

# 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<br>(Ethics Commission Filers)<br>00087392 |  | 2 Total pages filed:<br>6   |  |
| 3 COMMITTEE NAME<br>Accountable Government Fund                |  |  |  | OFFICE USE ONLY<br>Date Received<br>ELECTRONICALLY FILED<br>06/05/2025<br>Date Hand-delivered or Date Postmarked<br>Receipt # Amount<br>Date Processed<br>Date Imaged |  |
| 4 COMMITTEE ADDRESS  | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP<br>430 Old Fitzhugh, #7<br>Dripping Springs, TX 78620  |  |  |   |  |
| 5 CAMPAIGN TREASURER NAME                                      | MS / MRS / MR FIRST MI<br>Frederick R.<br>NICKNAME LAST SUFFIX<br>Ross Fischer   |  |  |   |  |
| 6 CAMPAIGN TREASURER STREET ADDRESS<br>(Residence or Business) | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE<br>430 Old Fitzhugh, #7<br>Dripping Springs, TX 78620  |  |  |   |  |
| 7 CAMPAIGN TREASURER MAILING ADDRESS                           | STREET ADDRESS OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE<br>430 Old Fitzhugh, #7<br>Dripping Springs, TX 78620   |  |  |   |  |
| 8 CAMPAIGN TREASURER PHONE                                     | AREA CODE PHONE NUMBER EXTENSION<br>(512) 587-5995   |  |  |   |  |
| 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<br><input type="checkbox"/> February 5 <input type="checkbox"/> May 5 <input type="checkbox"/> August 5 <input type="checkbox"/> November 5<br><input type="checkbox"/> March 5 <input checked="" type="checkbox"/> June 5 <input type="checkbox"/> September 5 <input type="checkbox"/> December 5 |  |  |   |  |
| 11 PERIOD COVERED  | Month Day Year    THROUGH    Month Day Year<br>04/26/2025    05/25/2025  |  |  |   |  |

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# MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

## FORM MPAC COVER SHEET PG 2

|  |   |   |
|--|---|---|
| <b>12 COMMITTEE NAME</b><br>Accountable Government Fund  |   | <b>13 Filer ID</b> (Ethics Commission Filers)<br>00087392               |
| <b>14 COMMITTEE ACTIVITY</b><br><br>(Attach lists on plain paper to complete this report if necessary.)  | <b>1. Candidates</b><br>(Identify by name or, if applicable, classify by party.)  | <b>A. Supported</b> Deborah Peoples Fort Worth City Council, District 5 |
|  |   | <b>B. Opposed</b>   |
|  | <b>2. Measures</b><br>(Describe by date and location of election and nature of issue.)  | <b>A. Supported</b>   |
|  |   | <b>B. Opposed</b>   |
|  | <b>3. Officeholders Assisted</b><br>(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><br><input type="checkbox"/> check here if this report qualifies for the higher itemization threshold | \$ 0.00   |
|  | <b>2. TOTAL POLITICAL CONTRIBUTIONS</b><br>(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)  | \$ 0.00   |
| <b>EXPENDITURE TOTALS</b>  | <b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>   | \$ 0.00   |
|  | <b>4. TOTAL POLITICAL EXPENDITURES</b>  | \$ 24,000.00  |
| <b>CONTRIBUTION BALANCE</b>  | <b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>   | \$ 43,792.46  |
| <b>OUTSTANDING LOAN TOTALS</b>   | <b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>  | \$ 0.00   |
| <b>16 AFFIDAVIT</b><br><br><div style="text-align: right; margin-top: 20px;">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; margin-top: 20px;">_____<br/>Frederick R. Fischer<br/>Signature of Campaign Treasurer</div> <div style="margin-top: 20px;">AFFIX NOTARY STAMP / SEAL ABOVE</div> <div style="margin-top: 20px;">Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.</div> <div style="margin-top: 20px; display: flex; justify-content: space-between;"><div>_____<br/>Signature of officer administering oath</div><div>_____<br/>Printed name of officer administering oath</div><div>_____<br/>Title of officer administering oath</div></div> |   |   |

# MONTHLY FILING GPAC REPORT: PURPOSE

FORM **MPAC**  
ADDENDUM

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|   |   |
|---|---|
| <b>12 COMMITTEE NAME</b><br>Accountable Government Fund | <b>13 Filer ID</b> (Ethics Commission Filers)<br>00087392 |
|---|---|

|   |  |  |
|---|--|--|
| <b>14 COMMITTEE ACTIVITY</b><br><br>(Attach lists on plain paper to complete this report if necessary.) | <b>1. Candidates</b><br>(Identify by name or, if applicable, classify by party.)             | A. Supported    Daryl Davis    Fort Worth City Council, District 6 |
|   |  | B. Opposed   |
|   | <b>2. Measures</b><br>(Describe by date and location of election and nature of issue.)       | A. Supported   |
|   |  | B. Opposed   |
|   | <b>3. Officeholders Assisted</b><br>(Identify by name or, if applicable, classify by party.) |  |

|  |  |   |
|--|--|---|
| <b>COMMITTEE ACTIVITY</b><br><br>(Attach lists on plain paper to complete this report if necessary.) | <b>1. Candidates</b><br>(Identify by name or, if applicable, classify by party.)             | A. Supported    Mia Hall    Fort Worth City Council, District 6 |
|  |  | B. Opposed  |
|  | <b>2. Measures</b><br>(Describe by date and location of election and nature of issue.)       | A. Supported  |
|  |  | B. Opposed  |
|  | <b>3. Officeholders Assisted</b><br>(Identify by name or, if applicable, classify by party.) |   |

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

|   |   |   |           |
|---|---|---|-----------|
| <b>17 COMMITTEE NAME</b><br>Accountable Government Fund |   | <b>18 Filer ID</b> (Ethics Commission Filers)<br>00087392 |           |
| <b>19 SCHEDULE SUBTOTALS</b><br>NAME OF SCHEDULE        |   | SUBTOTAL AMOUNT   |           |
| 1.  | <input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS  | \$  |           |
| 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              | \$  | 20,000.00 |
| 11.   | <input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS                                      | \$  | 4,000.00  |
| 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       | \$  |           |

# 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:<br>Sch: 1/1 Rpt: 5/6  | <b>2</b> FILER NAME<br>Accountable Government Fund   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087392  |
| <b>4</b> Date<br>05/09/2025   | <b>5</b> Payee name<br>Davis Campaign, Daryl   |   |
| <b>6</b> Amount (\$)<br>\$5,000.00<br><br><input type="checkbox"/> Expenditure from corporate funds | <b>7</b> Payee address; City; State; Zip Code<br>9216 Vineyard Lane<br><br>Fort Worth, TX 76123  |   |
| <b>8</b> PURPOSE OF EXPENDITURE   | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Contribution |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                 | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>05/12/2025  | Payee name<br>Hall Campaign, Mia   |   |
| Amount (\$)<br>\$5,000.00<br><br><input type="checkbox"/> Expenditure from corporate funds          | Payee address; City; State; Zip Code<br>P.O. Box 33574<br><br>Fort Worth, TX 76162   |   |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee        | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Contribution        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>05/09/2025  | Payee name<br>Peoples Campaign, Deborah  |   |
| Amount (\$)<br>\$10,000.00<br><br><input type="checkbox"/> Expenditure from corporate funds         | Payee address; City; State; Zip Code<br>613 Green River Trail<br><br>Fort Worth, TX 76103  |   |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee        | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Contribution        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name  | Office sought Office held   |

## UNPAID INCURRED OBLIGATIONS

## SCHEDULE F2

## EXPENDITURE CATEGORIES FOR BOX 10(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  
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 F2:<br>Sch: 1/1 Rpt: 6/6  | 2 FILER NAME<br>Accountable Government Fund  | 3 Filer ID (Ethics Commission Filers)<br>00087392   |
| 4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS  |  | \$  |
| 5 Date<br>05/16/2025   | 6 Payee name<br>The Eppstein Group   |   |
| 7 Amount (\$)<br>\$4,000.00<br><input type="checkbox"/> Expenditure from corporate funds | 8 Payee address; City; State; Zip Code<br>2830 South Hulen Street, Suite 361<br><br>Fort Worth, TX 76109 |   |
| 9 TYPE OF EXPENDITURE  | <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political                     |   |
| 10 PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Consulting Expense                   | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>2024 - 2025 Consulting and Administrative Services for Committee |
| 11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH                            | Candidate/Officeholder name  | Office sought<br>Office held  |