MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM MPAC COVER SHEET PG 1

Τł	ne MPAC Instruction	2 Total pages filed: 4			
3	COMMITTEE NAME			OFFICE USE ONLY	
	For the Children P	AC		Date Received	
				05/05/2024	
4	COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #;	CITY; STATE; ZIP		
	ABBREEC	2209 Edwin			
		Fort Worth, TX 76110		Date Hand-delivered or Date Postmarked	
5	CAMPAIGN TREASURER	MS / MRS / MR FIRST	MI		
	NAME	Mr. Michael C	Corey	Receipt # Amount	
				Date Processed	
		NICKNAME LAST	SUFFI		
		Bearden		Date Imaged	
				-	
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #; CITY; ST	ATE; ZIP CODE	
	TREASURER STREET	PO Box 159			
	ADDRESS	209 W. 2nd St.			
	(Residence or Business)	Fort Worth, TX 76102			
7	CAMPAIGN	STREET ADDRESS OR PO BOX;	APT / SUITE #; CITY; ST	ATE; ZIP CODE	
Ľ	TREASURER	PO Box 159	AFT/SOIL π , CIT, ST	ATE, ZIF CODE	
	MAILING ADDRESS	209 W. 2nd St.			
		Fort Worth, TX 76102			
8	CAMPAIGN TREASURER	AREA CODE PHONE NUMBER	EXTENSION		
	PHONE	(817) 878-3595			
- -	REPORT TYPE				
J	REFORT TIPE	X Monthly	10th day after campaign treasurer termination	Dissolution (Attach PAC-DR)	
	MONTHLY REPORT FILING	January 5 April	5 July 5	October 5	
	DEADLINE				
		February 5 X May	5 August 5	November 5	
		March 5 June	5 September 5	December 5	
11	L PERIOD	Month Day Year	Month	Day Year	
	COVERED	03/26/2024	THROUGH 04/25/2	•	
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Í	GO TO PAGE 2				
L Fo	rms provided by Tex	as Ethics Commission www.et	hics.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 Fil	er ID	(Ethics Commission Filers)
For the Children PAC				00	084703	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Michael Crain Fort \	North City Coun	icil Distrio	ct 3
(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	OR GUARANT		R THAN	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLEI		ITIONS OR GUARANTEES OF	LOANS)	\$	0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL E	XPENDITURES		\$	0.00
	4. TOTAL POLITICA	L EXPENDIT	URES		\$	500.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL C OF THE REPORTING		NS MAINTAINED AS OF	THE LAST DAY	\$	195,073.57
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL / LAST DAY OF THE F		LL OUTSTANDING LOA ERIOD	NS AS OF THE	\$	0.00
16 AFFIDAVIT					•	
		t	swear, or affirm, under p rue and correct and inclu Inder Title 15, Election Co	des all informatior	that the ac required	ccompanying report is to be reported by me
			Mr	. Michael Corey	Bearder	1
Signature of Campaign Treasurer				er		
AFFIX NOTARY STAMP / SEAL ABOVE						
Sworn to and subscribed before me, by the said day				day		
of, 20, to certify which, witness my hand and seal of office.						
Signature of officer ad	ninistering oath	Printed name o	f officer administering oa	th Tit	le of office	er administering oath
Forms provided by Texas E	thics Commission	www.e	thics.state.tx.us			Version V3.5.1.5b35d027

SUE	FORM MPAC			
17 COMM For th		3 of 4 (Ethics Commission Filers)		
19 SCHEI NAME		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 LABC ORGANIZATION	R	\$
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA	TION OR	\$
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR	ORGANIZATION	\$
9.		SCHEDULE E: LOANS		\$
10.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	6	\$ 500.00
11.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
12.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

Advertising Expense	EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense
Adventsing Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District Glft/Awards/Memorials Expense Printing Expense Travel Out of District
Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 1/1 Rpt: 4/4	For the Children PAC 00084703
4 Date	5 Payee name
04/16/2024	Michael Crain for Fort Worth
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$500.00	4450 Oak Park Lane #100427
Expenditure from	
corporate funds	Fort Worth, TX 76109
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 Donation
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	1