### GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

### FORM GPAC COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this	s form. 1 Filer ID (Ethics Commission Filers) 00016325	<ul><li>2 Total pages filed:</li><li>9</li></ul>
3 COMMITTEE NAME	•	OFFICE USE ONLY
Fort Worth Firefighters Committee For Responsible C	Government	Date Received ELECTRONICALLY FILED 03/03/2024
4 COMMITTEE ADDRESS         ADDRESS / PO BOX;         APT / SUITE           3855 Tulsa Way         3855 Tulsa Way	#; CITY; STATE; ZIP C	Date Hand-delivered or Date Postmarked
Change of Address Fort Worth, TX 76107-3345		Receipt # Amount
		Date Processed
		Date Imaged
5 CAMPAIGN MS / MRS / MR FIRST TREASURER NAME Morga		MI
NICKNAME LAST Hix		SUFFIX
6 CAMPAIGN TREASURER STREET ADDRESS STREET	LEASE); APT / SUITE #;	CITY; STATE; ZIP CODE
(Residence or Business) Fort Worth, TX 76107		
7 CAMPAIGN STREET OR PO BOX; TREASURER MAILING ADDRESS 3855 Tulsa Way	APT / SUITE #;	CITY; STATE; ZIP CODE
Change of Address Fort Worth, TX 76107		
8 CAMPAIGN AREA CODE PHONE NUM TREASURER PHONE (817) 944-7784	BER EXTENSION	
9 REPORT January 15	30th day before election	Dissolution (Attach PAC-DR)
July 15	X     8th day before election       Runoff	10th day after campaign treasurer termination
10 PERIODMonthDayYearCOVERED01/26/2024	Month THROUGH 02/	Day Year /24/2024
11 ELECTION ELECTION DATE Month Day Year 03/05/2024	ELECTION 1	TYPE
	GO TO PAGE 2	
Forms provided by Texas Ethics Commission	www.ethics.state.tx.us	Version V3.5.1.5b35d027

### GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

# FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Fort Worth Firefighters	Committee For Respon	sible Government	000163	325
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		
(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, CONTRIBUTIONS M	POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA		\$	0.00
	(OTHER THAN PLE	DGES, LOANS, OR GUARANTEES OF LOANS)	Ť	0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	10,000.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL C OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST I G PERIOD	DAY \$	235,386.64
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	HE \$	0.00
16 AFFIDAVIT	•		l	
		I swear, or affirm, under penalty of per true and correct and includes all inforr under Title 15, Election Code.		
		Morga	an Hix	
		Signature of Car		asurer
AFFIX NOTARY	STAMP / SEAL ABOVE			
Sworn to and subscribed	before me, by the said	, th	is the	day
of	_, 20, to certify v	which, witness my hand and seal of office.		
Signature of officer ad	lministering oath	Printed name of officer administering oath	Title of	officer administering oath
Forms provided by Texas E	Ethics Commission	www.ethics.state.tx.us		Version V3.5.1.5b35d027

SUBTOTALS - GPAC	C	FORM GPAC
		3 of 9
17 COMMITTEE NAME Fort Worth Firefighters Committee For Responsible Government	18 Filer ID 00016325	(Ethics Commission Filers)
19 SCHEDULE SUBTOTALS NAME OF 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 CORPOR- LABOR ORGANIZATION	ATION OR	\$
6. SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	SANIZATION	\$
7. SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	2	\$
8. SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR	ORGANIZATION	\$
9. SCHEDULE E: LOANS		\$
10. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	<b>\$</b> 10,000.00
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. X SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTI	ONS	<b>\$</b> 16,813.64
15. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment	
1 Total pages Schedule F1: Sch: 1/1 Rpt: 4/9	2       FILER NAME       3       Filer ID (Ethics Commission Filers)         Fort Worth Firefighters Committee For Responsible       00016325
4 Date 02/20/2024	5 Payee name COLLIER, NICOLE (Rep.)
6 Amount (\$) \$10,000.00	7 Payee address; City; State; Zip Code 101 S. Jennings Suite 103A
Expenditure from corporate funds	Fort Worth, TX 76104
8 PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee</li> <li>(b) Description         <ul> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense Campaign Contribution</li> </ul> </li> </ul>
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

OF       EXPENDITURE       Food/Beverage Expense       Lunch Expenditure         Date       Payee name       Crow, Calab (Mr.)       Lunch Expenditure         Amount (\$)       Payee Address;       City; State; Zip       2,096.60         2,096.60       1910 6th Ave       Fort Worth, TX 76110       Vortex (b)         PURPOSE       6a Category (See instructions for examples of acceptable categories)       (b) Description         Vages       Salaries/Wages/Contract Labor       Wages         Date       Payee name       UDEDRICK, SHERMAN (Mr.)         Amount (\$)       Payee Address;       City; State; Zip         4505 Fox Rio Trail       4505 Fox Rio Trail       Expenditure from         Corporate funds       Arlington, TX 76017       Fort Wages	3 Filer ID (Ethics Commission Filers
02/06/2024       Cafe Republic         Amount (\$)       7       Payee Address; City; State; Zip         47.00       B640 N Beach St         Expenditure from corporate funds       Fort Worth, TX 76244         PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories)       (b) Description Lunch Expenditure Crow, Calab (Mr.)         Date       Payee name       Crow, Calab (Mr.)         2,096.60       1910 6th Ave       Expenditure from Corporate funds         PURPOSE OF EXPENDITURE       Fort Worth, TX 76110       (b) Description Wages         Purpose OF EXPENDITURE       Fort Worth, TX 7610       (b) Description Wages         Date       Payee name       02/15/2024       (a) Category (See instructions for examples of acceptable categories)       (b) Description Wages         Date       Payee name       02/15/2024       DEDRICK, SHERMAN (Mr.)       Wages         Date       Payee Address; City; State; Zip       (b) Description Wages       Vages         Date       Payee Address; City; State; Zip       (b) Description Wages         12/15/2024       DEDRICK, SHERMAN (Mr.)       (b) Description WAGES         Date       Payee name       (a) Category (See instructors for examples of acceptable categories)       (b) Description WAGES         Date       Payee name	00016325
47.00       8640 N Beach St         Expenditure from OF EXPENDITURE       Fort Worth, TX 76244         PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories)       (b) Description Lunch Expenditure from Corporate funds         Date 02/15/2024       Payee name Crow, Calab (Mr.)       Lunch Expenditure from Corporate funds       Payee Address; Port Worth, TX 7610         PuRPOSE 02/15/2024       Payee Address; City; State; Zip 1910 6th Ave       City; State; Zip 1910 6th Ave         Expenditure from corporate funds       Fort Worth, TX 7610       (b) Description Wages         PuROSE 02/15/2024       (a) Category (See instructors for examples of acceptable categories) Salaries/Wages/Contract Labor       (b) Description Wages         Date 02/15/2024       Payee name DEDRICK, SHERMAN (Mr.)       Wages         Amount (\$)       Payee Address; Address; City; State; Zip       (b) Description Wages         Expenditure from corporate funds       Arlington, TX 76017       (b) Description WAGES         PuRPOSE EXPENDITURE       (a) Category (See instructors for examples of acceptable categories) Salaries/Wages/Contract Labor       (b) Description WAGES         Date 02/15/2024       Payee name O2/15/2024       Category (See instructors for examples of acceptable categories) Salaries/Wages/Contract Labor       (b) Description WAGES         Date 02/15/2024       Payee name O2/15/2024       Payee Address; City; State;	
corporate funds       Fort Worth, TX 76244         PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories)       (b) Description Lunch Expen         Date       Payee name         02/15/2024       Crow, Calab (Mr.)         Amount (\$)       Payee Address; City; State; Zip         2,096.60       1910 6th Ave         Expenditure from corporate funds       Fort Worth, TX 76110         PURPOSE of EXPENDITURE       (a) Category (See instructions for examples of acceptable categories)       (b) Description Wages         Date       Payee name       (b) Description         OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories)       (b) Description         Date       Payee name       Salaries/Wages/Contract Labor       Wages         Date       Payee Address; City; State; Zip       4505 Fox Rio Trail         Armount (\$)       Payee Address; City; State; Zip       (b) Description         Salaries/Wages/Contract Labor       WAGES       WAGES         Date       Payee name       Salaries/Wages/Contract Labor       WAGES         Corporate funds       Arlington, TX 76017       WAGES       (b) Description         PURPOSE       (a) Category (See instructions for examples of acceptable categories)       (b) Description <tr< td=""><td></td></tr<>	
OF EXPENDITURE       Food/Beverage Expense       Lunch Expension         Date       Payee name       Lunch Expension         02/15/2024       Crow, Calab (Mr.)       Lunch Expension         Amount (\$)       Payee Address; City; State; Zip       1910 6th Ave         2,096.60       1910 6th Ave       Fort Worth, TX 76110         PURPOSE       Fort Worth, TX 76110       (b) Description         Vages       Salaries/Wages/Contract Labor       Wages         Date       Payee name       U2/15/2024         Date       Payee Address; City; State; Zip       Wages         02/15/2024       DEDRICK, SHERMAN (Mr.)       Wages         Amount (\$)       Payee Address; City; State; Zip       4505 Fox Rio Trail         Expenditure from corporate funds       Arlington, TX 76017       (b) Description         WAGES       Salaries/Wages/Contract Labor       (b) Description         Vages       Arlington, TX 76017       WAGES         PURPOSE       (a) Category (See instructions for examples of acceptable categories) Salaries/Wages/Contract Labor       (b) Description         Date       Payee name       Vages       Vages         Date       Payee name       Daugherty, Thomas Clay (Mr.)       WAGES         Date       Payee Address; City; State; Zip </td <td></td>	
02/15/2024       Crow, Calab (Mr.)         Amount (\$)       Payee Address; City; State; Zip         2,096.60       1910 6th Ave         Expenditure from corporate funds       Fort Worth, TX 76110         PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories) Salaries/Wages/Contract Labor       (b) Description Wages         Date OF Payee name       Payee name       (b) Description Wages         02/15/2024       DEDRICK, SHERMAN (Mr.)	(See instructions regarding type of information required. SE
Amount (\$)       Payee Address;       City; State; Zip         2,096.60       1910 6th Ave         Expenditure from       Fort Worth, TX 76110         PURPOSE       6         OF       Salaries/Wages/Contract Labor         Date       Payee name         02/15/2024       DEDRICK, SHERMAN (Mr.)         Amount (\$)       Payee Address;       City; State; Zip         849.02       Afor Trail         Expenditure from       Arlington, TX 76017         PURPOSE       (a) Category (See instructions for examples of acceptable categories)         Mount (\$)       Payee name         02/15/2024       DEDRICK, SHERMAN (Mr.)         Amount (\$)       Payee Address;       City; State; Zip         849.02       4505 Fox Rio Trail         PURPOSE       Arlington, TX 76017         PURPOSE       (a) Category (See instructions for examples of acceptable categories)       (b) Description         Salaries/Wages/Contract Labor       WAGES         Date       Payee name       O2/15/2024         Date       Payee name       Daugherty, Thomas Clay (Mr.)         Amount (\$)       Payee Address;       City; State; Zip         1662 Holland Lake Dr. #12205       City ; State; Zip	
2,096.60 (Expenditure from corporate funds1910 6th Ave Fort Worth, TX 76110PURPOSE OF EXPENDITUREFort Worth, TX 76110Date 02/15/2024Payee name DEDRICK, SHERMAN (Mr.)Amount (\$)Payee Address; Salaries/Wages/Contract Laborby State: (b) Description WagesDate 02/15/2024Payee Address; State: State: Corporate fundsDate 02/15/2024Payee Address; Arlington, TX 76017By State: (b) Description (b) Description (b) Description WagesDate OF EXPENDITUREPayee name (b) Description (b) Description WAGESDate 02/15/2024Payee name Description Salaries/Wages/Contract Labor(b) Description WAGESDate 02/15/2024Payee name Daugherty, Thomas Clay (Mr.)(b) Description WAGESDate 02/15/2024Payee Address; Daugherty, Thomas Clay (Mr.)City; State; Zip 1662 Holland Lake Dr. #12205	
corporate fundsFort Worth, TX 76110PURPOSE OF EXPENDITURE(a) Category (See instructions for examples of acceptable categories) Salaries/Wages/Contract Labor(b) Description WagesDate 02/15/2024Payee name DEDRICK, SHERMAN (Mr.)Amount (\$)Payee Address; 4505 Fox Rio TrailCity; State; Zip 4505 Fox Rio TrailExpenditure from corporate fundsArlington, TX 76017(b) Description WAGESPURPOSE OF EXPENDITURE(a) Category (See instructions for examples of acceptable categories) Salaries/Wages/Contract Labor(b) Description WAGESDate OF EXPENDITUREPayee name Daugherty, Thomas Clay (Mr.)(b) Description WAGESDate 02/15/2024Payee Address; Salaries/Wages/Contract Labor(b) Description WAGES	
OF EXPENDITURE     Salaries/Wages/Contract Labor     Wages       Date     Payee name     UEDRICK, SHERMAN (Mr.)       Amount (\$)     Payee Address;     City; State; Zip       849.02     4505 Fox Rio Trail     Vages       Expenditure from corporate funds     Arlington, TX 76017     Vages       PURPOSE OF EXPENDITURE     (a) Category (See instructions for examples of acceptable categories) Salaries/Wages/Contract Labor     (b) Description WAGES       Date     Payee name       02/15/2024     Daugherty, Thomas Clay (Mr.)       Amount (\$)     Payee Address;     City; State; Zip	
02/15/2024       DEDRICK, SHERMAN (Mr.)         Amount (\$)       Payee Address; City; State; Zip         849.02       4505 Fox Rio Trail         Expenditure from corporate funds       Arlington, TX 76017         PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories) Salaries/Wages/Contract Labor       (b) Description WAGES         Date       Payee name       Daugherty, Thomas Clay (Mr.)         Amount (\$)       Payee Address; City; State; Zip         1662 Holland Lake Dr. #12205       1662 Holland Lake Dr. #112205	(See instructions regarding type of information required.
Amount (\$)     Payee Address;     City;     State;     Zip       849.02     4505 Fox Rio Trail     4505 Fox Rio Trail       Expenditure from corporate funds     Arlington, TX 76017     (a) Category (See instructions for examples of acceptable categories)     (b) Description       PURPOSE OF EXPENDITURE     (a) Category (See instructions for examples of acceptable categories)     (b) Description       Date     Payee name     WAGES       02/15/2024     Daugherty, Thomas Clay (Mr.)     Mount (\$)       Amount (\$)     Payee Address;     City; State; Zip	
849.02       4505 Fox Rio Trail         Expenditure from corporate funds       Arlington, TX 76017         PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories) Salaries/Wages/Contract Labor       (b) Description WAGES         Date       Payee name       Vages/Contract Labor       Vages/Contract Labor         Date       Payee name       Daugherty, Thomas Clay (Mr.)       1662 Holland Lake Dr. #12205	
I corporate funds       Arlington, TX 76017         PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories) Salaries/Wages/Contract Labor       (b) Description WAGES         Date       Payee name         02/15/2024       Daugherty, Thomas Clay (Mr.)         Amount (\$)       Payee Address; City; State; Zip         1662 Holland Lake Dr. #12205	
OF EXPENDITURE     Salaries/Wages/Contract Labor     WAGES       Date     Payee name       02/15/2024     Daugherty, Thomas Clay (Mr.)       Amount (\$)     Payee Address; City; State; Zip       1662 Holland Lake Dr. #12205	
02/15/2024 Daugherty, Thomas Clay (Mr.) Amount (\$) Payee Address; City; State; Zip 1662 Holland Lake Dr. #12205	(See instructions regarding type of information required.
Amount (\$) Payee Address; City; State; Zip 1662 Holland Lake Dr. #12205	
1662 Holland Lake Dr. #12205	
740.74 1002 Holland Lake Dr., #12205	
Expenditure from corporate funds Weatherford, TX 76086	
PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories)       (b) Description         LABOR       LABOR	(See instructions regarding type of information required.

Total pages Schedule I: Sch: 2/5 Rpt: 6/9	2 FILER NAME Fort Worth Firefighters Committee For Responsib	le 3 Filer ID (Ethics Commission Filers) 00016325
Date 02/07/2024	5 Payee name Dickies Arena	
Amount (\$) 578.00 Expenditure from	7 Payee Address; City; State; Zip 1911 Montgomery St.	
corporate funds	Fort Worth, TX 76107	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) (b) Event Expense	Description (See instructions regarding type of information required.) Concert Tickets
Date 02/14/2024	Payee name Dickies Arena	
Amount (\$) 543.00	Payee Address; City; State; Zip 1911 Montgomery St.	
Expenditure from corporate funds	Fort Worth, TX 76107	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) (b) Event Expense	Description (See instructions regarding type of information required.) Concert Tickets
Date 02/15/2024	Payee name Dickies Arena	
Amount (\$) 658.00 Expenditure from corporate funds	Payee Address; City; State; Zip 1911 Montgomery St. Fort Worth, TX 76107	
PURPOSE OF EXPENDITURE		Description (See instructions regarding type of information required.) Concert Tickets
Date 02/22/2024	Payee name Dickies Arena	
Amount (\$) 1,258.00	Payee Address; City; State; Zip 1911 Montgomery St.	
Expenditure from corporate funds	Fort Worth, TX 76107	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) (b) Event Expense	Description (See instructions regarding type of information required.) Concert Tickets

Total pages Schedule I:	2 FILER NAME		3 Filer ID (Ethics Commission Filer
Sch: 3/5 Rpt: 7/9	Fort Worth Firefighters Committee For Respon	sible	00016325
Date 02/15/2024	5 Payee name Gonzales, James (Mr.)		
Amount (\$) 448.48	7 Payee Address;     City; State; Zip       421 Ridgecrest Dr		
Expenditure from corporate funds	Saginaw, TX 76179		
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Salaries/Wages/Contract Labor	(b) Description LABOR	(See instructions regarding type of information required
Date	Payee name		
02/15/2024	HANETHO, NICK (Mr.)		
Amount (\$) 2,065.67	Payee Address;City; State; Zip7070 TERRA MEADOW LANE #520		
Expenditure from corporate funds	FORT WORTH, TX 76137		
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Salaries/Wages/Contract Labor	(b) Description WAGES	(See instructions regarding type of information required
Date	Payee name		
02/15/2024	HANETHO, NICK (Mr.)		
Amount (\$)	Payee Address; City; State; Zip		
1,321.63	7070 TERRA MEADOW LANE #520		
Expenditure from corporate funds	FORT WORTH, TX 76137		
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Salaries/Wages/Contract Labor	(b) Description WAGES	(See instructions regarding type of information required
Date	Payee name		
02/15/2024	HANETHO, NICK (Mr.)		
Amount (\$)	Payee Address; City; State; Zip		
677.81	7070 TERRA MEADOW LANE #520		
Expenditure from corporate funds	FORT WORTH, TX 76137		
	(a) Category (See instructions for examples of acceptable categories)	(b) Description	(See instructions regarding type of information required
OF	Salaries/Wages/Contract Labor	LABOR	
	1	1	

Total pages Schedule I:	2 FILER NAME 3 Filer ID (Ethics Commission Filers
Sch: 4/5 Rpt: 8/9	Fort Worth Firefighters Committee For Responsible00016325
Date	5 Payee name
02/15/2024	HIX, JAMES
Amount (\$)	7 Payee Address; City; State; Zip
599.16	4216 WHITFIELD AVE
Expenditure from corporate funds	Fort Worth, TX 76109
	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.
OF	Salaries/Wages/Contract Labor LABOR
EXPENDITURE	
Date	Payee name
02/14/2024	Internal Revenue Service
Amount (\$)	Payee Address; City; State; Zip
1,610.85	PO BOX 660351
_ Expenditure from	
corporate funds	DALLAS, TX 75206
PURPOSE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.
OF EXPENDITURE	Fees Taxes
Date	Payee name
02/15/2024	Internal Revenue Service
Amount (\$)	Payee Address; City; State; Zip
2,133.00	PO BOX 660351
Expenditure from	DALLAS, TX 75206
_ corporate funds	
PURPOSE OF	(a) Category (See instructions for examples of acceptable categories)       (b) Description       (See instructions regarding type of information required.         Fees       Taxes
EXPENDITURE	
Date	Payee name
02/20/2024	LEUKEMIA AND LYMPHOMA SOCIETY
Amount (\$)	Payee Address; City; State; Zip
1,000.00	3 International Drive Reckson Executive Park
Expenditure from	Due Brook NV 10572
_ corporate funds	Rye Brook, NY 10573         (a) Category (See instructions for examples of acceptable categories)         (b) Description         (See instructions regarding type of information required.
PURPOSE OF	<ul> <li>(a) Category (See instructions for examples of acceptable categories)</li> <li>(b) Description (See instructions regarding type of information required. Contributions/Donations Made By</li> <li>(b) Description (See instructions regarding type of information required.</li> </ul>
EXPENDITURE	Candidate/Officeholder/Political Committee

	The Instruction Guide explains how to	complete this form.
. Total pages Schedule I: Sch: 5/5 Rpt: 9/9	2 FILER NAME Fort Worth Firefighters Committee For Respons	ible 3 Filer ID (Ethics Commission Filers) 00016325
Date 02/15/2024	5 Payee name Quick Books Online	
Amount (\$) 105.53	7 Payee Address; City; State; Zip PO BOX 660351	
corporate funds PURPOSE OF EXPENDITURE	DALLAS, TX 75206 (a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) SUBSCRIPTION FEE
Date 02/12/2024	Payee name UBER EATS	
Amount (\$) 32.75 Expenditure from	Payee Address; City; State; Zip 1455 MARKET STREET #400 SAN FRANCISCO, CA 94103	
corporate funds PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.) Lunch Expense
Date 02/13/2024	Payee name UBER EATS	
Amount (\$) 48.40 Expenditure from corporate funds	Payee Address; City; State; Zip 1455 MARKET STREET #400 SAN FRANCISCO, CA 94103	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.) Food Expense