

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 5																		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Mr. John P. NICKNAME LAST SUFFIX Keating	OFFICE USE ONLY Date Received <div style="border: 1px solid black; padding: 5px; display: inline-block;"> RECEIVED JUL 07 2023 <i>C 1:30pm jld</i> CITY SECRETARY'S OFFICE </div> Date Hand-delivered or Date Postmarked <table style="width:100%; border: 1px solid black;"> <tr> <td style="width: 50%;">Receipt #</td> <td style="width: 50%;">Amount \$</td> </tr> <tr> <td colspan="2">Date Processed</td> </tr> <tr> <td colspan="2">Date Imaged</td> </tr> </table>		Receipt #	Amount \$	Date Processed		Date Imaged													
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Date Imaged																					
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <div style="background-color: black; height: 20px; width: 100%;"></div>																				
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION <div style="background-color: black; height: 20px; width: 100%;"></div>																				
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mrs. Terri NICKNAME LAST SUFFIX Patterson (McElhaney)																				
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 3541 Greenbrier Drive, Frisco, TX 75033																				
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (214) 632-2400																				
9 REPORT TYPE	<table style="width:100%;"> <tr> <td><input type="checkbox"/> January 15</td> <td><input type="checkbox"/> 30th day before election</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)</td> </tr> <tr> <td><input checked="" type="checkbox"/> July 15</td> <td><input type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> Exceeded Modified Reporting Limit</td> <td><input type="checkbox"/> Final Report (Attach C/OH - FR)</td> </tr> </table>			<input type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)	<input checked="" type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded Modified Reporting Limit	<input type="checkbox"/> Final Report (Attach C/OH - FR)										
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10 PERIOD COVERED	<table style="width:100%;"> <tr> <td>Month</td><td>Day</td><td>Year</td><td></td><td>Month</td><td>Day</td><td>Year</td> </tr> <tr> <td>1</td><td>1</td><td>23</td><td>THROUGH</td><td>6</td><td>30</td><td>23</td> </tr> </table>			Month	Day	Year		Month	Day	Year	1	1	23	THROUGH	6	30	23				
Month	Day	Year		Month	Day	Year															
1	1	23	THROUGH	6	30	23															
11 ELECTION	<table style="width:100%;"> <tr> <td colspan="3">ELECTION DATE</td> <td colspan="3">ELECTION TYPE</td> </tr> <tr> <td>Month</td><td>Day</td><td>Year</td> <td>Primary</td><td>Runoff</td><td>Other Description</td> </tr> <tr> <td>5</td><td>1</td><td>21</td> <td><input checked="" type="checkbox"/> General</td><td><input type="checkbox"/> Special</td><td></td> </tr> </table>			ELECTION DATE			ELECTION TYPE			Month	Day	Year	Primary	Runoff	Other Description	5	1	21	<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special	
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Month	Day	Year	Primary	Runoff	Other Description																
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12 OFFICE	OFFICE HELD (if any) Frisco City Council, Place 1	13 OFFICE SOUGHT (if known) Frisco City Council, Place 1																			
14 NOTICE FROM POLITICAL COMMITTEE(S) Additional Pages	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.																				
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GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**FORM C/OH
COVER SHEET PG 2**

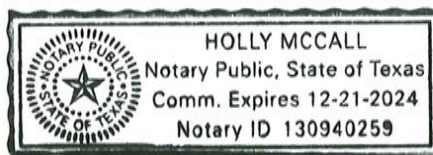
15 C/OH NAME John P. Keating		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 4,381.38
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 16,821.47
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

18 SIGNATURE 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.

John P. Keating
Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP/SEAL

Sworn to and subscribed before me by John Keating this the 7th day of July, 2023, to certify which, witness my hand and seal of office.

Holly McCall Holly McCall public notary
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.
(street) (city) (state) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
(month) (year)

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3****19 FILER NAME**

John P. Keating

20 Filer ID (Ethics Commission Filers)**21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE****SUBTOTAL
AMOUNT**

1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 0.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0.00
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
4.	SCHEDULE E: LOANS	\$ 0.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 4,381.38
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 0.00
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0.00
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0.00

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

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: 2		2 FILER NAME John Keating		3 Filer ID (Ethics Commission Filers)	
4 Date 05/04/2023		5 Payee name Fast Forward Valet			
6 Amount (\$) 250.00		7 Payee address; City; State; Zip Code 3420 Sedona Lane, Plano, TX 75025			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) In-Kind Donation Made By Officeholder		(b) Description Event Expense		
	(c) Check if travel outside of Texas. Complete Schedule T. Check If Austin, TX, officeholder living expense				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Jeff Cheney		Office sought Frisco Mayor	Office held Frisco Mayor
Date 05/04/2023		Payee name Cindy Horne, Battlefield Consulting			
Amount (\$) 500.00		Payee address; City; State; Zip Code 621 Liechty Court, Rockwall, TX 75032			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense		Description Consulting Expense		
	Check if travel outside of Texas. Complete Schedule T. Check If Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name John P. Keating		Office sought Frisco City Council, Place 1	Office held Frisco City Council, Place 1
Date 05/04/2023		Payee name At Your Service Catering			
Amount (\$) 1,581.38		Payee address; City; State; Zip Code 3013 Piccadilly Court, Garland, TX 75044			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) In-Kind Donation Made By Officeholder		Description Event Expense		
	Check if travel outside of Texas. Complete Schedule T. Check If Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Jeff Cheney		Office sought Frisco Mayor	Office held Frisco Mayor

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
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Travel In District
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Other (enter a category not listed above)

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1 Total pages Schedule F1: 2		2 FILER NAME John P. Keating		3 Filer ID (Ethics Commission Filers)	
4 Date 05/04/2023		5 Payee name Teacher By Day Event Services			
6 Amount (\$) 550.00		7 Payee address; City; State; Zip Code 8107 Cherry Springs Court, Frisco, TX 75036			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) In-Kind Donation Made By Officeholder		(b) Description Event Expense		
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Jeff Cheney		Office sought Frisco Mayor	Office held Frisco Mayor
Date 05/04/2023		Payee name Heather Sargent, Battlefield Consulting			
Amount (\$) 500.00		Payee address; City; State; Zip Code 3905 Poplar Point Drive, Rockwall, TX 75032			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense		Description Consulting Expense		
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name John P. Keating		Office sought Frisco City Council, Place 1	Office held Frisco City Council, Place 1
Date 04/24/2023		Payee name Jeff Cheney			
Amount (\$) 1,000.00		Payee address; City; State; Zip Code 3612 Silver Oaks Lane, Frisco, TX 75033			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation Made By Officeholder		Description Campaign Contribution		
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Jeff Cheney		Office sought Frisco Mayor	Office held Frisco Mayor

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