#### MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

#### FORM MPAC COVER SHEET PG 1

The MPAC Instruction	n Guide explains how to complete t	nis form. 🛑 🗉	iler ID Ethics Commission Filers 0088547	5)	2 Total pages filed: 9
3 COMMITTEE NAM	1E				OFFICE USE ONLY
Marchant Good	Government Fund				
					Date Received ELECTRONICALLY FILED
					04/02/2025
4 COMMITTEE	ADDRESS / PO BOX; APT / SU	JITE #; CITY	; STATE; Z	IP	04/02/2023
ADDRESS	2125 North Josey Lane	JITE#, CITT	, STATE, Z	IP	
	Suite 102				
	Carrollton, TX 75006				
5 CAMPAIGN	MS / MRS / MR	FIRST		MI	Date Hand-delivered or Date Postmarked
TREASURER	Mr.	Kenny		1011	Receipt # Amount
NAME	1011.	Kenny			
					Date Processed
	NICKNAME	LAST		SUFFIX	
		Marchant			Date Imaged
6 CAMPAIGN TREASURER	STREET ADDRESS (NO PO BOX	PLEASE);	APT / SUITE #;	CITY; STA	ATE; ZIP CODE
STREET	2125 North Josey Lane				
ADDRESS (Residence or Business)	Suite 200				
	Carrollton, TX 75006				
7 CAMPAIGN	STREET ADDRESS OR PO BOX;		APT / SUITE #;	CITY; ST	ATE; ZIP CODE
TREASURER MAILING	2125 North Josey Lane				
ADDRESS	Suite 200				
	Carrollton, TX 75006				
8 CAMPAIGN	AREA CODE PHONE N	IUMBER	EXTEN	SION	
TREASURER PHONE	(469) 781-4748				
FIIONE	(409) 701-4740				
9 REPORT TYPE	X Monthly		10th day after ca	mpaign 🗖	Dissolution (Attach PAC-DR)
			treasurer termina	tion	Dissolution (Attach PAC-DR)
10 MONTHLY		April E		July E	
REPORT FILING DEADLINE	January 5	X April 5		July 5	October 5
	February 5	May 5		August 5	November 5
	March 5	June 5		September 5	December 5
11 PERIOD	Month Day Year			Month	Day Year
COVERED	02/26/2025	THRO	UGH	03/25/2	-
		GO TO P	AGE 2		
Forms provided by 1	exas Ethics Commission	www.ethics.s	state.tx.us		Version V4.1.0.0e302ce0

#### MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

## FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME		:	13 Filer ID	(Ethics Commission Filers)
Marchant Good Govern	ment Fund		0008854	.7
14 COMMITTEE ACTIVITY	1. 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		
	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.)	The Honorable Terry Lynne Ma	ayor	
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLEI	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	10,265.90
CONTRIBUTION BALANCE	5. TOTAL POLITICAL C OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST I G PERIOD	DAY \$	2,038,938.34
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	HE \$	0.00
16 AFFIDAVIT			1	
		I swear, or affirm, under penalty of per true and correct and includes all inforr under Title 15, Election Code.		
		Mr. Kenny	/ Marchant	
		Signature of Car		
AFFIX NOTARY	STAMP / SEAL ABOVE			
Sworn to and subscribed	before me, by the said	, th	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 of	ficer administering oath
Forms provided by Texas E	thics Commission	www.ethics.state.tx.us		Version V4.1.0.0e302ce0

### MONTHLY FILING GPAC REPORT: PURPOSE

### FORM MPAC

Page 3 of 9

12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Marchant Good Governm	ent Fund			00088547	
14 COMMITTEE	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. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted		Sen. John Cornyn State Senator		
	(Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Mr. Stephen Chang Municipal Cit	ty Council	
(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			
(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.)		The Honorable Tara Hrbacek Ca Trustee	rrollton/Farme	rs Branch School Board

SUBTOTALS - MPAC		C	FORM MPAC OVER SHEET PG 3 4 of 9
17 COMMITTEE NAME Marchant Good Government Fund		18 Filer ID 00088547	(Ethics Commission Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1. SCHEDULE A1: MONETARY P	OLITICAL CONTRIBUTIONS		\$
2. SCHEDULE A2: NON-MONETA	RY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. SCHEDULE B: PLEDGED CON	TRIBUTIONS		\$
4. SCHEDULE C1: MONETARY C ORGANIZATION	ONTRIBUTIONS FROM CORPORATION OR LABC	)R	\$
5. SCHEDULE C2: NON-MONETA LABOR ORGANIZATION	RY (IN-KIND) CONTRIBUTIONS FROM CORPORA	ATION OR	\$
6. SCHEDULE C3: MONETARY S	UPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$
7. SCHEDULE C4: NON-MONETA ORGANIZATION	RY SUPPORT FROM CORPORATION OR LABOR		\$
8. SCHEDULE D: PLEDGED CON	TRIBUTIONS FROM CORPORATION OR LABOR (	ORGANIZATION	\$
9. SCHEDULE E: LOANS			\$
10. X SCHEDULE F1: POLITICAL EX	PENDITURES FROM POLITICAL CONTRIBUTION	S	<b>\$</b> 4,803.77
11. SCHEDULE F2: UNPAID INCUF	RRED OBLIGATIONS		\$
12. SCHEDULE F3: PURCHASE O	F INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
13. X SCHEDULE F4: EXPENDITURE	ES MADE BY CREDIT CARD		<b>\$</b> 5,462.13
14. SCHEDULE I: NON-POLITICAL	EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$
15. X SCHEDULE K: INTEREST, CRE	DITS, GAINS, REFUNDS, AND CONTRIBUTIONS	RETURNED	<b>\$</b> 9,945.47

### POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

	EXPENDITURE CATEGORIES FOR BOX 8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Event Expense     Loan Repayment/Reimbursement     Solicitation/Fundraising Expense       Fees     Office Overhead/Rental Expense     Transportation Equipment & Related Expense       Food/Beverage Expense     Polling Expense     Travel in District       Glft/Awards/Memorials Expense     Printing Expense     Travel Out of District
<b>1</b> Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 1/2 Rpt: 5/9	Marchant Good Government Fund 00088547
4 Date 03/03/2025	5 Payee name Marken Interests
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$750.00	2125 N Josey Ln
Expenditure from corporate funds	Carrollton , TX 75006
8 PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Office Overhead/Rental Expense</li> <li>(b) Description</li> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> <li>Office rent</li> </ul>
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date	Payee name
03/03/2025	Miller, Carol
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	581 Shadowcrest Ln
Expenditure from corporate funds	COPPELL, TX 75019
PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Salaries/Wages/Contract Labor</li> <li>(b) Description</li> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> <li>Salary</li> </ul>
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date	Payee name
03/03/2025	NRG
Amount (\$) \$346.86	Payee address; City; State; Zip Code P.O. Box 1532
Expenditure from corporate funds	Houston, TX 77251
PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Office Overhead/Rental Expense</li> <li>(b) Description</li> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> <li>Electric utilities</li> </ul>
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H

### POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

Advertising Expense Accounting/Banking 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: 2/2 Rpt: 6/9	Marchant Good Government Fund 00088547
4 Date 03/24/2025	5 Payee name Tara Hrbacek for CFB ISD
6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 1406 N Main St
Expenditure from corporate funds	Carrollton, TX 75006
8 PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee</li> <li>(b) Description         <ul> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> <li>Carrollton/Farmers Branch School Board Trustee</li> </ul> </li> </ul>
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
Date	Payee name
03/10/2025	Verizon
Amount (\$)	Payee address; City; State; Zip Code
\$206.91	P.O. Box 660108
Expenditure from corporate funds	Dallas, TX 75266
PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense</li> <li>(b) Description         <ul> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> <li>Telephone/Internet</li> </ul> </li> </ul>
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

			D	SCHEDULE F4
	EXPE	ENDITURE CATEGOR	IES FOR BOX 10(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	r - Gift/Award Il Committee Legal Serv	rage Expense s/Memorials Expense ices	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)
<b>1</b> Total pages Schedule F4:		-		3 Filer ID (Ethics Commission Filers)
Sch: 1/2 Rpt: 7/9	Marchant Good Go			00088547
4 CREDIT CARD ISSUER		ncial institution Citi	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDI CARD	\$
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	-	or Daid
Expenditure from corporate funds	(a) Amount Charged \$1,439.10	02/27/2025	(c) Date(s) Credit Card Issu 02/28/2025	
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code
	Aristotle		205 Pennsylvania Ave, S	SE
			Washington, DC 20003	
8 PURPOSE OF	(a) Category		(b) Description	
EXPENDITURE	(See Categories listed at the top	,	Database/Software	
X Political	Office Overhead/Rent	tal Expense		
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule		X, officeholder living expense
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder	•	ffice sought	Office held
expenditure to benefit C/OH		-		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu 03/14/2025 03/14/2025	
Expenditure from corporate funds	\$2,500.00	03/10/2025	03/14/2025 03/14/2025	
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code
	Torny Lyppo for For	more Propoh	13215 George St	
	Terry Lynne for Far	mers Branch	Formers Drench TV 75	224
	(a) Cataman		Farmers Branch, TX 752	234
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	
	Contributions/Donatio	ns Made By	Mayor Farmers Branch	
X Political	Candidate/Officehold	er/Political Committe	e	
Non-Political		of Texas. Complete Schedule		X, officeholder living expense
Complete ONLY if direct	Candidate/Officeholder	name Of	ffice sought	Office held
expenditure to benefit C/OH				
	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu 03/14/2025	er Paid
Expenditure from corporate funds	\$1,000.00	03/10/2025	03/14/2025	
PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Code
			PO Box 13026	
	Cornyn Victory Cor	nmittee		
			Austin, TX 78711	
PURPOSE OF	(a) Category		(b) Description	
EXPENDITURE	(See Categories listed at the top Contributions/Donatio		TX Senator Committee	
X Political	Candidate/Officehold		e	
Non-Political		of Texas. Complete Schedule		X, officeholder living expense
Complete ONLY if direct	Candidate/Officeholder	•	ffice sought	Office held
expenditure to benefit C/OH				

**EXPENDITURES MADE BY CREDIT CARD** 

		EXPE	NDITURE CATEGOR	RIES FOR BOX 10(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By	- Gift/Awards	rage Expense s/Memorials Expense	Loan Repayment/Reimburs Office Overhead/Rental Ex Polling Expense Printing Expense	pense Tra Tra Tra	licitation/Fundraising ansportation Equipm avel in District avel Out of District	ent & Related I	
	Candidate/Officeholder/Politica	e e	<sup>ices</sup> ruction Guide explains I	Salaries/Wages/Contract L		HER (enter a catego	ory not listed al	oove)
	Total pages Schedule F4:			tow to complete this to		3 Filer ID (Eth	vice Commiss	ion Filore)
	Sch: 2/2 Rpt: 8/9	Marchant Good Gov	vorpmont Eurod			00088547		
			ncial institution			00000347		
4	CREDIT CARD ISSUER			5 TOTAL OF U EXPENDITU		\$		
		see pr	revious	CHARGED T CARD	O A CREDIT			
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Cred	it Card Issuer	Paid		
	Expenditure from corporate funds	\$500.00	03/10/2025	03/14/2025				
7	PAYEE	(a) Payee name		(b) Payee addre	SS;	City,	State,	Zip Code
				PO Box 319				
		Stephen Chang for	Leander City					
				Leander, TX 7	'8646			
8	PURPOSE OF	(a) Category		(b) Description				
		(See Categories listed at the top Contributions/Donatio		Municipal City	Council			
	X Political	Candidate/Officeholde		ee				
	Non-Political	(C) Check if travel outside of	of Texas. Complete Schedule	т. 🗌 Сғ	neck if Austin, TX, o	officeholder living e>	pense	
9	Complete ONLY if direct	Candidate/Officeholder	name C	office sought		Office held		
e	xpenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Cred	lit Card Issuer	Paid		
	Expenditure from corporate funds	\$23.03	03/10/2025	03/11/2025				
	PAYEE	(a) Payee name		(b) Payee addre	SS;	City,	State,	Zip Code
		Coorlo		1600 Amphith	eatre Pky			
		Google						
				Mountain View	v, CA 94043			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top)	of this schedule)	(b) Description				
		Office Overhead/Rent	,	Internet fee				
	X Political							
	Non-Political		of Texas. Complete Schedule		eck if Austin, TX,	officeholder living ex	pense	
	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name C	office sought		Office held		
e								

**EXPENDITURES MADE BY CREDIT CARD** 

#### SCHEDULE F4

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

SCHEDULE K

2       FILER NAME Marchant Good Government Fund       3       Filer ID       (Ethics Commission Filers) 00088547         4       Date 02/28/2025       5       Name of person from whom amount is received Interactive Brokers       8       Amount (\$)         6       Address of person from whom amount is received; City; State; Zip Code       8       Amount (\$)         Greenwich, CT 06830       7       Purpose for which amount is received Interest/Dividends       Check if political contribution returned to filer	The Instru	ıcti	on Guide explains how to complete this form.			ages Schedule K: ./1 Rpt: 9/9
4 Date       5 Name of person from whom amount is received       8 Amount (\$)         02/28/2025       Interactive Brokers       \$9,945.47         6 Address of person from whom amount is received; City; State; Zip Code       Greenwich, CT 06830         7 Purpose for which amount is received       Check if political contribution returned to filer						
02/28/2025       Interactive Brokers       \$9,945.47         6       Address of person from whom amount is received; City; State; Zip Code       Greenwich, CT 06830         7       Purpose for which amount is received       Check if political contribution returned to filer					00088	
<ul> <li>6 Address of person from whom amount is received; City; State; Zip Code</li> <li>Greenwich, CT 06830</li> <li>7 Purpose for which amount is received</li> <li>Check if political contribution returned to filer</li> </ul>						
Greenwich, CT 06830  7 Purpose for which amount is received  Check if political contribution returned to filer	02/28/2025					\$9,945.47
7 Purpose for which amount is received Check if political contribution returned to filer		6	Address of person from whom amount is received; City; State; Zip Code			
7 Purpose for which amount is received Check if political contribution returned to filer						
			Greenwich, CT 06830			
Interest/Dividends		7	Purpose for which amount is received Check if p	oolitic	al conti	ribution returned to filer
			Interest/Dividends			