024	5 Payee name Royce West Campaign	
Amount (\$) \$2,000.00	7 Payee address; City; State; Zip Code 320 S R.L. Thornton Frwy., Suite 220	
corporate funds	Dallas, TX 75203	
B PURPOSE OF EXPENDITURE	Candidate/Officeholder/Political Committee	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
Date 04/04/2024	Payee name Stephanie Klick Campaign	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code PO Box 7592	
Expenditure from corporate funds	Fort Worth, TX 76111	
PURPOSE OF EXPENDITURE	Candidate/Officeholder/Political Committee	outside of Texas. Complete Schedule T. , TX, officeholder living expense Intribution to support candidate
Complete <u>QNLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
Date	Payee name	
04/04/2024	Tan Parker Campaign	
Amount (\$) \$2,000.00	Payee address; City; State; Zip Code P.O. Box 271741	
Expenditure from corporate funds	Flower Mound, TX 75027	
PURPOSE OF EXPENDITURE	Candidate/Officeholder/Political Committee	outside of Texas, Complete Schedule T. TX, officeholder living expense ntribution to support candidate
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Loan Repayment/Reimbursement Solicitation/Fundralsing Expense Transportation Equipment & Related Expense Advertising Expense Accounting/Banking Office Overhead/Rental Expense ees Travel in District Polling Expense Consulting Expense Contributions/ Donations Made By Food/Beverage Expense Travel Out of District Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense OTHER (enter a category not listed above) Candidate/Officeholder/Political Committee Legal Services Credit Card Payment The Instruction Guide explains how to complete this form. (Ethics Commission Filers) 3 Filer ID Total pages Schedule F1: 2 FILER NAME 1 00016405 Sch: 6/6 Rpt: 16/16 K & L Gates LLP Committee for Good Government 4 Date 5 Payee name 04/23/2024 Terry Canales Campaign Payee address; City; State; Zip Code Amount (\$) 6 \$2,000.00 310 S. Closner Blvd Expenditure from Edinburg, TX 78539 corporate funds PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description 8 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 Office held Candidate/Officeholder name Office sought 9 expenditure to benefit C/OH Date Payee name Todd Hunter Campaign 04/11/2024 State; Zip Code Amount (\$) Payee address; City; \$2,000.00 445 Cape Henry Dr. Expenditure from Corpus Christi, TX 78412 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 Candidate/Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH

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SCHEDULE F1

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

 To:
 McCarthy. Robert

 Cc:
 Williamson, Ofelia G.; Williamson, Ofelia G.

 Subject:
 00016405 Texas Ethics Commissions Electronic Filing System Acknowledgment

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