

MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM MPAC
COVER SHEET PG 1

| | | | | | |
|--|--|--|--|---|--------|
| The MPAC Instruction Guide explains how to complete this form. | | 1 Filer ID (Ethics Commission Filers) 00070602 | | 2 Total pages filed: 6 | |
| 3 COMMITTEE NAME McKinney Team | | | | OFFICE USE ONLY | |
| | | | | Date Received ELECTRONICALLY FILED 04/07/2025 | |
| | | | | Date Hand-delivered or Date Postmarked | |
| | | | | Receipt # | Amount |
| | | | | Date Processed | |
| 4 COMMITTEE ADDRESS | | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP PO Box 341027 Austin, TX 78734 | | | |
| 5 CAMPAIGN TREASURER NAME | | MS / MRS / MR Mr. | | FIRST William | |
| | | NICKNAME | | LAST Darling | |
| | | | | SUFFIX | |
| 6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business) | | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE PO Box 341027 Austin, TX 78734 | | | |
| 7 CAMPAIGN TREASURER MAILING ADDRESS | | STREET ADDRESS OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 341027 Austin, TX 78734 | | | |
| 8 CAMPAIGN TREASURER PHONE | | AREA CODE PHONE NUMBER EXTENSION (972) 489-9886 | | | |
| 9 REPORT TYPE | | <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Dissolution (Attach PAC-DR) | | | |
| 10 MONTHLY REPORT FILING DEADLINE | | <input type="checkbox"/> January 5 <input checked="" type="checkbox"/> April 5 <input type="checkbox"/> July 5 <input type="checkbox"/> October 5 <input type="checkbox"/> February 5 <input type="checkbox"/> May 5 <input type="checkbox"/> August 5 <input type="checkbox"/> November 5 <input type="checkbox"/> March 5 <input type="checkbox"/> June 5 <input type="checkbox"/> September 5 <input type="checkbox"/> December 5 | | | |
| 11 PERIOD COVERED | | Month Day Year 02/26/2025 THROUGH Month Day Year 03/25/2025 | | | |

GO TO PAGE 2

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

| | | | |
|--|--|--|---|
| 12 COMMITTEE NAME McKinney Team | | 13 Filer ID (Ethics Commission Filers) 00070602 | |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Bill Cox City of McKinney Mayor | |
| | | 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.) | | |
| | 15 CONTRIBUTION TOTALS | | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold |
| | | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ 10,000.00 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | | \$ 0.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | | \$ 7,500.00 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | | \$ 22,985.30 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | | \$ 0.00 |
| 16 AFFIDAVIT <div style="text-align: right;">I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.</div> <div style="text-align: right;">_____ Mr. William Darling Signature of Campaign Treasurer</div> <div>AFFIX NOTARY STAMP / SEAL ABOVE</div> Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office. _____ Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath | | | |

MONTHLY FILING GPAC REPORT: PURPOSE

FORM **MPAC**
ADDENDUM

Page 3 of 6

| | | |
|---|--|---|
| 12 COMMITTEE NAME McKinney Team | | 13 Filer ID (Ethics Commission Filers) 00070602 |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Gere Feltus City of McKinney City Council |
| | | 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.) | |

SUBTOTALS - MPAC**FORM MPAC**
COVER SHEET PG 3
4 of 6

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|--|---|--------------------------------|----------------------------|
| 17 COMMITTEE NAME McKinney Team | | 18 Filer ID 00070602 | (Ethics Commission Filers) |
| 19 SCHEDULE SUBTOTALS NAME OF SCHEDULE | | | SUBTOTAL AMOUNT |
| 1. | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ | 10,000.00 |
| 2. | <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ | |
| 3. | <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS | \$ | |
| 4. | <input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$ | |
| 5. | <input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$ | |
| 6. | <input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION | \$ | |
| 7. | <input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION | \$ | |
| 8. | <input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$ | |
| 9. | <input type="checkbox"/> SCHEDULE E: LOANS | \$ | |
| 10. | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ | 7,500.00 |
| 11. | <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ | |
| 12. | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS | \$ | |
| 13. | <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ | |
| 14. | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ | |
| 15. | <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 1/1 Rpt: 5/6 |
| 2 FILER NAME McKinney Team | | 3 Filer ID (Ethics Commission Filers) 00070602 |
| 4 Date 03/05/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooks, David <hr/> 6 Contributor address; City; State; Zip Code McKinney, TX 75070 | 7 Amount of Contribution (\$) \$2,500.00 |
| 8 Principal occupation / Job title (See Instructions) CEO | | 9 Employer (See Instructions) Independent Bank |
| Date 03/05/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huff, Peter <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070 | Amount of Contribution (\$) \$2,500.00 |
| Principal occupation / Job title (See Instructions) Chairman | | Employer (See Instructions) WattMaster Controls |
| Date 03/06/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mead, Bruce <hr/> Contributor address; City; State; Zip Code McKinney, TX 75071 | Amount of Contribution (\$) \$2,500.00 |
| Principal occupation / Job title (See Instructions) Managing Member | | Employer (See Instructions) Gray Branch Ranch LLC |
| Date 03/05/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RD Harris Property Ltd <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070 | Amount of Contribution (\$) \$2,500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

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 Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 1/1 Rpt: 6/6 | 2 FILER NAME McKinney Team | 3 Filer ID (Ethics Commission Filers) 00070602 |
| 4 Date 03/06/2025 | 5 Payee name Bill Cox Campaign | |
| 6 Amount (\$) \$5,000.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 6841 Virginia Parkway #103-314 McKinney, TX 75071 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PAC Contribution |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 03/25/2025 | Payee name Gere Feltus Campaign | |
| Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 317 Bachman Creek Dr McKinney, TX 75072 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PAC Contribution |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |