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** 12/03/2024 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 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** 10/26/2024 11/25/2024

GO TO PAGE 2

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME					13 Filer II)	(Ethics Commission Filers)
Friends of UNT Political Ad	ction Committee				00053	158	
ACTIVITY (Id	Candidates lentify by name or, if plicable, classify by party.)	A. Supported	Greg Abbott Gove	ernor			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed					
(De	Measures escribe by date and location election and nature of issue.)	A. Supported					
		B. Opposed					
(Id	Officeholders Assisted lentify by name or, if plicable, classify by party.)						
5 CONTRIBUTION 1. TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	OR GUARANT			\$:	0.00
2.	TOTAL POLITICA (OTHER THAN PLEI		ITIONS OR GUARANTEES OI	F LOANS)	\$;	12,000.00
EXPENDITURE 3. TOTALS	TOTAL UNITEMIZED	D POLITICAL E	XPENDITURES		\$	i	0.00
4.	TOTAL POLITICA	L EXPENDIT	URES		\$;	79,507.68
CONTRIBUTION 5. BALANCE	TOTAL POLITICAL OF THE REPORTING		NS MAINTAINED AS O	F THE LAST	DAY \$;	97,534.45
OUTSTANDING 6.	TOTAL PRINCIPAL A		LL OUTSTANDING LO ERIOD	ANS AS OF 1	THE \$	i	0.00
6 AFFIDAVIT					<u> </u>		
		t	swear, or affirm, under rue and correct and inc under Title 15, Election	ludes áll infori			
				Mr. G. B	Brint Ryar	1	
		-	Się	gnature of Ca			er
AFFIX NOTARY ST	AMP / SEAL ABOVE						
Sworn to and subscribed bet	fore me, by the said			, tł	nis the		day
of, 2	0, to certify \	which, witness r	my hand and seal of off	ice.			
Signature of officer admin	nistering oath	Printed name o	of officer administering of	oath	Title o	f office	r administering oath

						Page 3 01 20
12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Friends of UNT Political A	Action Committee				00053158	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Dan Patrick Lie	eutenant Governo	r	
(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				
	3. Officeholders Assisted (Identify by name or, if					
	applicable, classify by party.)					
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Brandon Creigh	nton State Senato)r	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Kelly Hancock	State Senator		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	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.)					

						Page 4 of 20
12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Friends of UNT Political Ac	ction Committee				00053158	ı
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Joan Huffmar	State Senato	r	
(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	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Tan Parker S	state Senator		
(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				
	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	Royce West	State Senator		
(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.)					
	applicable, statisty by party.)	<u>′I </u>				

12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Friends of UNT Political A	Action Committee				00053158	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Rafael Anchia	State Represent	ative	
(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.)					
COMMITTEE	Candidates		Cros Donner	Ctata Danuacanta	ations.	
ACTIVITY	(Identify by name or, if applicable, classify by party.)		Greg Bonnen	State Representa	auve	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		John Bucy St	ate Representativ	е	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	Officeholders Assisted (Identify by name or, if					

12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Friends of UNT Political Ac	tion Committee			00053158	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Dustin Burrows State Repre	esentative	
(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			
	3. Officeholders Assisted (Identify by name or, if				
	applicable, classify by party.)				
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Aicha Davis State Represe	ntative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Mary Gonzalez State Repre	esentative	
(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.)	1			

12 COMMITTEE NAME				1	cs Commission Filers)
Friends of UNT Political Ac	tion Committee			00053158	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Andy Hopper State Representa	tive	
(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			
	3. Officeholders Assisted (Identify by name or, if				
COMMITTEE	applicable, classify by party.)		- I - I - I - I - I - I - I - I - I - I		
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Donna Howard State Represen	itative	
(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.)		Trey Martinez Fischer State Re	presentative	
(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			
	Officeholders Assisted (Identify by name or, if				
· · · · · · · · · · · · · · · · · · ·	LUDERITY BY DAME OF IT				

12 COMMITTEE NAME Friends of UNT Political Action	on Committee			13 Filer ID	(Ethics Commission Filers)
Friends of UNT Political Activ	on Committee			00050450	
				00053158	
ACTIVITY (I	. Candidates Identify by name or, if pplicable, classify by party.)	A. Supported	Jared Patterson State Represer	ntative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
2	2. Measures	A. Supported			
lic	Describe by date and ocation of election and ature of issue.)				
		B. Opposed			
(1	B. Officeholders Assisted Identify by name or, if				
	pplicable, classify by party.)				
ACTIVITY (I	Candidates Identify by name or, if pplicable, classify by party.)		Ramon Romero State Represer	ntative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
(I)	2. Measures Describe by date and ocation of election and lature of issue.)	A. Supported			
		B. Opposed			
(1)	B. Officeholders Assisted Identify by name or, if pplicable, classify by party.)				
ACTIVITY (1	. Candidates Identify by name or, if pplicable, classify by party.)		Matt Shaheen State Representa	ative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
(I	2. Measures Describe by date and ocation of election and ature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted				
	dentify by name or, if pplicable, classify by party.)				

12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Friends of UNT Political Ac	ction Committee				00053158	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Giovanni Capı	iglione State Rep	presentative	
(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				
	3. Officeholders Assisted (Identify by name or, if					
	applicable, classify by party.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Dade Phelan	State Representa	ttive	
(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.)		Charlie Geren	State Represent	ative	
(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	I				

FORM MPAC MONTHLY FILING GPAC REPORT: PURPOSE **ADDENDUM** Page 10 of 20 **12** COMMITTEE NAME 13 Filer ID (Ethics Commission Filers) Friends of UNT Political Action Committee 00053158 14 COMMITTEE 1. Candidates A. Supported Toni Rose State Representative **ACTIVITY** (Identify by name or, if applicable, classify by party.) (Attach lists on plain B. Opposed paper to complete this report if necessary.) A. Supported 2. Measures (Describe by date and location of election and nature of issue.) B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

			1	.1 of 20
17 COMMITTEE NAME Friends of UNT Political Ad	ction Committee	18 Filer ID 00053158	(Ethics Commission I	Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AM	OUNT
1. X SCHEDULE A1:	MONETARY POLITICAL CONTRIBUTIONS		\$ 1	2,000.00
2. SCHEDULE A2:	NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3. SCHEDULE B: F	PLEDGED CONTRIBUTIONS		\$	
4. SCHEDULE C1: ORGANIZATION	MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO	DR	\$	
5. SCHEDULE C2: LABOR ORGAN	NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA IZATION	ATION OR	\$	
6. SCHEDULE C3:	MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$	
7. SCHEDULE C4: ORGANIZATION	NON-MONETARY SUPPORT FROM CORPORATION OR LABOR		\$	
8. SCHEDULE D: I	PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$	
9. SCHEDULE E: I	LOANS		\$	
10. X SCHEDULE F1:	POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$ 7	79,507.68
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: NO	ON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
15. SCHEDULE K: II TO FILER	NTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS	RETURNED	\$	

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	E A1
	The Instru	ction Guide explains how to complete this f	1	Total pages Schedule A1: Sch: 1/1 Rpt: 12/20		
2	FILER NAME Friends of U	NT Political Action Committee		3	Filer ID (Ethics Commission 00053158	on Filers)
4	Date 11/04/2024	5 Full name of contributor			Amount of Contribution (\$)	\$1,000.00
8	Principal occu	Austin, TX 78749-1247 pation / Job title (See Instructions)	9 Employer (See Instructions			
_	Government		UNT System	,		
	Date 11/25/2024				Amount of Contribution (\$)	\$5,000.00
		Fort Worth, TX 76107-3248				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired)		
Date Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$5,000.00	
		Dallas, TX 75205-1413				
	Principal occu President	pation / Job title (See Instructions)	Employer (See Instructions Amegy Bank)		
	Date 11/04/2024	Full name of contributor out-of-state PAC (ID#:_ Rodriguez, Reymundo Contributor address; City; State; Zip Code Austin, TX 78723-5383			Amount of Contribution (\$)	\$1,000.00
	Principal occu Chief Strate	pation / Job title (See Instructions) gy Officer	Employer (See Instructions UNT System)		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officebolder/Political Comm

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Cabadula F1:	
1 Total pages Schedule F1: Sch: 1/8 Rpt: 13/20	2 FILER NAME Friends of UNT Political Action Committee 3 Filer ID (Ethics Commission Filers) 00053158
4 Date	5 Payee name
11/04/2024	Aicha Davis for Texas
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,500.00	PO Box 71
Expenditure from corporate funds	DeSoto, TX 75115
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
LA LABITORL	Candidate/Officeholder/Political Committee
	Contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiulture to beliefft C/Oi	
Date	Payee name
11/01/2024	Bank of America
Amount (\$)	Payee address; City; State; Zip Code
\$7.68	5500 Preston Rd
	Ste. B
Expenditure from corporate funds	Dallas, TX 75205
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Monthly Fee for Server of Website
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	Н
Date	Payee name
11/15/2024	Charlie Geren Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$2,000.00	PO Box 1440
φ2,000.00	FO BOX 1440
Expenditure from	
corporate funds	Fort Worth, TX 76101
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Contribution
Complete CNII V if alia	Condidate/Officeholder name Office cought
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
,	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committ Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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 OTHER (enter a category not listed above)

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total magas Cabadula 51:	· · · · · · · · · · · · · · · · · · ·
1 Total pages Schedule F1: Sch: 2/8 Rpt: 14/20	2 FILER NAME 3 Filer ID (Ethics Commission Filers) Friends of UNT Political Action Committee 00053158
4 Date	5 Payee name
11/15/2024	Dade Phelan Campaign
6 Amount (\$) \$5,000.00	7 Payee address; City; State; Zip Code PO Box 5990
Expenditure from corporate funds	Austin, TX 78763
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
-	Candidate/Officeholder/Political Committee
	Contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/04/2024	Donna Howard Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 5375
42,000.00	
Expenditure from corporate funds	Austin, TX 78763
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/04/2024	Dustin Burrows Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 2569
\$1,000.00	FO BOX 2309
Expenditure from corporate funds	Lubbock, TX 79408
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
LAPENDITORE	Candidate/Officeholder/Political Committee
	Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Candidate/Officeholder/Politica Credit Card Payment	
Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 3/8 Rpt: 15/20	Friends of UNT Political Action Committee 00053158
4 Date	5 Payee name
11/04/2024	Friends of Brandon Creighton
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$3,500.00	2257 N. Loop 336
Expenditure from	Suite 140-366
corporate funds	Conroe, TX 77304
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee Contribution Check if Austin, TX, officeholder living expense Contribution
	Contaisation
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
11/15/2024	Giovanni Caprigilione Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,500.00	1352 Ten Bar Trail
+ -,	
Expenditure from corporate funds	Southlake, TX 76092
PURPOSE	<u> </u>
OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee
	Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/04/2024	Greg Bonnen Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$5,000.00	405 David St.
Expenditure from	
corporate funds	Friendswood, TX 77546
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/Officeriolder/Political Committee Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	
Sch: 4/8 Rpt: 16/20	Friends of UNT Political Action Committee 00053158
4 Date	5 Payee name
11/04/2024	Hopper4Texas
6 Amount (\$)	7 Payee address; City; State; Zip Code
` *	PO Box 1052
\$2,000.00	PO BOX 1052
Expenditure from	
corporate funds	Decatur, TX 76234
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee
	Contribution
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
11/04/2024	Jared Patterson Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,500.00	4412 Sapphire Dr.
Expenditure from	Friend TV 75004
corporate funds	Frisco, TX 75034
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
_/	Candidate/Officeholder/Political Committee
	Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
11/04/2024	John Bucy Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$750.00	PO Box 536
Expenditure from corporate funds	Austin, TX 78767
PURPOSE	
OF	
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder (Political Committee) Check if Austin, TX, officeholder living expense
	Contribution
Complete CNII V if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	
Sch: 5/8 Rpt: 17/20	Friends of UNT Political Action Committee 00053158
4 Date	5 Payee name
11/04/2024	Mary Gonzalez Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	PO Box 450
Ψ1,000.00	1 O BOX 430
Expenditure from	
corporate funds	Clint, TX 79836
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXPENDITORE	Candidate/Officeholder/Political Committee
	Contribution
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
11/04/2024	Matt Shaheen for Texas House of Representatives
	<u> </u>
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	3917 Malton Dr.
- For an although from	
Expenditure from corporate funds	Plano, TX 75025
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
	Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·
Date	Payee name
11/04/2024	Rafael Anchia for Texas House District 103
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 4468
Expenditure from	Dallas, TX 75208
corporate funds	
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
	Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialitate to belieff of of	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

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

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: 6/8 Rpt: 18/20	2 FILER NAME 3 Filer ID (Ethics Commission Filers) 00053158	
4 Date	5 Payee name	
11/04/2024	Ramon Romero Campaign	
6 Amount (\$) \$750.00	7 Payee address; City; State; Zip Code PO Box 181	
Ψ100.00	1 0 50/(101	
Expenditure from corporate funds	Fort Worth, TX 76101	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Contributions/Donations Made By	
	Candidate/Officeholder/Political Committee	
	Contribution	
Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
11/04/2024	Royce West Campaign Committee	
Amount (\$)	Payee address; City; State; Zip Code	
\$5,000.00	320 S R.L. Thornton Fwy	
	Ste. 220	
Expenditure from corporate funds	Dallas, TX 75203	
PURPOSE	I	
OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By (b) Description Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense	
	Contribution	
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
11/04/2024	Tan Parker Campaign	
Amount (\$)	Payee address; City; State; Zip Code	
\$2,500.00	PO Box 271741	
Expenditure from	Flavor Mound, TV 75007	
corporate funds	Flower Mound, TX 75027	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder Check if Austin, TX, officeholder living expense	
	Candidate/Officeriolder/Political Committee Contribution	
	33.11.33.33.	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/O		

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	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 7/8 Rpt: 19/20	Friends of UNT Political Action Committee 00053158
4 Date	5 Payee name
11/04/2024	Texans for Dan Patrick
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$15,000.00	1 E Greenway Plaza
	Suite 225
Expenditure from corporate funds	Houston, TX 77046
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXPENDITURE	Candidate/Officeholder/Political Committee
	Contribution
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/04/2024	Texans for Greg Abbott
Amount (\$)	Payee address; City; State; Zip Code
` '	
\$15,000.00	PO Box 308
Expenditure from	
corporate funds	Austin, TX 78767
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXPENDITORE	Candidate/Officeholder/Political Committee
	Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1
Date	Payee name
11/04/2024	Texans for Joan Huffman
Amount (\$)	Payee address; City; State; Zip Code
Amount (\$)	3733-1 Westheimer Rd.
\$5,000.00	
Expenditure from	Ste. 40
corporate funds	Houston, TX 77027
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee
	Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Commit

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	I 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: 8/8 Rpt: 20/20	Friends of UNT Political Action Committee 00053158	
4 Date	5 Payee name	
11/04/2024	Texans for Kelly Hancock	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$5,000.00	7101 Burns Street	
Expenditure from corporate funds	Richland Hills, TX 76118	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Contributions/Donations Made By	
	Candidate/Officeholder/Political Committee	
	Contribution	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
11/15/2024	Toni Rose Campaign	
Amount (\$)	Payee address; City; State; Zip Code	
\$2.000.00	PO Box 41867	
Ψ2,000.00	1 0 DOX 12001	
Expenditure from corporate funds	Dallas, TX 75241	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Contributions/Donations Made By	
EXI ENDITORE	Candidate/Officeholder/Political Committee	
	Contribution	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
11/04/2024	Trey Martinez Fischer Campaign	
Amount (\$)	Payee address; City; State; Zip Code	
\$1,500.00	104 Babcock Road	
	Ste. 107	
Expenditure from	San Antonio, TX 78201	
corporate funds		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Contributions/Donations Made By Contributions/Donations Made By Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.	
	Candidate/Officeholder/Political Committee	
	Contribution	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
Opportunition to borrow O/O/I		