

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) 00086990 | 2 Total pages filed: 30 |
| 3 COMMITTEE NAME McKinney Values PAC | | OFFICE USE ONLY | |
| | | Date Received ELECTRONICALLY FILED 01/14/2024 | |
| 4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address | | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 5100 Eldorado Parkway Suite 102-336 McKinney, TX 75070 | |
| | | Date Hand-delivered or Date Postmarked | |
| | | Receipt # | Amount |
| | | Date Processed | |
| | | Date Imaged | |
| 5 CAMPAIGN TREASURER NAME | | MS / MRS / MR FIRST MI Mr. Joseph C. | |
| | | NICKNAME LAST SUFFIX Joe Arco | |
| 6 CAMPAIGN TREASURER STREET ADDRESS <small>(Residence or Business)</small> | | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 5608 Sandalwood Dr. Mckinney, TX 75072 | |
| 7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address | | STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 5608 Sandalwood Dr. Mckinney, TX 75072 | |
| 8 CAMPAIGN TREASURER PHONE | | AREA CODE PHONE NUMBER EXTENSION (818) 427-3678 | |
| 9 REPORT TYPE | | <input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff | |
| 10 PERIOD COVERED | | Month Day Year Month Day Year 07/01/2023 THROUGH 12/31/2023 | |
| 11 ELECTION | | ELECTION DATE ELECTION TYPE Month Day Year <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other 03/05/2024 <input type="checkbox"/> General <input type="checkbox"/> Special | |

GO TO PAGE 2

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

| | |
|---|---|
| 12 COMMITTEE NAME McKinney Values PAC | 13 Filer ID (Ethics Commission Filers) 00086990 |
|---|---|

| | | | |
|---|--|---|--|
| 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 | |
| | | 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.) | Commissioner Susan Fletcher Collin county commissioner precinct 1 | |

| | | | |
|-------------------------------|--|----|----------|
| 15 CONTRIBUTION TOTALS | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) | \$ | 0.00 |
| | <input checked="" 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) | \$ | 7,038.23 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | \$ | 0.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ | 5,851.97 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ | 1,771.23 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ | 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.

Mr. Joseph C. Arco

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

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**
ADDENDUM

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| | | |
|---|--|---|
| 12 COMMITTEE NAME McKinney Values PAC | | 13 Filer ID (Ethics Commission Filers) 00086990 |
| 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 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.) | Commissioner Darrell Hale Collin county commissioner precinct 3 |
| | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported 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.) | Matt Carpenter Collin County Constable precinct 1 |
| 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 Steve Asher Collin county constable precinct 4 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.) | |

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**
ADDENDUM

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| | | |
|---|--|---|
| 12 COMMITTEE NAME McKinney Values PAC | | 13 Filer ID (Ethics Commission Filers) 00086990 |
| 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 Chuck Branch State Representative 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.) | |
| | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Karisa Richardson State Representative 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.) | |
| 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 Daren Meis State Representative 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.) | | |

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**
ADDENDUM

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| | | |
|---|--|--|
| 12 COMMITTEE NAME McKinney Values PAC | | 13 Filer ID (Ethics Commission Filers) 00086990 |
| 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 Abraham George State Representative 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.) | |
| | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Kim Laseter Criminal District Court Judge 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.) | |
| 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 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.) | Jim Skinner Collin county sheriff | |

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**
ADDENDUM

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| | | |
|---|--|--|
| 12 COMMITTEE NAME McKinney Values PAC | | 13 Filer ID (Ethics Commission Filers) 00086990 |
| 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 Cam McCall Collin county tax assessor collector 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.) | |
| 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 Shelby Williams County Party Chair 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.) | |
| 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 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.) | Pam Little State Board Of Education |

SUBTOTALS - GPAC

| | | |
|---|---|---|
| 17 COMMITTEE NAME McKinney Values PAC | | 18 Filer ID (Ethics Commission Filers) 00086990 |
| 19 SCHEDULE SUBTOTALS | | SUBTOTAL AMOUNT |
| | NAME OF SCHEDULE | |
| 1. | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ 7,038.23 |
| 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 | \$ 5,851.97 |
| 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: 1/15 Rpt: 8/30 |
| 2 FILER NAME McKinney Values PAC | | 3 Filer ID (Ethics Commission Filers) 00086990 |
| 4 Date 10/20/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arco, Joseph <hr/> 6 Contributor address; City; State; Zip Code McKinney, TX 75072 | 7 Amount of Contribution (\$) \$25.00 |
| 8 Principal occupation / Job title (See Instructions) retired | | 9 Employer (See Instructions) retired |
| Date 10/08/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bado, Ken <hr/> Contributor address; City; State; Zip Code McKinney, TX 75072 | Amount of Contribution (\$) \$5.00 |
| Principal occupation / Job title (See Instructions) CEO | | Employer (See Instructions) GMB Consulting LLC |
| Date 08/23/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boddy, Todd <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070 | Amount of Contribution (\$) \$110.00 |
| Principal occupation / Job title (See Instructions) Retirement Income Planning | | Employer (See Instructions) Longhorn Retirement LLC |
| Date 09/21/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boe, Kristina <hr/> Contributor address; City; State; Zip Code McKinney, TX 75069 | Amount of Contribution (\$) \$60.00 |
| Principal occupation / Job title (See Instructions) Self employed | | Employer (See Instructions) Self employed |
| Date 08/24/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brock, Sarah <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070 | Amount of Contribution (\$) \$400.00 |
| Principal occupation / Job title (See Instructions) Housewife | | Employer (See Instructions) None |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 2/15 Rpt: 9/30 |
| 2 FILER NAME McKinney Values PAC | | 3 Filer ID (Ethics Commission Filers) 00086990 |
| 4 Date 07/03/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruno, Erick <hr/> 6 Contributor address; City; State; Zip Code McKinney, TX 75072 | 7 Amount of Contribution (\$) \$20.00 |
| 8 Principal occupation / Job title (See Instructions) Case Manager | | 9 Employer (See Instructions) Action Visa International |
| Date 10/19/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buettner, Russ <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070 | Amount of Contribution (\$) \$5.00 |
| Principal occupation / Job title (See Instructions) Oil and Gas executive | | Employer (See Instructions) retired |
| Date 07/03/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chabot, Paul <hr/> Contributor address; City; State; Zip Code McKinney, TX 75071 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) Real estate | | Employer (See Instructions) Chabot Strategies |
| Date 09/01/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chabot, Paul <hr/> Contributor address; City; State; Zip Code McKinney, TX 75071 | Amount of Contribution (\$) \$40.00 |
| Principal occupation / Job title (See Instructions) Self employed | | Employer (See Instructions) Self employed |
| Date 09/24/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chamberlain Strupp, Nancy <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070 | Amount of Contribution (\$) \$160.00 |
| Principal occupation / Job title (See Instructions) Lawyer | | Employer (See Instructions) Retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 3/15 Rpt: 10/30 |
| 2 FILER NAME McKinney Values PAC | | 3 Filer ID (Ethics Commission Filers) 00086990 |
| 4 Date 11/07/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chamberlain Strupp, Nancy <hr/> 6 Contributor address; City; State; Zip Code McKinney, TX 75070 | 7 Amount of Contribution (\$) \$10.00 |
| 8 Principal occupation / Job title (See Instructions) Lawyer | | 9 Employer (See Instructions) Retirex |
| Date 09/30/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cheung, Melissa <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070 | Amount of Contribution (\$) \$160.00 |
| Principal occupation / Job title (See Instructions) Finance Director | | Employer (See Instructions) PepsiCo Inc |
| Date 10/18/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chung, Meera <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) Homemaker | | Employer (See Instructions) Self |
| Date 09/28/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Kenny <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) Business Owner | | Employer (See Instructions) Minuteman Press |
| Date 08/25/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corcoran, Wendy <hr/> Contributor address; City; State; Zip Code McKinney, TX 75072 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) IT contractor | | Employer (See Instructions) Self employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 4/15 Rpt: 11/30 |
| 2 FILER NAME McKinney Values PAC | | 3 Filer ID (Ethics Commission Filers) 00086990 |
| 4 Date 10/06/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corcoran, Wendy <hr/> 6 Contributor address; City; State; Zip Code McKinney, TX 75072 | 7 Amount of Contribution (\$) \$40.00 |
| 8 Principal occupation / Job title (See Instructions) Self employed | | 9 Employer (See Instructions) Self employed |
| Date 09/20/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corcoran, Wendy <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070 | Amount of Contribution (\$) \$5.00 |
| Principal occupation / Job title (See Instructions) IT contractor | | Employer (See Instructions) Self employed |
| Date 12/15/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corcoran, Wendy <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070 | Amount of Contribution (\$) \$90.00 |
| Principal occupation / Job title (See Instructions) IT contractor | | Employer (See Instructions) Self |
| Date 08/27/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craycraft, Matt <hr/> Contributor address; City; State; Zip Code McKinney, TX 75071 | Amount of Contribution (\$) \$60.00 |
| Principal occupation / Job title (See Instructions) Self employed | | Employer (See Instructions) Self employed |
| Date 10/11/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dellanno, Lanora <hr/> Contributor address; City; State; Zip Code McKinney, TX 75071 | Amount of Contribution (\$) \$60.00 |
| Principal occupation / Job title (See Instructions) Self employed | | Employer (See Instructions) Self employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 5/15 Rpt: 12/30 |
| 2 FILER NAME McKinney Values PAC | | 3 Filer ID (Ethics Commission Filers) 00086990 |
| 4 Date 09/28/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dionno, Matthew <hr/> 6 Contributor address; City; State; Zip Code McKinney, TX 75070 | 7 Amount of Contribution (\$) \$320.00 |
| 8 Principal occupation / Job title (See Instructions) Accountant | | 9 Employer (See Instructions) Toyota |
| Date 08/26/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunn, Russell <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070 | Amount of Contribution (\$) \$185.00 |
| Principal occupation / Job title (See Instructions) self employed | | Employer (See Instructions) Maid in Texas |
| Date 09/29/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunn, Russell <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070 | Amount of Contribution (\$) \$90.00 |
| Principal occupation / Job title (See Instructions) Self | | Employer (See Instructions) Maid in Texas |
| Date 10/19/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunn, Russell <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070 | Amount of Contribution (\$) \$5.00 |
| Principal occupation / Job title (See Instructions) owner | | Employer (See Instructions) Maid in Texas |
| Date 10/10/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Durrance, Anne <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070 | Amount of Contribution (\$) \$180.00 |
| Principal occupation / Job title (See Instructions) Teacher | | Employer (See Instructions) McKinney ISD |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 6/15 Rpt: 13/30 |
| 2 FILER NAME McKinney Values PAC | | 3 Filer ID (Ethics Commission Filers) 00086990 |
| 4 Date 07/12/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Durrance, Cyndi | 7 Amount of Contribution (\$) \$10.00 |
| | 6 Contributor address; City; State; Zip Code Dallas, TX 75219 | |
| 8 Principal occupation / Job title (See Instructions) Sales & Marketing Manager | | 9 Employer (See Instructions) A Place At Home |
| Date 11/03/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Durrance, Cynthia | Amount of Contribution (\$) \$40.00 |
| | Contributor address; City; State; Zip Code McKinney, TX 75070 | |
| Principal occupation / Job title (See Instructions) Sales manager | | Employer (See Instructions) APAH |
| Date 12/19/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrison, Jim | Amount of Contribution (\$) \$60.00 |
| | Contributor address; City; State; Zip Code McKinney, TX 75070 | |
| Principal occupation / Job title (See Instructions) Producer | | Employer (See Instructions) Logistix Media |
| Date 11/17/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffith, Bill | Amount of Contribution (\$) \$40.00 |
| | Contributor address; City; State; Zip Code McKinney, TX 75072 | |
| Principal occupation / Job title (See Instructions) Self employed | | Employer (See Instructions) Self employed |
| Date 10/16/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, Anthony | Amount of Contribution (\$) \$10.00 |
| | Contributor address; City; State; Zip Code McKinney, TX 75070 | |
| Principal occupation / Job title (See Instructions) Assistant | | Employer (See Instructions) TX |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 7/15 Rpt: 14/30 |
| 2 FILER NAME McKinney Values PAC | | 3 Filer ID (Ethics Commission Filers) 00086990 |
| 4 Date 08/26/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Shane <hr/> 6 Contributor address; City; State; Zip Code McKinney, TX 75070 | 7 Amount of Contribution (\$) \$160.00 |
| 8 Principal occupation / Job title (See Instructions) Physical Therapist | | 9 Employer (See Instructions) Therapy Partners Group |
| Date 09/01/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holcomb, Wendy <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) Self employed | | Employer (See Instructions) Self employed |
| Date 08/26/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John, Jensen <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070 | Amount of Contribution (\$) \$40.00 |
| Principal occupation / Job title (See Instructions) Self employed | | Employer (See Instructions) Self employed |
| Date 10/04/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Cindy <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070 | Amount of Contribution (\$) \$90.00 |
| Principal occupation / Job title (See Instructions) Admin | | Employer (See Instructions) Cooper Concrete |
| Date 10/04/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Cindy <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070 | Amount of Contribution (\$) \$360.00 |
| Principal occupation / Job title (See Instructions) Admin | | Employer (See Instructions) Cooper Concrete |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 8/15 Rpt: 15/30 |
| 2 FILER NAME McKinney Values PAC | | 3 Filer ID (Ethics Commission Filers) 00086990 |
| 4 Date 10/17/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kemp, David <hr/> 6 Contributor address; City; State; Zip Code McKinney, TX 75070 | 7 Amount of Contribution (\$) \$10.00 |
| 8 Principal occupation / Job title (See Instructions) Assistant | | 9 Employer (See Instructions) TX |
| Date 08/28/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kerz, Tara <hr/> Contributor address; City; State; Zip Code McKinney, TX 75072 | Amount of Contribution (\$) \$60.00 |
| Principal occupation / Job title (See Instructions) Self employed | | Employer (See Instructions) Self employed |
| Date 10/17/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knapp, Elizabeth <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070 | Amount of Contribution (\$) \$5.00 |
| Principal occupation / Job title (See Instructions) Self | | Employer (See Instructions) Self |
| Date 10/09/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lammle, Joshua <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070 | Amount of Contribution (\$) \$110.00 |
| Principal occupation / Job title (See Instructions) CEO | | Employer (See Instructions) Digna Solutions |
| Date 11/16/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laseter, Kimberly <hr/> Contributor address; City; State; Zip Code Prosper, TX 75078 | Amount of Contribution (\$) \$5.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) Laseter Law Firm |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 9/15 Rpt: 16/30 |
| 2 FILER NAME McKinney Values PAC | | 3 Filer ID (Ethics Commission Filers) 00086990 |
| 4 Date 10/15/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MacDonald, Andy <hr/> 6 Contributor address; City; State; Zip Code McKinney, TX 75071 | 7 Amount of Contribution (\$) \$60.00 |
| 8 Principal occupation / Job title (See Instructions) Self employed | | 9 Employer (See Instructions) Self employed |
| Date 08/24/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCall, Cam <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070 | Amount of Contribution (\$) \$320.00 |
| Principal occupation / Job title (See Instructions) Supervisor Collin County Tax Assessor Collector Office | | Employer (See Instructions) Collin County |
| Date 10/08/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meis, Daren <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070 | Amount of Contribution (\$) \$170.00 |
| Principal occupation / Job title (See Instructions) Seniro Director of Account Management | | Employer (See Instructions) Copart |
| Date 10/15/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nair, Arundev <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070 | Amount of Contribution (\$) \$60.00 |
| Principal occupation / Job title (See Instructions) Technology product owner / soldier | | Employer (See Instructions) Accenture Federal services / US Army Ready Reserves |
| Date 07/01/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newgent, Mark <hr/> Contributor address; City; State; Zip Code Mckinney, TX 75072 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) Self employed | | Employer (See Instructions) retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 10/15 Rpt: 17/30 |
| 2 FILER NAME McKinney Values PAC | | 3 Filer ID (Ethics Commission Filers) 00086990 |
| 4 Date 08/16/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newgent, Mark <hr/> 6 Contributor address; City; State; Zip Code McKinney, TX 75072 | 7 Amount of Contribution (\$) \$100.00 |
| 8 Principal occupation / Job title (See Instructions) retired | | 9 Employer (See Instructions) retired |
| Date 12/19/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petrazio, Joel <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070 | Amount of Contribution (\$) \$5.00 |
| Principal occupation / Job title (See Instructions) Lawyer | | Employer (See Instructions) Self Petrazio Law Firm |
| Date 09/28/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petty, Richard <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070 | Amount of Contribution (\$) \$160.00 |
| Principal occupation / Job title (See Instructions) N/A | | Employer (See Instructions) N/A |
| Date 09/28/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Philips, Charlie <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070 | Amount of Contribution (\$) \$160.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) Philips & Epperson Attorneys |
| Date 07/09/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rocha, Aaron <hr/> Contributor address; City; State; Zip Code Pilot Point, TX 76258 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Creative and digital marketing | | Employer (See Instructions) Self |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 11/15 Rpt: 18/30 |
| 2 FILER NAME McKinney Values PAC | | 3 Filer ID (Ethics Commission Filers) 00086990 |
| 4 Date 10/14/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rowen, Edward <hr/> 6 Contributor address; City; State; Zip Code McKinney, TX 75070 | 7 Amount of Contribution (\$) \$5.00 |
| 8 Principal occupation / Job title (See Instructions) Businessman | | 9 Employer (See Instructions) Rough Rider Strategies |
| Date 11/14/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rowen, Edward <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070 | Amount of Contribution (\$) \$15.00 |
| Principal occupation / Job title (See Instructions) Sales Executive | | Employer (See Instructions) Rough Rider Strategies |
| Date 08/25/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmidt, Robert <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070 | Amount of Contribution (\$) \$160.00 |
| Principal occupation / Job title (See Instructions) Regional Manager | | Employer (See Instructions) Vetcor |
| Date 08/30/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaw, Rachel <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) TX | | Employer (See Instructions) TX |
| Date 09/15/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaw, Rachel & Jarrod <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070 | Amount of Contribution (\$) \$60.00 |
| Principal occupation / Job title (See Instructions) Small business owner | | Employer (See Instructions) Self employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 12/15 Rpt: 19/30 |
| 2 FILER NAME McKinney Values PAC | | 3 Filer ID (Ethics Commission Filers) 00086990 |
| 4 Date 10/09/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shiflett, Elbert | 7 Amount of Contribution (\$) \$5.00 |
| 6 Contributor address; City; State; Zip Code McKinney, TX 75070 | | |
| 8 Principal occupation / Job title (See Instructions) Assistant | | 9 Employer (See Instructions) TX |
| Date 12/19/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shiflett, Elbert | Amount of Contribution (\$) \$10.00 |
| Contributor address; City; State; Zip Code McKinney, TX 75070 | | |
| Principal occupation / Job title (See Instructions) Texas | | Employer (See Instructions) Texas |
| Date 09/30/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stange, Jared | Amount of Contribution (\$) \$185.00 |
| Contributor address; City; State; Zip Code McKinney, TX 75070 | | |
| Principal occupation / Job title (See Instructions) Finance | | Employer (See Instructions) ATT |
| Date 09/06/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stelzer, Danielle | Amount of Contribution (\$) \$160.00 |
| Contributor address; City; State; Zip Code McKinney, TX 75070 | | |
| Principal occupation / Job title (See Instructions) Server | | Employer (See Instructions) Texas Roadhouse |
| Date 08/21/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swain, Chris | Amount of Contribution (\$) \$10.00 |
| Contributor address; City; State; Zip Code McKinney, TX 75070 | | |
| Principal occupation / Job title (See Instructions) Software Sales | | Employer (See Instructions) Deel |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 13/15 Rpt: 20/30 |
| 2 FILER NAME McKinney Values PAC | | 3 Filer ID (Ethics Commission Filers) 00086990 |
| 4 Date 10/19/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tran, Thai-Son <hr/> 6 Contributor address; City; State; Zip Code McKinney, TX 75072 | 7 Amount of Contribution (\$) \$5.00 |
| 8 Principal occupation / Job title (See Instructions) Prosperity Architect | | 9 Employer (See Instructions) InfiniteJoy Financial |
| Date 12/17/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vranich, Joseph <hr/> Contributor address; City; State; Zip Code McKinney, TX 75071 | Amount of Contribution (\$) \$60.00 |
| Principal occupation / Job title (See Instructions) Self employed | | Employer (See Instructions) Self employed |
| Date 08/23/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vranich, Joseph <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070 | Amount of Contribution (\$) \$185.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 12/17/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vranich, Joseph <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070 | Amount of Contribution (\$) \$45.00 |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) Retired |
| Date 07/04/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warren, Tammy <hr/> Contributor address; City; State; Zip Code Mckinney, TX 75070 | Amount of Contribution (\$) \$5.00 |
| Principal occupation / Job title (See Instructions) Executive Assistant | | Employer (See Instructions) Emerson |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 14/15 Rpt: 21/30 |
| 2 FILER NAME McKinney Values PAC | | 3 Filer ID (Ethics Commission Filers) 00086990 |
| 4 Date 08/04/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warren, Tammy <hr/> 6 Contributor address; City; State; Zip Code McKinney, TX 75070 | 7 Amount of Contribution (\$) \$5.00 |
| 8 Principal occupation / Job title (See Instructions) Executive Assistant | | 9 Employer (See Instructions) Emerson |
| Date 08/24/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warren, Tammy <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070 | Amount of Contribution (\$) \$60.00 |
| Principal occupation / Job title (See Instructions) Self employed | | Employer (See Instructions) Self employed |
| Date 08/27/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warren, Tammy <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070 | Amount of Contribution (\$) \$160.00 |
| Principal occupation / Job title (See Instructions) Executive Assistant | | Employer (See Instructions) Emerson |
| Date 12/08/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Emily <hr/> Contributor address; City; State; Zip Code Sherman, TX 75090 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Groomer | | Employer (See Instructions) Big dog little dog |
| Date 11/07/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Emily <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070 | Amount of Contribution (\$) \$20.00 |
| Principal occupation / Job title (See Instructions) Dog groomer | | Employer (See Instructions) Bdld |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 15/15 Rpt: 22/30 |
| 2 FILER NAME McKinney Values PAC | | 3 Filer ID (Ethics Commission Filers) 00086990 |
| 4 Date 08/27/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) knutson, vicki <hr/> 6 Contributor address; City; State; Zip Code McKinney, TX 75070 | 7 Amount of Contribution (\$) \$160.00 |
| 8 Principal occupation / Job title (See Instructions) Esthetician | | 9 Employer (See Instructions) LED Skin Care Spa |
| Date 12/31/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) lump, sum <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070 | Amount of Contribution (\$) \$668.23 |
| Principal occupation / Job title (See Instructions) lump sum | | Employer (See Instructions) lump sum |
| Date 11/16/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) wagner, jack <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) Data Scientist / Engineer | | Employer (See Instructions) Validate Health |

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: 1/8 Rpt: 23/30 | 2 FILER NAME McKinney Values PAC | 3 Filer ID (Ethics Commission Filers) 00086990 |
| 4 Date 11/14/2023 | 5 Payee name Amazon | |
| 6 Amount (\$) \$76.05 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 410 Terry Ave North Seattle, WA 98109 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense EVENT |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 12/31/2023 | Payee name Anedot | |
| Amount (\$) \$66.60 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 106 Blvd Haussmann Dallas, TX 75201 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense OTHER |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 11/20/2023 | Payee name Collin County Republican Plano | |
| Amount (\$) \$25.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 2963 W 15th St Plano, TX 75075 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense OTHER |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

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: 2/8 Rpt: 24/30 | 2 FILER NAME McKinney Values PAC | 3 Filer ID (Ethics Commission Filers) 00086990 |
| 4 Date 10/23/2023 | 5 Payee name Delaney's | |
| 6 Amount (\$) \$50.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 6150 Eldorado Pwy McKinney, TX 75072 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense EVENT |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 07/07/2023 | Payee name Fred Shots Photograpy | |
| Amount (\$) \$75.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 4697189749 phone McKinney, TX 75071 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ADVERTISE |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 07/03/2023 | Payee name Gray Wolf Promotions | |
| Amount (\$) \$126.40 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 2900 Hwy 121 175 Beford, TX 76021 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ADVERTISE |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

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.

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| 1 Total pages Schedule F1: Sch: 3/8 Rpt: 25/30 | 2 FILER NAME McKinney Values PAC | 3 Filer ID (Ethics Commission Filers) 00086990 |
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| 4 Date 11/06/2023 | 5 Payee name Hamms Meat Makt |
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| 6 Amount (\$) \$89.99 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 307 W Louisiana McKinney, TX 75069 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense EVENT |
|---------------------------------|--|---|

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|--|-----------------------------|---------------|-------------|
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

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| Date 08/03/2023 | Payee name Maddskillzm |
|--------------------|---------------------------|

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|---|---|
| Amount (\$) \$55.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 130 Maverick Ln Pilot Pint, TX 76258 |
|---|---|

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ADVERTISE |
|------------------------|--|---|

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|---|-----------------------------|---------------|-------------|
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

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| Date 09/26/2023 | Payee name Maddskillzm |
|--------------------|---------------------------|

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| Amount (\$) \$200.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 130 Maverick Ln Pilot Pint, TX 76258 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ADVERTISE |
|------------------------|--|---|

| | | | |
|---|-----------------------------|---------------|-------------|
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

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: 4/8 Rpt: 26/30 | 2 FILER NAME McKinney Values PAC | 3 Filer ID (Ethics Commission Filers) 00086990 |
| 4 Date 09/20/2023 | 5 Payee name Mail America | |
| 6 Amount (\$) \$120.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 5100 Eldorado Pkw McKinney, TX 75072 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense OTHER |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 10/18/2023 | Payee name McKinney Chamber of Commerce | |
| Amount (\$) \$100.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 7300 State Hwy 121 McKinney, TX 75070 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense EVENT |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 08/04/2023 | Payee name Paradin | |
| Amount (\$) \$180.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1154 Solana Ave Winter Pakr, FL 32789 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense EVENT |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

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: 5/8 Rpt: 27/30 | 2 FILER NAME McKinney Values PAC | 3 Filer ID (Ethics Commission Filers) 00086990 |
| 4 Date 10/27/2023 | 5 Payee name SendinBlue Paris | |
| 6 Amount (\$) \$35.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 106 Blvd Haussmann Paris Paris 75008 France | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ADVERTISE |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 10/27/2023 | Payee name SendinBlue Paris | |
| Amount (\$) \$0.39 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 106 Blvd Haussmann Paris Paris 75008 France | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ADVERTISE |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 11/27/2023 | Payee name SendinBlue Paris | |
| Amount (\$) \$35.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 106 Blvd Haussmann Paris Paris 75008 France | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ADVERTISE |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

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.

| | | |
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| 1 Total pages Schedule F1: Sch: 6/8 Rpt: 28/30 | 2 FILER NAME McKinney Values PAC | 3 Filer ID (Ethics Commission Filers) 00086990 |
| 4 Date 11/27/2023 | 5 Payee name SendinBlue Paris | |
| 6 Amount (\$) \$0.39 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 106 Blvd Haussmann Paris Paris 75008 France | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ADVERTISE |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 12/23/2023 | Payee name SendinBlue Paris | |
| Amount (\$) \$35.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 106 Blvd Haussmann Paris Paris 75008 France | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ADVERTISE |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 12/23/2023 | Payee name SendinBlue Paris | |
| Amount (\$) \$0.39 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 106 Blvd Haussmann Paris Paris 75008 France | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ADVERTISE |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

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.

| | | |
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| 1 Total pages Schedule F1: Sch: 7/8 Rpt: 29/30 | 2 FILER NAME McKinney Values PAC | 3 Filer ID (Ethics Commission Filers) 00086990 |
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| 4 Date 11/20/2023 | 5 Payee name The Celt |
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| 6 Amount (\$) \$151.42 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 100 N Tennesse St McKinney, TX 75069 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense EVENT |
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| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 10/02/2023 | Payee name WAC Entertainment Duluth |
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| Amount (\$) \$1,372.28 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1600 Pacific Ave Dalla, TX 75201 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense EVENT |
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| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 09/16/2023 | Payee name Warren, Tammy |
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| Amount (\$) \$1,372.28 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 3109 Westview Dr McKinney, TX 75070 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense EVENT |
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| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

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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.

| | | |
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| 1 Total pages Schedule F1: Sch: 8/8 Rpt: 30/30 | 2 FILER NAME McKinney Values PAC | 3 Filer ID (Ethics Commission Filers) 00086990 |
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| 4 Date 10/19/2023 | 5 Payee name Warren, Tammy |
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|---|---|
| 6 Amount (\$) \$1,400.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 3109 Westview Dr McKinney, TX 75070 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense EVENT |
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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 09/07/2023 | Payee name Wix.com |
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| Amount (\$) \$285.78 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 500 Terry A Francois Blvd San Francisco, CA 94158 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense OTHER |
|-------------------------------|---|---|

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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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