FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00015585 3 COMMITTEE NAME **OFFICE USE ONLY** Good Government Fund (Fort Worth) Date Received **ELECTRONICALLY FILED** 04/29/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 201 Main Street, Suite 2500 Change of Address Fort Worth, TX 76102 Date Hand-delivered or Date Postmarked MS / MRS / MR **CAMPAIGN FIRST** MI **TREASURER** Receipt # Amount Mr. Dee J. NAME Date Processed **NICKNAME** LAST **SUFFIX** Date Imaged Kelly Jr. CAMPAIGN CITY; STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; STATE; ZIP CODE **TREASURER** 201 Main Street, Suite 2500 STREET **ADDRESS** (Residence or Business) Fort Worth, TX 76102 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 201 Main St., Ste. 2500 MAILING **ADDRESS** Change of Address Fort Worth, TX 76102 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (817) 332-2500 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 April 5 July 5 October 5 REPORT FILING **DEADLINE** February 5 X May 5 August 5 November 5 September 5 December 5 March 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 03/26/2024 04/25/2024

GO TO PAGE 2

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

2 COMMITTEE NAME				(Ethics Commission Filers)
Good Government Fund (Fort Worth)			0001558	35
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported John McQueeny State Repres	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.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLEI	AL CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	D POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	5,000.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		DAY \$	39,065.83
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF T LAST DAY OF THE REPORTING PERIOD		THE \$	0.00
16 AFFIDAVIT	•		•	
		I swear, or affirm, under penalty of pe true and correct and includes all informunder Title 15, Election Code.	rjury, that the nation requi	e accompanying report is red to be reported by me
	Mr. Dee J. Kelly Jr.			
		Signature of Car	mpaign Trea	surer
AFFIX NOTARY	STAMP / SEAL ABOVE			
		, t	nis the	day
of	_, 20, to certify	which, witness my hand and seal of office.		
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title of o	fficer administering oath

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

		3 of 4
17 COMMITTEE NAME Good Government Fund (Fort Worth)	(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 CONTRIBUTION	ONS	\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION ORGANIZATION	OR LABOR	\$
5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION		\$
6. SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LA	BOR ORGANIZATION	\$
7. SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION CORGANIZATION	OR LABOR	\$
8. SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OF	R LABOR ORGANIZATION	\$
9. SCHEDULE E: LOANS		\$
10. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTI	RIBUTIONS	\$ 5,000.00
11. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
12. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CO	NTRIBUTIONS	\$
13. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
14. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CO	NTRIBUTIONS	\$
15. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIL TO FILER	BUTIONS RETURNED	\$

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/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Gift/Awards/Memorials Expense Printing Expense Travel Out of District I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1: Sch: 1/1 Rpt: 4/4	2 FILER NAME Good Government Fund (Fort Worth) 3 Filer ID (Ethics Commission Filers) 00015585
4 Date 04/09/20246 Amount (\$)	 Payee name John McQueeny Campaign Payee address; City; State; Zip Code
\$5,000.00 Expenditure from corporate funds	PO Box 100458 Fort Worth, TX 76185
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 Political contribution
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held