FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00085144 3 COMMITTEE NAME **OFFICE USE ONLY** Coalition for Good Government Date Received **ELECTRONICALLY FILED** 07/15/2024 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 2180 North Loop West Ste. 255 Date Hand-delivered or Date Postmarked Change of Address Houston, TX 77018 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Matt NAME NICKNAME LAST **SUFFIX** Wiltshire STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 2180 North Loop West Ste. 255 STREET **ADDRESS** (Residence or Business) Houston, TX 77018 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 2180 North Loop West Ste. 255 MAILING **ADDRESS** Houston, TX 77018 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (713) 332-0664 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Х Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 01/01/2024 06/30/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special **GO TO PAGE 2**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC** COVER SHEET PG 2

2 COMMITTEE NAME				13 File	r ID	(Ethics Commission Filers)
Coalition for Good Gove	ernment			000	85144	
4 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Ky	rle Scott HCAD Board	I of Directors		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures	A. Supported				
	(Describe by date and location of election and nature of issue.)					
		B. Opposed				
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
5 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED PLEDGES, LOANS, CONTRIBUTIONS M check here if this report	OR GUARANTEES NADE ELECTRONIC	CALLY)	HAN	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE		NS GUARANTEES OF LOA	ANS)	\$	182,769.26
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	D POLITICAL EXPE	NDITURES		\$	0.00
	4. TOTAL POLITICA	L EXPENDITURE	S		\$	231,796.24
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD			\$	25,745.98	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL A LAST DAY OF THE I		OUTSTANDING LOANS A	AS OF THE	\$	0.00
6 AFFIDAVIT						
		true a	ar, or affirm, under penal and correct and includes a r Title 15, Election Code.	all information r		
				4 N 4 - 44 N 4 6 14 - 1-	:	
				Ir. Matt Wiltsh e of Campaign		er
AFFIX NOTARY	STAMP / SEAL ABOVE		- · · · · · · · · · · · · · · · · · · ·			
Sworn to and subscribed	before me, by the said			, this the		day
of						
Signature of officer adı	ministering oath	Printed name of offi	cer administering oath	Title	of office	er administering oath

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM GPAC ADDENDUM

Page 3 of 12

12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Coalition for Good Gove	ernment			00085144	
	COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Erika McCrutheon HCAD Board	of Directors	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported			
	(Attach lists on plain paper to complete this report if necessary.)	approace, eacety by party)	B. Opposed	Jared Woodfill State Representa	ative	
		Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported			
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed	Duke Coon Mayor of Conroe		
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
		(Identify by name or, if				

GENERAL-PURPOSE COMMITTEE REPORT:

FORM GPAC ADDENDUM

PURPOSE						ADDENDON
						Page 4 of 12
12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Coalition for Good Gov	rernment				00085144	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported			•	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed	John Perez	State Represer	ntative	
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted					
	(Identify by name or, if applicable, classify by party.)					

SUBTOTALS - GPAC

FORM **GPAC**COVER SHEET PG 3

					5 of 12
17 CO	MMITTE	EE NAME	18 Filer ID	(Ethics Cor	nmission Filers)
Co	Coalition for Good Government 00085144				,
10 SC	HEDIIII	E SUBTOTALS			
l	ME OF :		SUBT	OTAL AMOUNT	
	IVIL OI .				
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	182,769.26
					,
		COLIED HE AS NON MONETARY (IN KIND) POLITICAL CONTRIBUTIONS			
2.	Ш	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.	Ш	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION)R	\$	
5.	П	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA	ATION OR	\$	
	Ц	LABOR ORGANIZATION			
		COULD III F OO. MONETARY CURRORT FROM CORRORATION OR LARGE ORG	ANUZATIONI	_	
6.	Ш	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$	
		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR			
7.		ORGANIZATION		\$	
8.	П	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$	
9.	П	SCHEDULE E: LOANS		\$	
] .	Ш	CONEDULE L. LOVINO		Φ	
10		COLUED III E E4. DOLUTION EVEENDITUDES EDOM DOLUTION CONTRIBUTION	0	_	105 155 07
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$	195,155.97
11.	X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	36,640.27
-				-	
12.	П	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
13.	П	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		6	
10.	Ш	CONEDULE 1. EXCENSIONES WINDE DI CNEDIT CHIND		\$	
		COLLEGE IS NOW DOUGLOAD EVEN INTERPRETATION OF THE OWN DOUGLOAD CONTRIBUTION	ONIC	_	
14.	Ш	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	JNS	\$	
		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS	PETLIBNED		
15.	Ш	TO FILER	KETOKIVED	\$	
-				<u> </u>	
i					

	MONET	ARY POLITICAL CONTRIE	BUTION	S		SCHEDULE A1
	The Instru	ction Guide explains how to complet	1	Total pages Schedule A1: Sch: 1/3 Rpt: 6/12		
2	FILER NAME Coalition for Good Government				3	Filer ID (Ethics Commission Filers) 00085144
4	Date 06/07/2024 5 Full name of contributor out-of-state PAC (ID#:) A-Team Digital 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$16,000.00		
		Alexandria, VA 22313				
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions)	
	Date 05/23/2024	Bettencourt, Paul	PAC (ID#:			Amount of Contribution (\$) \$25,000.00
	Principal occu	Houston, TX 77079		Employer (See Instructions		
				Bettencourt Tax Advisor		
	Date 02/09/2024	Full name of contributor out-of-state Houston Region Business Coalition PA Contributor address; City; State; Zip Code				Amount of Contribution (\$) \$30,000.00
	Dein sin al a a su	Bellaire, TX 77401	1	Farabasa (Ossabastas tisas		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)	
	Date 02/26/2024	Full name of contributor out-of-state Houston Region Business Coalition PA Contributor address; City; State; Zip Code Bellaire, TX 77401	c			Amount of Contribution (\$) \$45,853.36
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)	
	Date 03/12/2024	Full name of contributor out-of-state Houston Region Business Coalition PA Contributor address; City; State; Zip Code Bellaire, TX 77401	С)		Amount of Contribution (\$) \$25,415.90
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)	
			I			

	MONET	ARY POLITICAL C	ONTRIBUTION	S		SCHEDULE A1
	The Instruc	ction Guide explains how	1	Total pages Schedule A1: Sch: 2/3 Rpt: 7/12		
2	FILER NAME Coalition for Good Government				3	Filer ID (Ethics Commission Filers) 00085144
4	Date 05/01/2024			7	Amount of Contribution (\$) \$5,000.00	
_	Delicalization	Galveston, TX 77550	lo.	Farabasa (Osabasa tanati	Ĺ	
8	Principal occu President	pation / Job title (See Instructions)	9	Employer (See Instructions Middleton Oil Company	5)	
	Date Full name of contributor out-of-state PAC (ID#:) 06/07/2024 Middleton, Mayes Contributor address; City; State; Zip Code					Amount of Contribution (\$) \$5,000.00
		Galveston, TX 77550				
	Principal occupation / Job title (See Instructions) President Employer (See Instructions) Middleton Oil Compa				i)	
	Date 06/06/2024	Full name of contributor O'Connor, Pat Contributor address; City; Sta	out-of-state PAC (ID#: tte; Zip Code			Amount of Contribution (\$) \$10,000.00
	Principal occu	Houston, TX 77008 pation / Job title (See Instructions)	1	Employer (See Instructions	<u></u>	
	Tax Consulta	,		Self	,	
	Date 05/14/2024	Full name of contributor Smith, Jim Contributor address; City; Sta Houston, TX 77056	out-of-state PAC (ID#: tte; Zip Code)		Amount of Contribution (\$) \$10,000.00
	Principal occu Chairman	pation / Job title (See Instructions)		Employer (See Instructions Smithco Development)	
	Date Full name of contributor out-of-state PAC (ID#:) 05/06/2024 Sullivan, Michael Contributor address; City; State; Zip Code Kingwood, TX 77345				Amount of Contribution (\$) \$500.00	
	Principal occu Government	pation / Job title (See Instructions) Affairs		Employer (See Instructions Group 1 Automotive)	
	223					

TARY POLITICAL CONTRIBI	UTIONS	SCHEDULE A1
ruction Guide explains how to complete	this form.	1 Total pages Schedule A1: Sch: 3/3 Rpt: 8/12
IE or Good Government		3 Filer ID (Ethics Commission Filers) 00085144
5 Full name of contributor out-of-state PA Wilson & Franco LLC 6 Contributor address; City; State; Zip Code	7 Amount of Contribution (\$) \$10,000.0	
Houston, TX 77042		
cupation / Job title (See Instructions)	9 Employer (See Instructio	ns)
4	uction Guide explains how to complete E or Good Government 5 Full name of contributor out-of-state Pr Wilson & Franco LLC 6 Contributor address; City; State; Zip Code	Franco LLC Good Government out-of-state PAC (ID#:) Wilson & Franco LLC Good Government out-of-state PAC (ID#:) Wilson & Franco LLC Houston, TX 77042

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 Comm

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

nbursement Solicitation/Fundraising Expense
al Expense Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 1/3 Rpt: 9/12	Coalition for Good Government 00085144
4 Date	5 Payee name
06/24/2024	Clockwork Consulting, LLC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$14,811.70	1347 Lamonte Lane
Expenditure from corporate funds	Houston, TX 77018
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Direct Mail
	Birect Mail
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
05/29/2024	Clockwork Consulting, LLC
Amount (\$)	Payee address; City; State; Zip Code
\$27,045.01	1347 Lamonte Lane
— Foresaditus from	
Expenditure from corporate funds	Houston, TX 77018
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Direct Mail
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experience to benefit even	
Date	Payee name
04/01/2024	Clockwork Consulting, LLC
Amount (\$)	Payee address; City; State; Zip Code
\$25,415.90	1347 Lamonte Lane
Expenditure from corporate funds	Houston, TX 77018
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Direct Mail
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

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 Comm

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 2/3 Rpt: 10/12	Coalition for Good Government 00085144
4 Date	5 Payee name
03/08/2024	Clockwork Consulting, LLC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$77,471.31	1347 Lamonte Lane
Expenditure from corporate funds	Houston, TX 77018
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
_/	Check if Austin, TX, officeholder living expense
	Direct Mail
O Committee ONII Wife discret	Our did to 10 ff as had done as many
9 Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/16/2024	Clockwork Consulting, LLC
Amount (\$)	Payee address; City; State; Zip Code
\$18,382.05	1347 Lamonte Lane
Expenditure from corporate funds	Houston, TX 77018
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Direct Mail
	Birect Mail
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
06/24/2024	Clockwork Consulting, LLC
Amount (\$)	
\$30,000.00	1347 Lamonte Lane
Expenditure from corporate funds	Houston, TX 77018
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Direct Mail And Media Program
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District Travel in District

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 3/3 Rpt: 11/12	Coalition for Good Government 00085144
4 Date	5 Payee name
06/03/2024	PNC Bank
6 Amount (\$) \$15.00	7 Payee address; City; State; Zip Code249 Fifth Avenue
\$15.00	249 Fillit Avenue
Expenditure from corporate funds	Pittsburgh, PA 15222
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Bank Fee
	Dalik Fee
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
experience to benefit eye	•
Date	Payee name
05/01/2024	PNC Bank
Amount (\$)	Payee address; City; State; Zip Code
\$15.00	249 Fifth Avenue
Expenditure from	
corporate funds	Pittsburgh, PA 15222
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Bank Fee
	Dalik Fee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
02/09/2024	Trey Wharton Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$2,000.00	PO Box 1242
Expenditure from	
corporate funds	Huntsville, TX 77342
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Candidate/Officeholder/Political Committee
	Sampaigh Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

UNPAID INCURRED OBLIGATIONS SCHEDULE F2 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F2: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 1/1 Rpt: 12/12 Coalition for Good Government 00085144 \$ TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS 5 Date Payee name 06/24/2024 Clockwork Consulting, LLC Amount (\$) Payee address; State; Zip Code \$36,640.27 1347 Lamonte Lane Expenditure from Houston, TX 77018 corporate funds TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Direct Mail, Robo Calls, and P2P Phone Program for **HCAD Election** Office sought 11 Complete ONLY if direct Candidate/Officeholder name Office held expenditure to benefit C/OH