

# GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC  
COVER SHEET PG 1

<b>The GPAC Instruction Guide explains how to complete this form.</b>		<b>1</b> Filer ID (Ethics Commission Filers) 00067700	<b>2</b> Total pages filed: 8
<b>3</b> COMMITTEE NAME Burleson Fire Fighters Committee for Responsible Government		<b>OFFICE USE ONLY</b>	
		Date Received ELECTRONICALLY FILED 01/15/2025	
<b>4</b> COMMITTEE ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 92  Burleson, TX 76097		
	Date Hand-delivered or Date Postmarked		
	Receipt #	Amount	
	Date Processed		
		Date Imaged	
<b>5</b> CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI
	Mr.	Carlos	
		NICKNAME	LAST SUFFIX
			Martinez
<b>6</b> CAMPAIGN TREASURER STREET ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 6317 Rhoden Ave  Godley, TX 76044		
<b>7</b> CAMPAIGN TREASURER MAILING ADDRESS  <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE  TX		
<b>8</b> CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	(817)	937-0753	
<b>9</b> REPORT TYPE	<input checked="" type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Dissolution (Attach PAC-DR)
	<input type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> 10th day after campaign treasurer termination
		<input type="checkbox"/> Runoff	
<b>10</b> PERIOD COVERED	Month Day Year	THROUGH	Month Day Year
	07/01/2024		12/31/2024
<b>11</b> ELECTION	ELECTION DATE	ELECTION TYPE	
	Month Day Year 01/15/2025	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff <input type="checkbox"/> Other
		<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special

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# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**  
COVER SHEET PG 2

<b>12 COMMITTEE NAME</b> Burluson Fire Fighters Committee for Responsible Government	<b>13 Filer ID</b> (Ethics Commission Filers) 00067700
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<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

<b>15 CONTRIBUTION TOTALS</b>	<b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</b> <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 10,855.00
	<b>2. TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 10,855.00
EXPENDITURE TOTALS	<b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>	\$ 0.00
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 0.00
CONTRIBUTION BALANCE	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 8,493.81
OUTSTANDING LOAN TOTALS	<b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 0.00

**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.

Mr. Carlos Martinez  
\_\_\_\_\_  
Signature of Campaign Treasurer

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 administering oath      Printed name of officer administering oath      Title of officer administering oath

# SUBTOTALS - GPAC

<b>17 COMMITTEE NAME</b> Burluson Fire Fighters Committee for Responsible Government		<b>18 Filer ID</b> (Ethics Commission Filers) 00067700
<b>19 SCHEDULE SUBTOTALS</b>		<b>SUBTOTAL AMOUNT</b>
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 10,855.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0.00
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 0.00
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 0.00
11.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
12.	<input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$ 0.00
13.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
14.	<input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 9,319.09
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# PLEGGED CONTRIBUTIONS

# SCHEDULE B

**The Instruction Guide explains how to complete this form.**

**1** Total pages Schedule B:  
Sch: 1/1 Rpt: 4/8

**2** FILER NAME  
Burleson Fire Fighters Committee for Responsible Government

**3** Filer ID (Ethics Commission Filers)  
00067700

**4** TOTAL OF UNITEMIZED PLEDGES

**\$** 0.00

**5** Date

**6** Full name of pledgor  out-of-state PAC (ID#: \_\_\_\_\_)

**8** Amount of  
pledge (\$)

**9** In-kind description  
(If applicable)

**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

# SCHEDULE E

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule E: Sch: 1/1 Rpt: 5/8
<b>2</b> FILER NAME Burleson Fire Fighters Committee for Responsible Government		<b>3</b> Filer ID (Ethics Commission Filers) 00067700
<b>4</b> TOTAL OF UNITEMIZED LOANS		<b>\$</b> 0.00
<b>5</b> Date of loan	<b>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	<b>9</b> Loan Amount (\$)
<b>6</b> Is lender a financial institution?	<b>8</b> Lender address; City; State; Zip Code	<b>10</b> Interest Rate
		<b>11</b> Maturity Date
<b>12</b> Principal occupation / Job title (See Instructions)		<b>13</b> Employer (See Instructions)
<b>14</b> Description of Collateral <input type="checkbox"/> None		<b>15</b> Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
<b>16</b> GUARANTOR INFORMATION <input type="checkbox"/> not applicable	<b>17</b> Name of guarantor	<b>19</b> Amount Guaranteed (\$)
	<b>18</b> Guarantor address; City; State; Zip Code	
<b>20</b> Principal occupation		<b>21</b> Employer (See Instructions)

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 1/3 Rpt: 6/8	2 FILER NAME Burleson Fire Fighters Committee for Responsible	3 Filer ID (Ethics Commission Filers) 00067700
4 Date 07/22/2024	5 Payee name AMAZON	
6 Amount (\$)  19.46 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 410 Terry N  Seattle, WA 98109	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	(b) Description (See instructions regarding type of information required.) Office Supplies
Date 10/15/2024	Payee name Burleson Brunch House	
Amount (\$)  71.50 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 2650 SW Wilshire  Burleson, TX 76028	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.) Meeting
Date 11/15/2024	Payee name Chappell, Ryan	
Amount (\$)  3,678.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 245 Lakewood  Burleson, TX 76028	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Loan Repayment/Reimbursement	(b) Description (See instructions regarding type of information required.) Acct Adjustment
Date 09/03/2024	Payee name Hampton Inn	
Amount (\$)  1,819.06 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 670 Summer St  Boston, MA 02210	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Travel Out of District	(b) Description (See instructions regarding type of information required.) Boston Convention

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 2/3 Rpt: 7/8	2 FILER NAME Burluson Fire Fighters Committee for Responsible	3 Filer ID (Ethics Commission Filers) 00067700
4 Date 07/10/2024	5 Payee name Hard Rock Hotel	
6 Amount (\$)  305.28 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 777 W Cherokee  Catoosa, OK 74015	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See instructions for examples of acceptable categories) Travel Out of District	(b) Description (See instructions regarding type of information required.) Hard Rock Hotel
Date 07/03/2024	Payee name Martinez, Carlos	
Amount (\$)  1,011.25 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 6317 Rhoden Ave  Godley, TX 76044	
<b>PURPOSE OF EXPENDITURE</b>	(a) Category (See instructions for examples of acceptable categories) Travel Out of District	(b) Description (See instructions regarding type of information required.) Hard Rock Tulsa meeting
Date 08/14/2024	Payee name Martinez, Carlos	
Amount (\$)  245.50 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 6317 Rhoden Ave  Godley, TX 76044	
<b>PURPOSE OF EXPENDITURE</b>	(a) Category (See instructions for examples of acceptable categories) Loan Repayment/Reimbursement	(b) Description (See instructions regarding type of information required.) Reimbursement
Date 09/03/2024	Payee name Martinez, Carlos	
Amount (\$)  1,825.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 6317 Rhoden Ave  Godley, TX 76044	
<b>PURPOSE OF EXPENDITURE</b>	(a) Category (See instructions for examples of acceptable categories) Travel Out of District	(b) Description (See instructions regarding type of information required.) Boston Convention

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 3/3 Rpt: 8/8	2 FILER NAME Burleson Fire Fighters Committee for Responsible	3 Filer ID (Ethics Commission Filers) 00067700
4 Date 08/20/2024	5 Payee name Torque	
6 Amount (\$) 22.37 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 2795 SW Wilshire Burleson, TX 76028	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.) Meeting
Date 10/07/2024	Payee name Wild Pitch	
Amount (\$) 321.67 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 4701 Citylake Blvd E Fort Worth, TX 76132	
<b>PURPOSE OF EXPENDITURE</b>	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.) Meeting