

**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) 00087864	2 Total pages filed: 10
3 COMMITTEE NAME Coalition For the Fort			<b>OFFICE USE ONLY</b> Date Received ELECTRONICALLY FILED 04/25/2025 <b>CSO REC'D APR 29 '25 AM 8:37</b> Date Hand-delivered or Date Postmarked Receipt #      Amount Date Processed Date Imaged
4 COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 3808 Trail Lake Drive  Fort Worth, TX 76109		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR      FIRST      MI Mr.      Stephen      MI ----- NICKNAME      LAST      SUFFIX Luskey		
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE PO Box 471353  Fort Worth, TX 71647		
7 CAMPAIGN TREASURER MAILING ADDRESS	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 101652  Fort Worth, TX 76185		
8 CAMPAIGN TREASURER PHONE	AREA CODE      PHONE NUMBER      EXTENSION (817) 929-7997		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input checked="" type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff		
10 PERIOD COVERED	Month      Day      Year      THROUGH      Month      Day      Year 03/25/2025      04/23/2025		
11 ELECTION	ELECTION DATE Month      Day      Year 05/03/2025	ELECTION TYPE <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> Coalition For the Fort		<b>13 Filer ID</b> (Ethics Commission Filers) 00087864
<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 Michael Moore Fort Worth City Council, District 5
		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
	<b>2. TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 27,342.01
<b>EXPENDITURE TOTALS</b>	<b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>	\$ 0.45
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 37,578.33
<b>CONTRIBUTION BALANCE</b>	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 146,070.15
<b>OUTSTANDING LOAN TOTALS</b>	<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. Stephen Luskey  
\_\_\_\_\_  
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**  
3 of 10

<b>17 COMMITTEE NAME</b> Coalition For the Fort		<b>18 Filer ID</b> (Ethics Commission Filers) 00087864
<b>19 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 23,390.01
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 3,952.00
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
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 type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 37,578.33
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
Sch: 1/3 Rpt: 4/10

2 FILER NAME

Coalition For the Fort

3 Filer ID (Ethics Commission Filers)  
00087864

4 Date

04/19/2025

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Baggs Kamacioglu, Jennifer

6 Contributor address; City; State; Zip Code

3105 Preston Hollow Rd

Fort Worth, TX 76109

7 Amount of Contribution (\$)

\$104.48

8 Principal occupation / Job title (See Instructions)

Banker

9 Employer (See Instructions)

Texas Capital

Date

03/25/2025

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Bennett, Rhett

Contributor address; City; State; Zip Code

425 Houston Street #400

Fort Worth, TX 76102

Amount of Contribution (\$)

\$1,200.00

Principal occupation / Job title (See Instructions)

CEO

Employer (See Instructions)

Black Mountain

Date

03/28/2025

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Blair, Kadee

Contributor address; City; State; Zip Code

4109 Bellaire Dr S

Fort Worth, TX 76109

Amount of Contribution (\$)

\$104.48

Principal occupation / Job title (See Instructions)

Business Development

Employer (See Instructions)

CORE

Date

03/29/2025

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Brauer, Stephen

Contributor address; City; State; Zip Code

4455 Camp Bowie Blvd

Ste 114

Fort Worth, TX 76107

Amount of Contribution (\$)

\$5,000.00

Principal occupation / Job title (See Instructions)

Sales

Employer (See Instructions)

Self

Date

04/15/2025

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Brock, Jeff

Contributor address; City; State; Zip Code

2720 Simondale Drive

Fort Worth, TX 76109

Amount of Contribution (\$)

\$5,208.65

Principal occupation / Job title (See Instructions)

Oil and Gas

Employer (See Instructions)

Self

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
Sch: 2/3 Rpt: 5/10

2 FILER NAME

Coalition For the Fort

3 Filer ID (Ethics Commission Filers)  
00087864

4 Date

04/17/2025

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Byrd, Lance

6 Contributor address; City; State; Zip Code

413 Crestwood Dr

Fort Worth, TX 76107

7 Amount of Contribution (\$)

\$5,208.65

8 Principal occupation / Job title (See Instructions)

Managing Partner

9 Employer (See Instructions)

Byrd Family Ventures

Date

04/02/2025

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Conger, Cooper

Contributor address; City; State; Zip Code

PO Box 101654

Fort Worth, TX 76185

Amount of Contribution (\$)

\$104.48

Principal occupation / Job title (See Instructions)

Owner

Employer (See Instructions)

NewPad Building Co

Date

04/13/2025

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Earwood, Hayley

Contributor address; City; State; Zip Code

4108 Ranier Court

Fort Worth, TX 76109

Amount of Contribution (\$)

\$104.48

Principal occupation / Job title (See Instructions)

Homemaker

Employer (See Instructions)

Homemaker

Date

04/02/2025

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Gregg, Joshua

Contributor address; City; State; Zip Code

921 Hillcrest Street

Fort Worth, TX 76107

Amount of Contribution (\$)

\$5,000.00

Principal occupation / Job title (See Instructions)

CFO

Employer (See Instructions)

Double Eagle Energy

Date

03/28/2025

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Roll, Elizabeth

Contributor address; City; State; Zip Code

4667 Sidonia Ct

Fort Worth, TX 76126

Amount of Contribution (\$)

\$1,250.31

Principal occupation / Job title (See Instructions)

Finance

Employer (See Instructions)

Self

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/3 Rpt: 6/10
2 FILER NAME Coalition For the Fort		3 Filer ID (Ethics Commission Filers) 00087864
4 Date 03/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheffield, Susan	7 Amount of Contribution (\$) \$104.48
	6 Contributor address; City; State; Zip Code 6201 Turnberry Dr Fort Worth, TX 76132	
8 Principal occupation / Job title (See Instructions) CFO		9 Employer (See Instructions) GM Financial

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2:  
Sch: 1/1 Rpt: 7/10

2 FILER NAME  
Coalition For the Fort

3 Filer ID (Ethics Commission Filers)  
00087864

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$

5 Date  
03/27/2025

6 Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Earwood, Hayley

7 Contributor address; City; State; Zip Code  
4108 Ranier Court

Fort Worth, TX 76109

8 Amount of contribution (\$)  
\$3,952.00

9 In-kind contribution description  
Food, Beverage and Venue for PAC Event

☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)  
Homemaker

11 Employer (FOR NON-JUDICIAL) (See instructions)  
Homemaker

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)



# 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  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
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: Sch: 1/3 Rpt: 8/10		2 FILER NAME Coalition For the Fort		3 Filer ID (Ethics Commission Filers) 00087864	
4 Date 03/25/2025		5 Payee name Anedot, Inc.			
6 Amount (\$) \$938.91  <input type="checkbox"/> Expenditure from corporate funds		7 Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fees for Online PAC Contributions: Mar 2 5-Apr 19	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 04/23/2025		Payee name Catalyst Advisors Group LLC			
Amount (\$) \$810.68  <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code 1108 Lavaca St 110-506  Austin, TX 78701			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Design and Production of Campaign Signs in Support of Michael Moore, Fort Worth City Council,	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 04/23/2025		Payee name Catalyst Advisors Group LLC			
Amount (\$) \$750.00  <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code 1108 Lavaca St 110-506  Austin, TX 78701			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Installation of Campaign Signs in Support of Michael Moore, Fort Worth City Council, Dist 5	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	



# 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  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
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: Sch: 2/3 Rpt: 9/10		2 FILER NAME Coalition For the Fort		3 Filer ID (Ethics Commission Filers) 00087864	
4 Date 04/23/2025		5 Payee name Catalyst Advisors Group LLC			
6 Amount (\$) \$3,000.00  <input type="checkbox"/> Expenditure from corporate funds		7 Payee address; City; State; Zip Code 1108 Lavaca St 110-506  Austin, TX 78701			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Design and Placement of Digital Ads in Support of Michael Moore, Fort Worth City Council, Dist 5	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 04/23/2025		Payee name Catalyst Advisors Group LLC			
Amount (\$) \$4,824.87  <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code 1108 Lavaca St 110-506  Austin, TX 78701			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Design, Production and Postage for Mails Ads in Support of Moore, Fort Worth City Council, Dist 5	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 04/23/2025		Payee name Catalyst Advisors Group LLC			
Amount (\$) \$12,253.42  <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code 1108 Lavaca St 110-506  Austin, TX 78701			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Design, Production and Postage for Mails Ads in Support of Moore, Fort Worth City Council, Dist 5	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# 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  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
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: Sch: 3/3 Rpt: 10/10	2 FILER NAME Coalition For the Fort	3 Filer ID (Ethics Commission Filers) 00087864
4 Date 04/04/2025	5 Payee name Michael Moore Campaign	
6 Amount (\$) \$15,000.00  <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1412 Lindsey St  Fort Worth, TX 76105	
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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Candidate
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought  Office held