#### FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00083693 3 COMMITTEE NAME **OFFICE USE ONLY INFORMED Plano Voters** Date Received **ELECTRONICALLY FILED** 01/01/2024 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 1113 Parkview Lane Date Hand-delivered or Date Postmarked Change of Address Plano, TX 75075 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. John NAME NICKNAME LAST **SUFFIX** Witt STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 1113 Parkview Lane STREET **ADDRESS** (Residence or Business) Plano, TX 75075 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 1113 Parkview Lane MAILING **ADDRESS** Plano, TX 75075 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (248) 229-8801 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 07/01/2023 12/31/2023 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special **GO TO PAGE 2**

## GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

# FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)	
INFORMED Plano Voters 0008					
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			
	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	PLEDGES, LOANS, CONTRIBUTIONS N	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00	
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	0.00	
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES			0.00	
	4. TOTAL POLITICA	L EXPENDITURES	\$	0.00	
CONTRIBUTION BALANCE	1	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD			
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF TREPORTING PERIOD	THE \$	0.00	
16 AFFIDAVIT			<u> </u>		
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.			
		Mr. Jo	ohn Witt		
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 v	which, witness my hand and seal of office.			
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title of offic	er administering oath	

### **SUBTOTALS - GPAC**

### FORM GPAC **COVER SHEET PG 3**

				3 of 5
17 COMMITT	(Ethics Cor	nmission Filers)		
INFORM	ED Plano Voters	00083693		
19 SCHEDUI NAME OF	SUBT	OTAL AMOUNT		
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	0.00
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00
3. X	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	0.00
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	)R	\$	
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORAL LABOR ORGANIZATION	ATION 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. X	SCHEDULE E: LOANS		\$	0.00
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$	0.00
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
12. X	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	0.00
13. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	

The Instruction Guide explains how to complete this form.  2 FILER NAME INFORMED Plano Voters  4 TOTAL OF UNITEMIZED PLEDGES  5 Date 6 Full name of pledgor		PLEDGED CONTRIBUTIONS			SCHEDULE B		
2 FILER NAME INFORMED Plano Voters  4 TOTAL OF UNITEMIZED PLEDGES  5 Date 6 Full name of pledgor out-of-state PAC (ID#:		The Instruction Guide explains how to complete this form.	1				
5 Date 6 Full name of pledgor Out-of-state PAC (ID#:) 7 Pledgor Address; City; State; Zip Code Shade of Texas. Complete Schedule T.	2		3	Filer ID (Ethics Comn	nission Filers)		
pledge (\$) (If applicable)  7 Pledgor Address; City; State; Zip Code  Check if travel outside of Texas. Complete Schedule T.	4	TOTAL OF UNITEMIZED PLEDGES		\$	0.00		
Check if travel outside of Texas. Complete Schedule T.	5		8		kind description If applicable)		
				Check if troval outside of To	vas Camplete Schadule T		
Employer (See Instructions)  Letter the property and the property of the Instructions of the Instruction of the Ins	10	Dringing accumation / Joh title (See Instructions)	ᄔ		xas. Complete Schedule 1.		
	"(	Employer (See Instructions)	uctic	ons)			

	LOANS						SCHED	ULE <b>E</b>
	The Instruction Guide explains how to complete this form					ges Schedule E: L Rpt: 5/5		
2	FILER NAME INFORMED Plai	no Voters			I	3 Filer ID (Ethics Commission Filers) 00083693		
4	TOTAL OF UN	IITEMIZED LOANS			<b>I</b>		\$	0.00
5	Date of loan	7 Name of lender	out-of-state PA	C (ID#:		)	9 Loan Amount (	\$)
6	Is lender a financial institution?	8 Lender address; City;	State;	Zip Code			10 Interest Rate	
							<b>11</b> Maturity Date	
12	Principal occupation	on / Job title (See Instructions)		13 Employer (See Ins	structions)			
14	Description of Coll	ateral		15 Check if personal	funds were d	eposited	into political accou	
16	GUARANTOR INFORMATION	17 Name of guarantor					19 Amount Guarai	nteed (\$)
	not applicable	18 Guarantor address; City;	State;	Zip Code				
20 Principal occupation			21 Employer (See Ins	structions)				