GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC
COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers): 00067700

2 Total pages filed: 6

OFFICE USE ONLY

Date Received: ELECTRONICALLY FILED 07/15/2025

Date Hand-delivered or Date Postmarked:

Receipt #:

Amount:

Date Processed:

Date Imaged:

3 COMMITTEE NAME
Burleson Fire Fighters Committee for Responsible Government

4 COMMITTEE ADDRESS
☐ Change of Address

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
P.O. Box 92
Burleson, TX 76097

5 CAMPAIGN TREASURER NAME

MS / MRS / MR: Mr.
FIRST: Carlos
MI:
NICKNAME:
LAST: Martinez
SUFFIX:

6 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

7 CAMPAIGN TREASURER MAILING ADDRESS
☐ Change of Address

STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
TX

8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION
(817) 937-0753

9 REPORT TYPE

☐ January 15
☒ July 15
☐ 30th day before election
☐ 8th day before election
☐ Runoff
☐ Dissolution (Attach PAC-DR)
☐ 10th day after campaign treasurer termination

10 PERIOD COVERED

Month Day Year: 01/01/2025
THROUGH
Month Day Year: 06/30/2025

11 ELECTION

ELECTION DATE
Month Day Year: 07/15/2025

ELECTION TYPE
☐ Primary
☒ General
☐ Runoff
☐ Special
☐ Other

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GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC
COVER SHEET PG 2

12 COMMITTEE NAME	**13** Filer ID (Ethics Commission Filers)
Burleson Fire Fighters Committee for Responsible Government	00067700

14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)		
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
		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	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) ☐ check here if this report qualifies for the higher itemization threshold	$ 10,855.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 10,855.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	$ 0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 8,493.81
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 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

FORM GPAC
COVER SHEET PG 3

17 COMMITTEE NAME	18 Filer ID (Ethics Commission Filers)
Burleson Fire Fighters Committee for Responsible Government	00067700

19 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	$ 10,855.00
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	$ 0.00
3.	X	SCHEDULE B: PLEDGED CONTRIBUTIONS	$ 0.00
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	$
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	$
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.	X	SCHEDULE E: LOANS	$ 0.00
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	$ 0.00
11.	X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	$ 0.00
12.	X	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	$ 0.00
13.	X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	$ 0.00
14.	X	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	$ 867.73
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	$

PLEDGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.	**1** Total pages Schedule B: Sch: 1/1 Rpt: 4/6
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#:_____) **7** Pledgor Address; City; State; Zip Code	**8** Amount of pledge ($)	**9** In-kind description (If applicable)
		☐ Check if travel outside of Texas. Complete Schedule T.	

10 Principal occupation / Job title (See Instructions)	**11** Employer (See Instructions)

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:
Sch: 1/1 Rpt: 5/6

2 FILER NAME
Burleson Fire Fighters Committee for Responsible Government

3 Filer ID (Ethics Commission Filers)
00067700

4 TOTAL OF UNITEMIZED LOANS **$** 0.00

5 Date of loan

7 Name of lender ☐ out-of-state PAC (ID#:_____)

9 Loan Amount ($)

6 Is lender a financial institution?

8 Lender address; City; State; Zip Code

10 Interest Rate

11 Maturity Date

12 Principal occupation / Job title (See Instructions)

13 Employer (See Instructions)

14 Description of Collateral
☐ None

15 Check if personal funds were deposited into political account (See Instructions)
☐

16 GUARANTOR INFORMATION
☐ not applicable

17 Name of guarantor

18 Guarantor address; City; State; Zip Code

19 Amount Guaranteed ($)

20 Principal occupation

21 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: 1/1 Rpt: 6/6	**2** FILER NAME Burleson Fire Fighters Committee for Responsible	**3** Filer ID (Ethics Commission Filers) 00067700
4 Date 01/23/2025	**5** Payee name AMAZON	
6 Amount ($) 9.73 ☐ Expenditure from corporate funds	**7** Payee Address; City; State; Zip 410 Terry N Seattle, WA 98109	
8 **PURPOSE OF EXPENDITURE**	**(a)** Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	**(b)** Description (See instructions regarding type of information required.) Supplies
Date 06/16/2025	Payee name Jones, Mike	
Amount ($) 858.00 ☐ Expenditure from corporate funds	Payee Address; City; State; Zip 608 Joy Ct. 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.) Reimbursement of Dinner Expense for Burleson PAC