#### 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) 00016924 3 COMMITTEE NAME **OFFICE USE ONLY** Kelly Hart & Hallman PAC Date Received **ELECTRONICALLY FILED** 04/29/2025 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 201 Main Street, Suite 2500 Fort Worth, TX 76102 Date Hand-delivered or Date Postmarked CAMPAIGN MS / MRS / MR **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** 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 March 5 September 5 December 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 03/26/2025 04/25/2025

### MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

# FORM MPAC COVER SHEET PG 2

2 COMMITTEE NAME			13 Filer ID (Ethics Commission Filers)		
Kelly Hart & Hallman PAC			00016924		
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Mattie Parker City of Fort Wor	th Mayor		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	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 X check here if this report	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 PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	5,000.00	
EXPENDITURE TOTALS	3. TOTAL UNITEMIZEI	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 \$	12,161.71	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		HE \$	0.00	
16 AFFIDAVIT	<u>'</u>		·		
		I swear, or affirm, under penalty of per true and correct and includes all inforr under Title 15, Election Code.	rjury, that the nation require	accompanying report is d to be reported by me	
		Mr. Dee 、	J. Kelly Jr.		
		Signature of Car	npaign Treas	urer	
AFFIX NOTAR	Y STAMP / SEAL ABOVE				
		, th	is the	day	
of	, 20, to certify	which, witness my hand and seal of office.			
Signature of officer a	dministering oath	Printed name of officer administering oath	Title of offi	cer administering oath	

#### **SUBTOTALS - MPAC**

# FORM MPAC COVER SHEET PG 3

					3 of 5
17 CO	MMITTE	E NAME	18 Filer ID	(Ethics Commission	Filers)
l	Kelly Hart & Hallman PAC 00016924		(Lunes Commission	1 11010)	
19 SCI	HEDIIII	SURTOTALS		T	
19 SCHEDULE SUBTOTALS  NAME OF SCHEDULE			SUBTOTAL AN	MOUNT	
1.	1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	5,000.00	
2.	2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$		
3.	3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$		
4.	4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION		\$		
5.	5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION		\$		
6.	6. SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$		
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.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	5,000.00
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	ONS	\$	
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1				
The Instruction Guide explains how to complete this form.				1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/5		
FILER NAME  Kelly Hart & Hallman PAC					Filers)	
Date 04/15/2025	<ul> <li>Full name of contributor</li></ul>	:)	7		\$5,000.00	
	Fort Worth, TX 76102					
Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	s)			
	The Instru FILER NAME Kelly Hart & Date 04/15/2025	The Instruction Guide explains how to complete this  FILER NAME  Kelly Hart & Hallman PAC  Date  04/15/2025  5 Full name of contributor out-of-state PAC (ID# Kelly Hart & Hallman LLP  6 Contributor address; City; State; Zip Code	FILER NAME Kelly Hart & Hallman PAC  Date 04/15/2025  5 Full name of contributor out-of-state PAC (ID#:) Kelly Hart & Hallman LLP  6 Contributor address; City; State; Zip Code  Fort Worth, TX 76102	The Instruction Guide explains how to complete this form.  FILER NAME Kelly Hart & Hallman PAC  Date 04/15/2025  5 Full name of contributor out-of-state PAC (ID#:) Kelly Hart & Hallman LLP 6 Contributor address; City; State; Zip Code  Fort Worth, TX 76102	The Instruction Guide explains how to complete this form.  FILER NAME Kelly Hart & Hallman PAC  Date 04/15/2025  Kelly Hart & Hallman LLP  6 Contributor address; City; State; Zip Code  1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/5  3 Filer ID (Ethics Commission 00016924  7 Amount of Contribution (\$)	

### 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 B Candidate/Officeholder/Politica Credit Card Payment	y - Gift/Awards/Memorials Expense Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above)  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: 5/5	Kelly Hart & Hallman PAC 00016924
4 Date	5 Payee name
04/15/2025	Mattie Parker Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$5,000.00	4455 Camp Bowie Blvd
	#114-127
Expenditure from corporate funds	Fort Worth, TX 76107
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXI ENDITORE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
	Political contribution
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H