GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this form. 1 Filer ID (Ethics Commission Filers) 00086764					2 Total pages filed: 8			
3	COMMITTEE NAME				OFFICE US			
	Public Schools Firs	st McKinney				Date Received		
					ELECTRONICAL			
						07/06/2023		
Ļ	001447755				0005	07700/2023		
4	COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CIT	Y;	STATE; ZIP	CODE			
		7002 Old York Road				Date Hand-delivered or D	ate Postmarked	
	Change of Address							
		McKinney, TX 75072				Receipt #	Amount	
						Date Processed		
						Date Imaged		
						Date imageu		
5	CAMPAIGN	MS/MRS/MR FIRST				MI		
	TREASURER	Mrs. Lesa J.						
	NAME							
		NICKNAME LAST				SUFFIX		
		Perry						
		l ony						
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #;	CITY;	STAT	E; ZIP CODE	
ľ	TREASURER	6841 Virginia Parkway		/	onn,	00/11		
	STREET ADDRESS	Suite 103-305						
<u> </u>	(Residence or Business)	McKinney , TX 74071						
ľ	CAMPAIGN TREASURER	STREET OR PO BOX;		APT / SUITE #;	CITY;	STA	TE; ZIP CODE	
	MAILING	6841 Virginia Parkway, Suite 103-305						
	ADDRESS							
	Change of Address	McKinney, TX 75071						
8	CAMPAIGN	AREA CODE PHONE NUMBER	EXT	ENSION				
	TREASURER	(214) 548-1276						
	PHONE							
9	REPORT	January 15 30)th da	ay before election		Dissolution (Attach	PAC-DR)	
	TYPE			, hafeve also then		- ·		
		X July 15	n dag	y before election		10th day after campaign treasurer termination		
			unoff					
10	PERIOD	Month Day Year		Month	Day	Year		
	COVERED	-	IRC		/30/2023			
11	ELECTION	ELECTION DATE		ELECTION	TYPE			
		Month Day Year F	Prima	ry Runoff		X Other		
			Sene	ral Special			D School Board	
			-					
\vdash								
			U	PAGE 2				
For	rms provided by Texas Ethics Commission www.ethics.state.tx.us Version V3.5.1.a18ea2ca							

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME 13 Filer					r ID	(Ethics Commission Filers)		
Public Schools First McKinney 0008					86764			
14 COMMITTEE 1. Candidates A. Supported Ms. Amy Dankel MISD School Board ACTIVITY (Identify by name or, if applicable, classify by party.) A. Supported Ms. Amy Dankel MISD School Board				l Place 4	L.			
(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.)							
15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED PLEDGES, LOANS, CONTRIBUTIONS M X check here if this report	OR GUARANTEE ADE ELECTRON qualifies for the high	S OF LOANS, OR CALLY) er itemization threshold	THAN	\$	0.00		
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)					15,000.00		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES				\$	0.00		
4. TOTAL POLITICAL EXPENDITURES					\$	21,444.37		
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD			\$	8,512.43			
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD			\$	0.00			
16 AFFIDAVIT					•			
		true	ear, or affirm, under pen- and correct and includes er Title 15, Election Code	s all information				
				Mrs. Lesa J. Pe				
				ire of Campaign	-	r		
AFFIX NOTARY STAMP / SEAL ABOVE								
Sworn to and subscribed before me, by the said, this the day of, to certify which, witness my hand and seal of office.								
of	, 20, to certify (mich, withess my	nand and seal of onice.					
Signature of officer ad	ninistering oath	Printed name of o	fficer administering oath	Title	e of office	r administering oath		
Forms provided by Texas E	thics Commission	www.ethi	cs.state.tx.us			Version V3.5.1.a18ea2ca		

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM GPAC

Page 3 of 8

12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)	
Public Schools First Mc					00086764		
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Ms. Lynn Sp	erry MISD	School B	oard Place 5	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed					
	(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	Ms. Stephar	nie O'Dell M	ISD Scho	ool Board Plac	e 6 at Large
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			_		
	(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.)						

FORM GPAC COVER SHEET PG 3

4 of 8

17 COMMITTI	(Ethics Commission Filers)		
Public Scl			
19 SCHEDUL NAME OF	SUBTOTAL AMOUNT		
1. X	\$ 15,000.00		
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABC ORGANIZATION	R	\$
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORAL	TION OR	\$
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$
9.	SCHEDULE E: LOANS		\$
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	5	\$ 18,739.37
11. X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$ 2,705.00
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	DNS	\$
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$

SUBTOTALS - GPAC

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 5/8 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Public Schools First McKinney 00086764 5 Full name of contributor 4 Amount of Contribution (\$) Date out-of-state PAC (ID#: 7 05/01/2023 \$10,000.00 Appugliese, Richard (Mr.) 6 Contributor address; City; State; Zip Code McKinney, TX 75070 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Chief Operating Officer City Park USA, Inc. Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$)) 05/01/2023 \$5,000.00 Brooks, David (Mr.) Contributor address; City; State; Zip Code McKinney, TX 75071 Principal occupation / Job title (See Instructions) Employer (See Instructions) CEO Independent Financial

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/Politica Credit Card Payment	Event Expense Loan Repaym Fees Office Overhe Food/Beverage Expense Polling Expen Gift/Awards/Memorials Expense Printing Expe	nent/Reimbursement ead/Rental Expense Solicitation/Fundraising Expense sed/Rental Expense Transportation Equipment & Related Expense rse Travel in District nse Travel Out of District es/Contract Labor OTHER (enter a category not listed above)							
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)							
Sch: 1/2 Rpt: 6/8	Public Schools First McKinney	00086764							
4 Date	5 Payee name								
06/28/2023	AGI Marketing								
6 Amount (\$)	7 Payee address; City; State; Zip Code								
\$6,715.00	1113 Hyde Park Dr								
Expenditure from corporate funds	McKinney, TX 75069								
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
OF EXPENDITURE	Consulting Expense	Check if travel outside of Texas. Complete Schedule T.							
-		Check if Austin, TX, officeholder living expense Marketing Consulting							
		Marketing Consulting							
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	I Candidate/Officeholder name Office sough H	t Office held							
Date	Payee name								
06/09/2023	Bado, Angie (Mrs.)								
Amount (\$)	Payee address; City; State; Zip Code								
\$3,484.72	7002 Old York Rd								
Expenditure from corporate funds	McKinney, TX 75072								
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b) Advertising Expense	 Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense MMS Text Messaging (Reimbursement) 							
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sough H	t Office held							
Date	Payee name								
06/01/2023	Executive Press								
Amount (\$)	Payee address; City; State; Zip Code								
\$610.53									
Expenditure from corporate funds	Richardson, TX 75081								
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Advertising Expense 	 Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Yard signs 							
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sough H	t Office held							

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							
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)						
Sch: 2/2 Rpt: 7/8	Public Schools First McKinney 00086764						
4 Date	5 Payee name						
05/22/2023	Stevens, Mike (Mr.)						
6 Amount (\$)	7 Payee address; City; State; Zip Code						
\$3,720.00	6923 Indiana Avenue						
Expenditure from corporate funds	Lubbock, TX 79413						
8 PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Mailer and walking cards 						
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held H						
Date	Payee name						
05/19/2023	Stevens, Mike (Mr.)						
Amount (\$)	Payee address; City; State; Zip Code						
\$2,500.00	6923 Indiana Avenue						
Expenditure from corporate funds	Lubbock, TX 79413						
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Mailers and Walking Cards 						
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held H						
Date	Payee name						
05/01/2023	Targeting Cloud						
Amount (\$) Payee address; City; State; Zip Code							
\$1,709.12							
Expenditure from corporate funds	Littleton, CO 80160-1245						
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense MMS Text Messaging 						
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held H						

UNPAID		BLIGATION	S			SCHEDULE F2
Advertising Expens Accounting/Banking Consulting Expens Contributions/ Don Candidate/Office) e			e Transportation Ec Travel in District Travel Out of Dist	uipment & Related Expense	
Sch: 1/1 Rpt:	nedule F2:2FILER N8/8Public S	AME chools First McKinne	у		3 Filer ID 00086764	(Ethics Commission Filers)
⁴ TOTAL OF U	JNITEMIZED UNPA	ID INCURRED OB	LIGATIONS		\$	
5 Date 05/19/2023	6 Payee na Bado, A	ime ngie (Mrs.)				
7 Amount (\$)		ldress; City; d York Rd	State; Zip Co	ode		
9 TYPE OF	McKinne	ey, TX 75072	Non-Pol	itical		
EXPENDITUR 10 PURPOSE OF EXPENDITUR	(a) Category	(See Categories listed at the ing Expense		(b) Description	vel outside of Texas. Comp stin, TX, officeholder living	
11 Complete ONLY expenditure to b		Officeholder name	Office sou	l Ight	Office he	d
Date 05/22/2023	Payee na Stevens	ıme , Mike (Mr.)				
Amount (\$) \$	Payee ad 2,500.00 6923 In	ldress; City; Jianna Ave	State; Zip Co	ode		
Expenditure from corporate funds	n Lubbocl	x, TX 79413				
TYPE OF EXPENDITUR	e D	Political	Non-Pol	itical		
PURPOSE OF EXPENDITUR	Advertis	(See Categories listed at the ing Expense	top of this schedule)	Check if Au	vel outside of Texas. Comp stin, TX, officeholder living Walking Cards	
Complete ONL) expenditure to b		Officeholder name	Office sou	ight	Office he	d