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) 00031590 3 COMMITTEE NAME **OFFICE USE ONLY HCA Texas Good Government Fund** Date Received **ELECTRONICALLY FILED** 05/06/2024 COMMITTEE ADDRESS / PO BOX; APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 13155 Noel Road Suite 2000 Change of Address Dallas, TX 75240 Date Hand-delivered or Date Postmarked MS / MRS / MR **CAMPAIGN FIRST** MI **TREASURER** Receipt # Amount Kristin NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Dyer CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 13155 Noel Road, Ste. 2000 STREET **ADDRESS** (Residence or Business) Dallas, TX 75240 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 13155 Noel Road, Ste. 2000 MAILING **ADDRESS** Change of Address Dallas, TX 75240 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (972) 401-8770 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 April 5 July 5 October 5 REPORT FILING **DEADLINE** February 5 X May 5 August 5 November 5 September 5 December 5 March 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 03/26/2024 04/25/2024

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

			13 Filer ID	(Ethics Commission Filers)
HCA Texas Good Go	overnment Fund		000315	90
4 COMMITTEE ACTIVITY	1. Candidates	A. Supported		
ACTIVITY	(Identify by name or, if applicable, classify by party.)			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2 Manauran	A. Supported		
	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.)			
E CONTRIBUTION	11 7 331 37	DOLITICAL CONTRIBUTIONS (OTUED THAN	<u> </u>	
.5 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS N	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA			
	(OTHER THAN PLE	DGES, LOANS, OR GUARANTEES OF LOANS)	\$	400.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZE	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		
	4. TOTAL POLITICA	L EXPENDITURES	\$	0.00
CONTRIBUTION BALANCE	•	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		
OUTSTANDING LOAN TOTALS	•	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		
6 AFFIDAVIT				
		I swear, or affirm, under penalty of true and correct and includes all in under Title 15, Election Code.	f perjury, that th nformation requ	ne accompanying report is ired to be reported by me
		Kr	ristin Dyer	
			Campaign Trea	asurer
AEEIV NOTA	RY STAMP / SEAL ABOVE	orginal or	Campaign 1100	200,01
AFFIX NOTA	RT STAINP / SEAL ABOVE			
			_, this the	day
of	, 20, to certify	which, witness my hand and seal of office.		
Cignoture of officer	administoring auth	Drinted name of officer administration and	Title of a	officer administering eath
Signature of officer	administering oath	Printed name of officer administering oath	riue of c	officer administering oath

SUBTOTALS - MPAC

FORM MPAC **COVER SHEET PG 3**

			3 of 5	
17 COMMITT	EE NAME	18 Filer ID	(Ethics Commission Filers)	
	as Good Government Fund	00031590		
19 SCHEDUL NAME OF	SUBTOTAL AMOUNT			
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 LABO ORGANIZATION	\$		
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORAL LABOR ORGANIZATION	\$		
6. X	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	\$ 400.00		
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.	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$	
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. X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$ 1,500.96	

MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C3

	The Instruction Guide explains how to complete this form.		1	Total pages S Sch: 1/1 Rpt	ges Schedule C3: . Rpt: 4/5		
2	2 FILER NAME			3	Filer ID	(Ethics Commission Filers)	
	HCA Texas Good Government Fund				00031590		
4	Date	5	Corporation / Labor Organization name	6	Amount (\$)		
	04/25/2024		HCA, Inc.			400.00	

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.				nages Schedule K: L/1 Rpt: 5/5		
2	2 FILER NAME			Filer I) (Ethics Commission	Filers)
	HCA Texas Good Government Fund			00031	1590	
4	Date 04/05/2024	 Name of person from whom amount is received Andrew Murr Campaign Address of person from whom amount is received; City; State; Zip Code 			8 Amount (\$)	\$500.00
		Junction, TX 76849				
			olitio	cal cont	I ribution returned to filer	
	Date 04/05/2024	Name of person from whom amount is received Jacey Jetton Campaign Address of person from whom amount is received; City; State; Zip Code			Amount (\$)	\$500.00
		Richmond, TX 77406			7	
		Purpose for which amount is received Void of 11/17/2023 contribution	olitio	cal cont	ribution returned to filer	
	Date 04/05/2024	Name of person from whom amount is received Victoria Neave Campaign Address of person from whom amount is received; City; State; Zip Code			Amount (\$)	\$500.00
		Garland, TX 75047				
		Purpose for which amount is received X Check if p Void of 11/17/2023 contribution	olitio	al cont	ribution returned to filer	
	Date 03/29/2024	Name of person from whom amount is received Wells Fargo Bank Address of person from whom amount is received; City; State; Zip Code			Amount (\$)	\$0.88
		Irving, TX 75038				
			olitio	cal cont	I ribution returned to filer	
	Date 03/29/2024	Name of person from whom amount is received Wells Fargo Bank Address of person from whom amount is received; City; State; Zip Code			Amount (\$)	\$0.08
		Irving, TX 75038				
		Purpose for which amount is received	olitio	cal cont	ribution returned to filer	