MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM MPAC COVER SHEET PG 1

Τł	The MPAC Instruction Guide explains how to complete this form. 1 Filer ID (Ethics Commission Filers) 00015566 2 Total pages filed: 8						
3	COMMITTEE NAME						
Ē	Hammer & Nails P	AC		OFFICE USE ONLY			
		Date Received ELECTRONICALLY FILED					
				04/04/2024			
4	COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #;	CITY; STATE; ZIP				
	ADDRE33	100 E. 15th St., Ste. 600					
	_						
	Change of Address	Fort Worth, TX 76102		Date Hand-delivered or Date Postmarked			
5	CAMPAIGN	MS / MRS / MR FIRST	MI				
	TREASURER	Robert M	l.	Receipt # Amount			
	NAME						
				Date Processed			
		NICKNAME LAST	SUFF	IX			
		Bob Madeja		Date Imaged			
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #; CITY; S	TATE; ZIP CODE			
ľ	TREASURER	6613 Waterwood Circle	,				
	STREET						
	ADDRESS (Residence or Business)						
	`````	Benbrook, TX 76132					
7	CAMPAIGN	STREET ADDRESS OR PO BOX;	APT / SUITE #; CITY; S	STATE; ZIP CODE			
	TREASURER	6613 Waterwood Circle					
	MAILING ADDRESS						
		Benbrook, TX 76132					
-	CAMPAIGN	AREA CODE PHONE NUMBER	EXTENSION				
l°	TREASURER	AREA CODE PHONE NOMBER	EXTENSION				
	PHONE	(817) 269-5100					
	REPORT TYPE						
ľ	REFORT TIFE	X Monthly	10th day after campaign treasurer termination	Dissolution (Attach PAC-DR)			
10		January 5 X April	5 July 5	October 5			
	REPORT FILING DEADLINE	January 5 X April					
		February 5 May	5 August 5	November 5			
			e 5 September 5	December 5			
		March 5 June		December 5			
11		Month Day Year	Month THROUGH	Day Year			
	COVERED	02/26/2024	03/25	5/2024			
⊢		1					
1							
1							
	GO TO PAGE 2						
L Fo	orms provided by Texas Ethics Commission www.ethics.state.tx.us Version V3.5.1.5b35d027						

# MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

# FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer II	C (Ethics Commission Filers)		
Hammer & Nails PAC			00015	566		
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				
	<u> </u>	A Cuprosted				
	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	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	.000		
	2. TOTAL POLITICA	L CONTRIBUTIONS	\$	1 500 00		
	(OTHER THAN PLEI	DGES, LOANS, OR GUARANTEES OF LOANS)		1,500.00		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00		
	4. TOTAL POLITICA	L EXPENDITURES	\$	7,029.30		
CONTRIBUTION BALANCE	5. TOTAL POLITICAL C OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	41,301.35		
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	THE \$	.00		
16 AFFIDAVIT						
I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.						
		Robert N Signature of Cal	-			
	Signature of Campaign Treasurer					
AFFIX NOTARY STAMP / SEAL ABOVE						
		, tł	nis the	day		
of, 20, to certify which, witness my hand and seal of office.						
Signature of officer ad	ninistering oath	Printed name of officer administering oath	Title o	f officer administering oath		
Forms provided by Texas E	thics Commission	www.ethics.state.tx.us		Version V3.5.1.5b35d027		

### FORM MPAC COVER SHEET PG 3

3 of 8

17 COMMITTEE NAME 18 Filer ID (					mission Filers)
Har	nmer &				
19 SCHEDULE SUBTOTALS					TAL AMOUNT
NAME OF SCHEDULE					
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	1,500.00
2.	Х	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00
3.	Х	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	0.00
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	R	\$	
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA LABOR ORGANIZATION	TION OR	\$	
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGA	ANIZATION	\$	
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$	
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR C	RGANIZATION	\$	
9.	Х	SCHEDULE E: LOANS		\$	0.00
10.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$	7,029.30
11.	Х	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00
12.	12. X SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS		\$	0.00	
13.	Х	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	DNS	\$	
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	

**SUBTOTALS - MPAC** 

MONET	TARY POLITICAL CONTRIBUTIO	NS		SCHEDULE A1
The Instru	iction Guide explains how to complete this fo	orm.		Total pages Schedule A1: Sch: 1/1 Rpt: 4/8
2 FILER NAME Hammer & I				Filer ID (Ethics Commission Filers) 00015566
4 Date 03/11/2024	<ul> <li>Full name of contributor out-of-state PAC (ID#:</li> <li>Fox Energy Specialists</li> <li>Contributor address; City; State; Zip Code</li> <li>Fort Worth, TX 76107</li> </ul>		7	Amount of Contribution (\$) \$1,000.00
8 Principal occu		9 Employer (See Instructions)	<u> </u> 3)	
Date 03/01/2024	Full name of contributor out-of-state PAC (ID#: Montgomery, John (Mr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$500.00
Principal occ	Lillian, TX 76061 upation / Job title (See Instructions)	Employer (See Instructions)	<u> </u>	
Builder	Ipation / Job lille (See instructions)	Montesello Homes	3)	

PLEDGED CONTRIBUTIONS SCHEDU				
The Instruction Guide explains how	1 Total pages Schedule B: Sch: 1/1 Rpt: 5/8			
2 FILER NAME Hammer & Nails PAC		3 Filer ID (Ethics Commission Filers) 00015566		
⁴ TOTAL OF UNITEMIZED PLEDGES		\$ 0.00		
	f-state PAC (ID#:) 	8 Amount of 9 In-kind description pledge (\$) (If applicable)		
<b>10</b> Principal occupation / Job title (See Instructions)	11 Employer (See Instru			

LOANS		SCHEDUI	EE
The Instruction Guide explains how to complete this form.	iges Schedule E: 1 Rpt: 6/8		
Hammer & Nails PAC	3 Filer ID 000155	(Ethics Commission	Filers)
⁴ TOTAL OF UNITEMIZED LOANS		\$	0.00
5 Date of loan 7 Name of lender Out-of-state PAC (ID#:	)	9 Loan Amount (\$)	
6 Is lender a financial institution? 8 Lender address; City; State; Zip Code		<ul><li><b>10</b> Interest Rate</li><li><b>11</b> Maturity Date</li></ul>	
		II Maturity Date	
12 Principal occupation / Job title (See Instructions)       13 Employer (See Instructions)	)		
14 Description of Collateral     15 Check if personal funds were       None	re deposited	into political account (See Instructions)	
Information     Information		19 Amount Guarante	ed (\$)
not applicable <b>18</b> Guarantor address; City; State; Zip Code			
20 Principal occupation     21 Employer (See Instructions)	)		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment					
<b>1</b> Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)				
Sch: 1/2 Rpt: 7/8	Hammer & Nails PAC 00015566				
4 Date	5 Payee name				
03/12/2024	Bean, Cheryl				
6 Amount (\$)	7 Payee address; City; State; Zip Code				
\$2,500.00	5148 E Vickery Loop				
Expenditure from corporate funds	Benbrook, TX 76116				
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held				
Date	Payee name				
03/18/2024	Burns, Dewayne				
Amount (\$)	Payee address; City; State; Zip Code				
\$2,500.00	703 Stonelake Dr.				
Expenditure from corporate funds	Cleburne, TX 76033				
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
OF EXPENDITURE	Contributions/Donations Made By				
	Candidate/Officeholder/Political Committee				
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held				
Date	Payee name				
03/12/2024	Klick, Stephanie				
Amount (\$)	Payee address; City; State; Zip Code				
\$1,000.00	PO Box 7592				
Expenditure from corporate funds	Fort Worth, TX 76111				
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
EXPENDITURE	Contributions/Donations Made By				
	Candidate/Officeholder/Political Committee				
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held				

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Fees Food/Beverage Expense y - Gift/Awards/Memorials Expense al Committee Legal Services	Event Expense         Loan Repayment/Reimbursement           Fees         Office Overhead/Rental Expense           Food/Beverage Expense         Polling Expense           Gitt/Awards/Memorials Expense         Printing Expense			
1 Total pages Schedule F1:	2 FILER NAME		<b>3</b> Filer ID (Ethics Commission Filers)		
Sch: 2/2 Rpt: 8/8	Hammer & Nails PAC		00015566		
4 Date	5 Payee name				
03/11/2024	SquareUp.com				
6 Amount (\$) \$29.30	1455 Market St	; Zip Code			
corporate funds	San Francisco, CA 94103	1			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sch Accounting/Banking	Check if travel of	outside of Texas. Complete Schedule T. , TX, officeholder living expense BS		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O		Office sought	Office held		
Date	Payee name				
03/12/2024	Stucky, Lynn				
Amount (\$) \$1,000.00	Payee address; City; State PO Box 464 Denton, TX 76202	; Zip Code			
PURPOSE OF EXPENDITURE	(a) Category _{(See Categories listed at the top of this sch Contributions/Donations Made By Candidate/Officeholder/Political Comm}	Check if travel of	outside of Texas. Complete Schedule T. , TX, officeholder living expense Ontributions		
Complete ONLY if direct expenditure to benefit C/O		Office sought	Office held		