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) 00053158 3 COMMITTEE NAME **OFFICE USE ONLY** Friends of UNT Political Action Committee Date Received **ELECTRONICALLY FILED** 04/05/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** P.O. Box 803272 Change of Address Dallas, TX 75380-3272 Date Hand-delivered or Date Postmarked **CAMPAIGN** MS / MRS / MR **FIRST** MI **TREASURER** Receipt # Amount Mr. G. Brint NAME Date Processed **NICKNAME** LAST **SUFFIX** Date Imaged Ryan CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE TREASURER Three Galleria Tower STREET **ADDRESS** 13155 Noel Road, Suite 100 (Residence or Business) Dallas, TX 75240 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** Three Galleria Tower MAILING **ADDRESS** 13155 Noel Road, Suite 100 Change of Address Dallas, TX 75240 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (972) 934-0022 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 X April 5 July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 August 5 November 5 March 5 September 5 December 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 02/26/2024 03/25/2024

Forms provided by Texas Ethics Commission

GO TO PAGE 2
www.ethics.state.tx.us

Version V3.5.1.5b35d027

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

2 COMMITTEE NAME				12 Files ID	(Ethics Commission Filers)
				13 Filer ID 000531	,
		Ta Commented		000331	
4 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported			
(Attach lists on plain					
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2 Marriage	A Cupported			
	Measures (Describe by date and location	A. Supported			
	of election and nature of issue.)				
		B. Opposed			
		"			
	3. Officeholders				
	Assisted (Identify by name or, if				
	applicable, classify by party.)				
5 CONTRIBUTION		D POLITICAL CONTRIBU			
TOTALS		OR GUARANTEES OF LO MADE ELECTRONICALLY		\$	0.00
		qualifies for the higher itemiza	,		
	2. TOTAL POLITICA	L CONTRIBUTIONS		\$	5,000.00
	(OTHER THAN PLEI	DGES, LOANS, OR GUAF	RANTEES OF LOANS)		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES			\$	0.00
	4. TOTAL POLITICA	I EXPENDITURES			
	TOTAL TOLLING	E EM ENDITORES		\$	7.68
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD			DAY \$	44,097.26
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD			THE \$	0.00
6 AFFIDAVIT					
		true and co	affirm, under penalty of pe prect and includes all infor 15, Election Code.		ne accompanying report is ired to be reported by me
			Mr. G. E	Brint Ryan	
			Signature of Ca	ımpaign Trea	asurer
AFFIX NOTARY	STAMP / SEAL ABOVE				
Sworn to and subscribed	before me. by the said		, t	his the	day
		which, witness my hand ar			
	_, _, _,	,			
Signature of officer ad	ministering oath	Printed name of officer ac	dministering oath	Title of o	officer administering oath

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

				OVER GILET	3 of 5
17 CON	имітте	E NAME	18 Filer ID	(Ethics Commission	Filers)
Frie	nds of				
19 SCH	IEDULE	T			
NAME OF SCHEDULE			SUBTOTAL AM	OUNT	
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	5,000.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	DR	\$	
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$	
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$	
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	\$	7.68
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	\$	

	MONETARY POLITICAL CONTRIBUTIONS		SCHEDULE A1		
	The Instruction Guide explains how to complete this form.	- 1	1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/5		
2	FILER NAME Friends of UNT Political Action Committee	- 1	Filer ID (Ethics Commission 00053158	n Filers)	
4	Date 03/06/2024 5 Full name of contributor out-of-state PAC (ID#:) Wright, Laura 6 Contributor address; City; State; Zip Code	7	Amount of Contribution (\$)	\$5,000.00	
8	Dallas, TX 75230-2924 Principal occupation / Job title (See Instructions) Retired 9 Employer (See Instruction Retired	ons)			

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Committee	Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide expla	Polling Expense Printing Expense Salaries/Wages/Contract Labor ins how to complete this form.	Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NA	ME	<u> </u>	3 Filer ID (Ethics Commission Filers)
	Sch: 1/1 Rpt: 5/5	I	of UNT Political Action Com	nmittee	00053158
4	Date	5 Payee na	me		•
	03/01/2024	Bank of			
6	Amount (\$)	7 Payee ad	dress; City; St	ate; Zip Code	
	\$7.68	5500 Pre	eston Rd		
		Ste. B			
$ \Box$	Expenditure from corporate funds	Dallas, 1	X 75205		
8	PURPOSE	(a) Category	(See Categories listed at the top of this	(b) Description	
	OF		ing Expense		l outside of Texas. Complete Schedule T.
	EXPENDITURE			, —	n, TX, officeholder living expense
				Monthly Fee	for Server of Website
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Officeholder name	Office sought	Office held