### MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

## FORM MPAC COVER SHEET PG 1

| Th           | ne MPAC Instruction (  | <ul><li>2 Total pages filed:</li><li>5</li></ul>    |   |  |  |  |  |
|--------------|--|---|---|--|--|--|--|
| 3            | COMMITTEE NAME   | OFFICE USE ONLY                                     |   |  |  |  |  |
|              | Greater Fort Worth   |   |   |  |  |  |  |
|              |  | Date Received<br>ELECTRONICALLY FILED<br>09/26/2024 |   |  |  |  |  |
| 4            | COMMITTEE  | ADDRESS / PO BOX; APT / SUITE #;                    | CITY; STATE; ZIP                              |  |  |  |  |
|              | ADDRESS  | P.O. Box 470474                                     |   |  |  |  |  |
|              |  |   |   |  |  |  |  |
|              | Change of Address  | Fort Worth, TX 76147-0474                           |   | Date Hand-delivered or Date Postmarked |  |  |  |
| 5            | CAMPAIGN   | MS / MRS / MR FIRST                                 | MI  |  |  |  |  |
|              | TREASURER  | Mr. Tom   |   | Receipt # Amount                       |  |  |  |
|              | NAME   |   |   |  |  |  |  |
|              |  |   |   | Date Processed                         |  |  |  |
|              |  | NICKNAME LAST                                       | SUFFI   | ×                                      |  |  |  |
|              |  | Galbre  | ath   | Date Imaged                            |  |  |  |
|              |  |   |   |  |  |  |  |
| 6            | CAMPAIGN   | STREET ADDRESS (NO PO BOX PLEASE                    | E); APT / SUITE #; CITY; S                    | TATE; ZIP CODE                         |  |  |  |
|              | TREASURER<br>STREET  | c/o Dunaway Associates                              |   |  |  |  |  |
|              | ADDRESS  | 550 Bailey Ave., Ste. 400                           |   |  |  |  |  |
|              | (Residence or Business)  | Fort Worth, TX 76107                                |   |  |  |  |  |
| 7            | CAMPAIGN   | STREET ADDRESS OR PO BOX;                           | APT / SUITE #; CITY; S                        | TATE; ZIP CODE                         |  |  |  |
| Ľ            | TREASURER  | c/o Dunaway Associates                              |   |  |  |  |  |
|              | MAILING<br>ADDRESS   | 550 Bailey Ave., Ste. 400                           |   |  |  |  |  |
|              |  | Fort Worth, TX 76107                                |   |  |  |  |  |
| _            |  |   | EVEENCION                                     |  |  |  |  |
| 8            | CAMPAIGN<br>TREASURER  | AREA CODE PHONE NUMBER                              | EXTENSION                                     |  |  |  |  |
|              | PHONE  | (817) 335-1121                                      |   |  |  |  |  |
| 9            | REPORT TYPE  |   |   |  |  |  |  |
| -            |  | X Monthly   | 10th day after campaign treasurer termination | Dissolution (Attach PAC-DR)            |  |  |  |
| 10           | MONTHLY  |   |   |  |  |  |  |
|              | REPORT FILING  | January 5 A   | oril 5 🛛 July 5                               | X October 5                            |  |  |  |
|              | DEADLINE   | February 5 M  | ay 5 August 5                                 | November 5                             |  |  |  |
|              |  |   |   |  |  |  |  |
|              |  | March 5   | ne 5 September 5                              | December 5                             |  |  |  |
| 11           | PERIOD   | Month Day Year                                      | Month   | Day Year                               |  |  |  |
|              | COVERED  | 08/26/2024  | THROUGH 09/25                                 |  |  |  |  |
| -            |  |   |   |  |  |  |  |
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|              |  |   |   |  |  |  |  |
| GO TO PAGE 2 |  |   |   |  |  |  |  |
| Fo           | Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V4.1.0.48da51f7 |   |   |  |  |  |  |
| 10           |  |   |   | version v4.1.0.400d011/                |  |  |  |

## MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

# FORM MPAC COVER SHEET PG 2

| 12 COMMITTEE NAME  |  |  | 13 Filer ID    | (Ethics Commission Filers) |  |  |
|--|--|--|----------------|----------------------------|--|--|
| Greater Fort Worth Real Estate Council PAC 0006  |  |  |                |                            |  |  |
| 14 COMMITTEE<br>ACTIVITY   | 1. Candidates<br>(Identify by name or, if<br>applicable, classify by party.) | A. Supported   |                |                            |  |  |
| (Attach lists on plain<br>paper to complete this<br>report if necessary.)  |  | B. Opposed   |                |                            |  |  |
|  | 2. Measures  | A. Supported   |                |                            |  |  |
|  | (Describe by date and location<br>of election and nature of issue.)          |  |                |                            |  |  |
|  |  | B. Opposed   |                |                            |  |  |
|  | 3. Officeholders<br>Assisted   |  |                |                            |  |  |
|  | (Identify by name or, if applicable, classify by party.)                     |  |                |                            |  |  |
| 15 CONTRIBUTION<br>TOTALS  | PLEDGES, LOANS,<br>CONTRIBUTIONS M   | D POLITICAL CONTRIBUTIONS (OTHER THAN<br>OR GUARANTEES OF LOANS, OR<br>ADE ELECTRONICALLY)<br>qualifies for the higher itemization threshold | \$             | 0.00                       |  |  |
|  | 2. TOTAL POLITICA  | L CONTRIBUTIONS  | \$             | 0.00                       |  |  |
|  | (OTHER THAN PLEI   | DGES, LOANS, OR GUARANTEES OF LOANS)   |                | 0.00                       |  |  |
| EXPENDITURE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES<br>TOTALS   |  |  |                | 0.00                       |  |  |
|  | \$   | 0.00   |                |                            |  |  |
| CONTRIBUTION<br>BALANCE5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY<br>OF THE REPORTING PERIOD |  |  | DAY \$         | 35,018.55                  |  |  |
| OUTSTANDING<br>LOAN TOTALS   |  | AMOUNT OF ALL OUTSTANDING LOANS AS OF T<br>REPORTING PERIOD  | THE \$         | 0.00                       |  |  |
| 16 AFFIDAVIT   | •  |  | •              |                            |  |  |
|  |  | I swear, or affirm, under penalty of pe<br>true and correct and includes all inforr<br>under Title 15, Election Code.                        |                |                            |  |  |
|  |  |  |                |                            |  |  |
|  |  |  | Galbreath      |                            |  |  |
|  |  | Signature of Car   | npaign Treasu  | rer                        |  |  |
| AFFIX NOTARY STAMP / SEAL ABOVE  |  |  |                |                            |  |  |
| Sworn to and subscribed before me, by the said, this 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 offic | er administering oath      |  |  |
| Forms provided by Texas E  | thics Commission   | www.ethics.state.tx.us   |                | Version V4.1.0.48da51f7    |  |  |

### SUBTOTALS - MPAC

### FORM MPAC COVER SHEET PG 3 3 of 5

| 17 COMMI                                  | (Ethics Comm   | ission Filers) |      |                 |  |
|---|--|----------------|------|-----------------|--|
| Greate                                    | Fort Worth Real Estate Council PAC   | 00063826       |      |                 |  |
| 19 SCHEDULE SUBTOTALS<br>NAME OF SCHEDULE |  |                |      | SUBTOTAL AMOUNT |  |
| 1. X                                      | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                                    | \$             | 0.00 |                 |  |
| 2. X                                      | X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS                    |                |      | 0.00            |  |
| 3. X                                      | 3. X SCHEDULE B: PLEDGED CONTRIBUTIONS   |                |      | 0.00            |  |
| 4.  | 4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION    |                |      |                 |  |
| 5.  | SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION | \$             |      |                 |  |
| 6.  | SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG                      | SANIZATION     | \$   |                 |  |
| 7.  | SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR<br>ORGANIZATION      | 2              | \$   |                 |  |
| 8.  | SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR                      | ORGANIZATION   | \$   |                 |  |
| 9. X                                      | SCHEDULE E: LOANS  |                | \$   | 0.00            |  |
| 10. X                                     | SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION                  | S              | \$   | 0.00            |  |
| 11. X                                     | SCHEDULE F2: UNPAID INCURRED OBLIGATIONS   |                | \$   | 0.00            |  |
| 12. X                                     | SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTI                   | ONS            | \$   | 0.00            |  |
| 13. X                                     | SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD                                    |                | \$   | 0.00            |  |
| 14.                                       | SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION               | ONS            | \$   |                 |  |
| 15.                                       | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER        | RETURNED       | \$   |                 |  |
|   |  |                |      |                 |  |
|   |  |                |      |                 |  |
|   |  |                |      |                 |  |
|   |  |                |      |                 |  |

#### **PLEDGED CONTRIBUTIONS** SCHEDULE **B** 1 Total pages Schedule B: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 4/5 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Greater Fort Worth Real Estate Council PAC 00063826 4 \$ 0.00 TOTAL OF UNITEMIZED PLEDGES In-kind description 5 Date 6 Full name of pledgor out-of-state PAC (ID#: 8 Amount of 9 1 (If applicable) pledge (\$) ..... 7 Pledgor Address; City; State; Zip Code Check if travel outside of Texas. Complete Schedule T 10 Principal occupation / Job title (See Instructions) 11 Employer (See Instructions)

| LOANS   |                               |              |                  |                               |   | SCHEDU  | ile E     |
|---|-------------------------------|--------------|------------------|-------------------------------|---|---|-----------|
| The Instruction Guide explains how to complete this form. |                               |              |                  | ges Schedule E:<br>1 Rpt: 5/5 |   |   |           |
| 2 FILER NAME<br>Greater Fort Wo                           | rth Real Estate Council       | PAC          |                  |                               | <ul><li>3 Filer ID</li><li>000638</li></ul> | (Ethics Commissior<br>26  | ı Filers) |
| <sup>4</sup> TOTAL OF UN                                  | ITEMIZED LOANS                |              |                  |                               |   | \$  | 0.00      |
| 5 Date of loan  | 7 Name of lender              | out-of-state | e PAC (ID#:      |                               | )   | 9 Loan Amount (\$)  | 1         |
| 6 Is lender a financial institution?                      | 8 Lender address;             | City; Stat   | e; Zip Code      |                               |   | <ul><li><b>10</b> Interest Rate</li><li><b>11</b> Maturity Date</li></ul> |           |
|   |                               |              |                  |                               |   |   |           |
| 12 Principal occupation                                   | n / Job title (See Instructio | ns)          | 13 Employer (Se  | ee Instructions               | )   |   |           |
| 14 Description of Colla                                   | ateral                        |              | 15 Check if pers | sonal funds we                | re deposited                                | into political account (See Instructions                                  |           |
| 16 GUARANTOR<br>INFORMATION                               | 17 Name of guarantor          |              |                  |                               |   | 19 Amount Guarant   | eed (\$)  |
| not applicable  | 18 Guarantor address;         | City; State  | e; Zip Code      |                               |   |   |           |
|   |                               |              |                  |                               |   |   |           |
| 20 Principal occupatio                                    | n                             |              | 21 Employer (Se  | ee Instructions               | )   |   |           |
|   |                               |              |                  |                               |   |   |           |
|   |                               |              |                  |                               |   |   |           |
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