

# 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) 00085177		2 Total pages filed: 10	
3 COMMITTEE NAME KCI Texas PAC				OFFICE USE ONLY  Date Received ELECTRONICALLY FILED 04/25/2025  Date Hand-delivered or Date Postmarked  Receipt # Amount  Date Processed  Date Imaged	
4 COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP 2806 W. Bitters Road, Suite 218  San Antonio, TX 78248				
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Dawn  NICKNAME LAST SUFFIX Green				
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 2806 W. Bitters Road, Suite 218  San Antonio, TX 78248				
7 CAMPAIGN TREASURER MAILING ADDRESS	STREET ADDRESS OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2806 W. Bitters Road, Suite 218  San Antonio, TX 78248				
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (210) 641-9999				
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 type="checkbox"/> April 5 <input type="checkbox"/> July 5 <input type="checkbox"/> October 5 <input type="checkbox"/> February 5 <input checked="" 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    THROUGH    Month Day Year 03/26/2025    04/25/2025				

GO TO PAGE 2

# MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC  
COVER SHEET PG 2

<b>12 COMMITTEE NAME</b> KCI Texas PAC	<b>13 Filer ID</b> (Ethics Commission Filers) 00085177
---	---

<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

<b>15 CONTRIBUTION TOTALS</b>	<b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</b> <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	<b>2. TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 24,661.98
EXPENDITURE TOTALS	<b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>	\$ 0.00
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 13,000.00
CONTRIBUTION BALANCE	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 23,575.21
OUTSTANDING LOAN TOTALS	<b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 0.00

**16 AFFIDAVIT**

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.

Dawn Green  
\_\_\_\_\_  
Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

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

**SUBTOTALS - MPAC****FORM MPAC**  
**COVER SHEET PG 3**  
3 of 10

<b>17 COMMITTEE NAME</b> KCI Texas PAC		<b>18 Filer ID</b> (Ethics Commission Filers) 00085177
<b>19 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 24,661.98
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0.00
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
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 checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 0.00
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 13,000.00
11.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
12.	<input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$ 0.00
13.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
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**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/4 Rpt: 4/10
<b>2</b> FILER NAME KCI Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00085177
<b>4</b> Date 04/22/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beil, Nathan <hr/> <b>6</b> Contributor address; City; State; Zip Code  Sparks, MD 21152	<b>7</b> Amount of Contribution (\$)  \$5,000.00
<b>8</b> Principal occupation / Job title (See Instructions) CEO		<b>9</b> Employer (See Instructions) KCI Technologies, Inc.
Date 04/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boz, Mehmet <hr/> Contributor address; City; State; Zip Code  Sparks, MD 21053	Amount of Contribution (\$)  \$5,400.00
Principal occupation / Job title (See Instructions) Market Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 04/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cernosek, Mindy <hr/> Contributor address; City; State; Zip Code  Tomball, TX 77377	Amount of Contribution (\$)  \$192.00
Principal occupation / Job title (See Instructions) Business Developer		Employer (See Instructions) KCI Technologies
Date 04/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clements, Chris <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78248	Amount of Contribution (\$)  \$180.00
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Technologies
Date 04/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clements, Clay <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78248	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/4 Rpt: 5/10
<b>2</b> FILER NAME KCI Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00085177
<b>4</b> Date 04/18/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Condron, Cody <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77003	<b>7</b> Amount of Contribution (\$)  \$384.60
<b>8</b> Principal occupation / Job title (See Instructions) Regional Practice Leader		<b>9</b> Employer (See Instructions) KCI Technologies, Inc.
Date 04/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fry, Erick <hr/> Contributor address; City; State; Zip Code  Lawrenceville, GA 30045	Amount of Contribution (\$)  \$2,000.00
Principal occupation / Job title (See Instructions) Discipline Leader		Employer (See Instructions) KCI Technologies, Inc
Date 04/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Godlewski, Matthew <hr/> Contributor address; City; State; Zip Code  Forney, TX 75126	Amount of Contribution (\$)  \$140.00
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc
Date 04/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrison, Lewis <hr/> Contributor address; City; State; Zip Code  Katy, TX 77494	Amount of Contribution (\$)  \$270.00
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies
Date 04/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Kyle <hr/> Contributor address; City; State; Zip Code  Plano, TX 75093	Amount of Contribution (\$)  \$38.46
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Technologies, Inc

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/4 Rpt: 6/10
<b>2</b> FILER NAME KCI Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00085177
<b>4</b> Date 04/24/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaempf, Jill <hr/> <b>6</b> Contributor address; City; State; Zip Code  Canton, OH 44718	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Principal occupation / Job title (See Instructions) Asst. Director of Marketing		<b>9</b> Employer (See Instructions) KCI Technologies, Inc
Date 04/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lim, HoJin <hr/> Contributor address; City; State; Zip Code  Houston, TX 77094	Amount of Contribution (\$)  \$140.00
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies
Date 04/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mryncza, Gary <hr/> Contributor address; City; State; Zip Code  Nashville, TN 37203	Amount of Contribution (\$)  \$76.92
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Technologies
Date 04/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Jeffrey <hr/> Contributor address; City; State; Zip Code  Houston, TX 77056	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc
Date 04/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peck, George <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78230-1037	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) KCI Technologies, Inc

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/4 Rpt: 7/10
<b>2</b> FILER NAME KCI Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00085177
<b>4</b> Date 04/16/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prescott, Randell <b>6</b> Contributor address; City; State; Zip Code  Riverview, FL 33578	<b>7</b> Amount of Contribution (\$)  \$5,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Vice President		<b>9</b> Employer (See Instructions) KCI Technologies, Inc
Date 04/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stockburger, Scott Contributor address; City; State; Zip Code  Fate, TX 75189	Amount of Contribution (\$)  \$240.00
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) KCI Technologies, Inc.

# PLEDGED CONTRIBUTIONS

## SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:  
Sch: 1/1 Rpt: 8/10

2 FILER NAME  
KCI Texas PAC

3 Filer ID (Ethics Commission Filers)  
00085177

4 TOTAL OF UNITEMIZED PLEDGES

\$ 0.00

5 Date

6 Full name of pledgor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

8 Amount of  
pledge (\$)

9 In-kind description  
(If applicable)

7 Pledgor Address; City; State; Zip Code

☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)



# LOANS

## SCHEDULE E

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule E: Sch: 1/1 Rpt: 9/10
<b>2</b> FILER NAME KCI Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00085177
<b>4</b> TOTAL OF UNITEMIZED LOANS		<b>\$</b> 0.00
<b>5</b> Date of loan	<b>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	<b>9</b> Loan Amount (\$)
<b>6</b> Is lender a financial institution?	<b>8</b> Lender address; City; State; Zip Code	<b>10</b> Interest Rate
		<b>11</b> Maturity Date
<b>12</b> Principal occupation / Job title (See Instructions)		<b>13</b> Employer (See Instructions)
<b>14</b> Description of Collateral <input type="checkbox"/> None		<b>15</b> Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
<b>16</b> GUARANTOR INFORMATION  <input type="checkbox"/> not applicable	<b>17</b> Name of guarantor	<b>19</b> Amount Guaranteed (\$)
	<b>18</b> Guarantor address; City; State; Zip Code	
<b>20</b> Principal occupation		<b>21</b> 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.

<b>1</b> Total pages Schedule F1: Sch: 1/1 Rpt: 10/10	<b>2</b> FILER NAME KCI Texas PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00085177
<b>4</b> Date 04/21/2025	<b>5</b> Payee name Dexter McCoy Campaign	
<b>6</b> Amount (\$) \$3,000.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1398  Richmond, TX 77406	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution for campaign event.
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/21/2025	Payee name Grady Prestage Campaign	
Amount (\$) \$10,000.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 835  Missouri City, TX 77459	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution for campaign event.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held