## MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

## FORM MPAC **COVER SHEET PG 1**

| The MPAC Instruction Guide explains how to complete this form.   1 Filer ID   (Ethics Commission Filers) 00038883 |                           |                                   |               |                        |           | 2 Total pages filed:<br>3              |  |  |
|---|---------------------------|-----------------------------------|---------------|------------------------|-----------|--|--|--|
| 3 COMMITTEE NAME  |                           |                                   |               |                        |           | OFFICE USE ONLY                        |  |  |
|   | Mount Vernon Edu          | cators Assn.                      |               |                        |           |  |  |  |
|   |                           |                                   | Date Received |                        |           |  |  |  |
|   |                           |                                   |               |                        |           | ELECTRONICALLY FILED                   |  |  |
|   |                           |                                   |               |                        |           | 01/26/2024                             |  |  |
| 4   |                           | ADDRESS / PO BOX; APT / SUITE #;  | CI            | TY; STATE; ZIP         |           |  |  |  |
|   | ADDRESS                   | 117 Saint Andrews CT              |               |                        |           |  |  |  |
|   | <b>—</b>                  |                                   |               |                        |           |  |  |  |
|   | Change of Address         | Mount Pleasant , TX 75455         |               |                        |           | Date Hand-delivered or Date Postmarked |  |  |
| 5   | CAMPAIGN                  | MS / MRS / MR FIRST               |               |                        | MI        |  |  |  |
|   | TREASURER<br>NAME         | Mrs. Linda R.                     |               |                        |           | Receipt # Amount                       |  |  |
|   |                           |                                   |               |                        |           |  |  |  |
|   |                           |                                   |               |                        |           | Date Processed                         |  |  |
|   |                           | NICKNAME LAST                     |               |                        | SUFFIX    |  |  |  |
|   |                           | Marshall                          |               |                        |           | Date Imaged                            |  |  |
|   |                           |                                   |               |                        |           |  |  |  |
| 6   | CAMPAIGN<br>TREASURER     | STREET ADDRESS (NO PO BOX PLEASE) |               | APT / SUITE #; CIT     | Y; STA    | ATE; ZIP CODE                          |  |  |
|   | STREET                    | 117 Saint Andrews CT              |               |                        |           |  |  |  |
|   | ADDRESS                   |                                   |               |                        |           |  |  |  |
|   | (Residence or Business)   | Mount Pleasant , TX 75455         |               |                        |           |  |  |  |
| 7   | CAMPAIGN                  | STREET ADDRESS OR PO BOX;         |               | APT / SUITE #; CI      | Y' ST     | ATE; ZIP CODE                          |  |  |
| Ľ   | TREASURER                 | 117 St. Andrews Ct.               |               | ,, con <u></u> , c     | .,        | ,                                      |  |  |
|   | MAILING<br>ADDRESS        |                                   |               |                        |           |  |  |  |
|   |                           |                                   |               |                        |           |  |  |  |
|   |                           | Mt. Pleasant, TX 75455            |               |                        |           |  |  |  |
| 8   | CAMPAIGN<br>TREASURER     | AREA CODE PHONE NUMBER            |               | EXTENSION              |           |  |  |  |
|   | PHONE                     | (903) 445-3745                    |               |                        |           |  |  |  |
|   |                           | . ,                               |               |                        |           |  |  |  |
| 9   | REPORT TYPE               | X Monthly                         | Г             | 10th day after campaig | jn Г      | Dissolution (Attach PAC-DR)            |  |  |
|   |                           | X Montally                        | L             | treasurer termination  | L         |  |  |  |
| 10  | ) MONTHLY                 |                                   |               |                        |           |  |  |  |
|   | REPORT FILING<br>DEADLINE | January 5 Apri                    | 15            | July 5                 |           | October 5                              |  |  |
|   | DERBEINE                  | X February 5 May                  | 5             | Augu                   | st 5      | November 5                             |  |  |
|   |                           |                                   |               |                        | web e v E |  |  |  |
|   |                           | March 5 Jun                       | 5 5           |                        | mber 5    | December 5                             |  |  |
| 11  |                           | Month Day Year                    |               |                        | Month     | Day Year                               |  |  |
|   | COVERED                   | 12/26/2023                        | IHF           | OUGH                   | 01/25/2   | 2024                                   |  |  |
| ⊢   |                           |                                   |               |                        |           |  |  |  |
|   |                           |                                   |               |                        |           |  |  |  |
|   |                           |                                   |               |                        |           |  |  |  |
|   |                           |                                   |               |                        |           |  |  |  |
|   |                           |                                   |               |                        |           |  |  |  |
|   |                           |                                   |               |                        |           |  |  |  |
| I   |                           |                                   |               |                        |           |  |  |  |
|   |                           |                                   |               |                        |           |  |  |  |
|   |                           |                                   |               |                        |           |  |  |  |
|   | GO TO PAGE 2              |                                   |               |                        |           |  |  |  |
|   |                           |                                   |               |                        |           |  |  |  |
| Fo  | rms provided by Tex       | as Ethics Commission www.e        | thic          | s.state.tx.us          |           | Version V3.5.1.9000c471                |  |  |

## MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

## FORM MPAC COVER SHEET PG 2

| 12 COMMITTEE NAME   |   |  | 13 Filer ID     | (Ethics Commission Filers) |  |  |
|---|---|--|-----------------|----------------------------|--|--|
| Mount Vernon Educator   | 00038883  |  |                 |                            |  |  |
| 14 COMMITTEE<br>ACTIVITY  | 1. Candidates<br>(Identify by name or, if<br>applicable, classify by party.)                | A. Supported   |                 |                            |  |  |
| (Attach lists on plain<br>paper to complete this<br>report if necessary.) |   | B. Opposed   |                 |                            |  |  |
|   | 2. Measures<br>(Describe by date and location<br>of election and nature of issue.)          | A. Supported   |                 |                            |  |  |
|   |   | B. Opposed   |                 |                            |  |  |
|   | 3. Officeholders<br>Assisted<br>(Identify by name or, if<br>applicable, classify by party.) |  |                 |                            |  |  |
| 15 CONTRIBUTION<br>TOTALS   | PLEDGES, LOANS, CONTRIBUTIONS M   | D POLITICAL CONTRIBUTIONS (OTHER THAN<br>OR GUARANTEES OF LOANS, OR<br>ADE ELECTRONICALLY)<br>qualifies for the higher itemization threshold | \$              | 0.00                       |  |  |
|   | 2. TOTAL POLITICA<br>(OTHER THAN PLEI   | L CONTRIBUTIONS<br>DGES, LOANS, OR GUARANTEES OF LOANS)  | \$              | 0.00                       |  |  |
| EXPENDITURE<br>TOTALS   |   |  |                 | 0.00                       |  |  |
|   | 4. TOTAL POLITICA   | L EXPENDITURES   | \$              | 0.00                       |  |  |
| CONTRIBUTION<br>BALANCE   | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY<br>OF THE REPORTING PERIOD   |  | DAY \$          | 80.49                      |  |  |
| OUTSTANDING<br>LOAN TOTALS  |   | AMOUNT OF ALL OUTSTANDING LOANS AS OF 1<br>REPORTING PERIOD  | THE \$          | 0.00                       |  |  |
| 16 AFFIDAVIT  | •   |  | · · · · ·       |                            |  |  |
|   |   | I swear, or affirm, under penalty of pe<br>true and correct and includes all inform<br>under Title 15, Election Code.                        |                 |                            |  |  |
|   |   | Mrs. Linda   | R. Marshall     |                            |  |  |
|   |   | Signature of Ca  | mpaign Treasur  | er                         |  |  |
| AFFIX NOTARY STAMP / SEAL ABOVE   |   |  |                 |                            |  |  |
| Sworn to and subscribed   | nis the   | day  |                 |                            |  |  |
|   |   | which, witness my hand and seal of office.   |                 |                            |  |  |
|   |   |  |                 |                            |  |  |
| Signature of officer ad   | ministering oath  | Printed name of officer administering oath   | Title of office | er administering oath      |  |  |
| Forms provided by Texas E   | thics Commission  | www.ethics.state.tx.us   |                 | Version V3.5.1.9000c471    |  |  |

|             | FORM MPAC                  |
|-------------|----------------------------|
|             | COVER SHEET PG 3<br>3 of 3 |
| 18 Filer ID | (Ethics Commission Filers) |
| 0003888     | 3                          |

| 17 COMMITTEE NAME  | (Ethics Commission Filers) |    |
|--|----------------------------|----|
| Mount Vernon Educators Assn.   | 00038883                   |    |
| 19 SCHEDULE SUBTOTALS  | SUBTOTAL AMOUNT            |    |
| NAME OF SCHEDULE   |                            |    |
| 1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                                   | \$                         |    |
| 2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS                     | \$                         |    |
| 3. SCHEDULE B: PLEDGED CONTRIBUTIONS   | \$                         |    |
| 4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR<br>ORGANIZATION   | \$                         |    |
| 5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION              | \$                         |    |
| 6. SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGA                    | \$                         |    |
| 7. SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION        | \$                         |    |
| 8. SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR O                   | \$                         |    |
| 9. SCHEDULE E: LOANS   | \$                         |    |
| 10. SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS               | \$                         |    |
| 11. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS                                       | \$                         |    |
| 12. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIO                | INS                        | \$ |
| 13. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD                                  | \$                         |    |
| 14. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO              | \$                         |    |
| 15. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS R<br>TO FILER | RETURNED                   | \$ |
|  |                            |    |

**SUBTOTALS - MPAC**