#### FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00031892 3 COMMITTEE NAME **OFFICE USE ONLY** Plano Police Association PAC Date Received **ELECTRONICALLY FILED** 06/02/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** P.O. Box 861956 Change of Address Plano, TX 75086 Date Hand-delivered or Date Postmarked MS / MRS / MR **CAMPAIGN FIRST** MI **TREASURER** Receipt # Amount Mr. Aaron M. NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Graham CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE TREASURER PO BOX 861956 STREET **ADDRESS** (Residence or Business) Plano, TX 75086-1956 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** PO BOX 861956 MAILING **ADDRESS** Change of Address Plano, TX 75086-1956 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (601) 917-1210 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 April 5 July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 August 5 November 5 September 5 December 5 March 5 X June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 04/26/2024 05/25/2024

## MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

# FORM MPAC COVER SHEET PG 2

| L2 COMMITTEE NAME Plano Police Association                          | PAC  |  | <b>13</b> File:                        | r ID (Ethics Commission Filers)<br>31892                     |
|---|--|--|--|--|
| 4 COMMITTEE   | 1. Candidates  | A. Supported Mrs. Kim Laseter Distric  |  |  |
|   | Identify by name or, if applicable, classify by party.)                                    |  |  |  |
| (Attach lists on plain paper to complete this report if necessary.) |  | B. Opposed   |  |  |
| -<br> -   | 2. Measures  | A. Supported   |  |  |
|   | Describe by date and location of election and nature of issue.)                            | 7. Copported   |  |  |
|   |  | B. Opposed   |  |  |
|   | 3. Officeholders Assisted Identify by name or, if applicable, classify by party.)          |  |  |  |
|   | , , , , ,  | POLITICAL CONTRIBUTIONS (OTLIER TI   | IAN                                    | <u> </u>   |
| TOTALS  | PLEDGES, LOANS, CONTRIBUTIONS M  | POLITICAL CONTRIBUTIONS (OTHER TH<br>OR GUARANTEES OF LOANS, OR<br>ADE ELECTRONICALLY)<br>qualifies for the higher itemization threshold | 1AN                                    | \$ 0.00  |
| [7  | 2. TOTAL POLITICA  | L CONTRIBUTIONS  |  | \$ 0.00  |
|   | (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)  |  |  | 0.00   |
| EXPENDITURE TOTALS  | 3. TOTAL UNITEMIZED  | POLITICAL EXPENDITURES   |  | \$ 0.00  |
|   | 4. TOTAL POLITICA  | L EXPENDITURES   |  | \$ 234.14  |
| CONTRIBUTION 5  | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD     |  | \$ 18,727.6                            |  |
| OUTSTANDING<br>LOAN TOTALS  | TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD |  |  | \$ 0.00  |
| .6 AFFIDAVIT  |  |  |  | I  |
|   |  | I swear, or affirm, under penalt<br>true and correct and includes a<br>under Title 15, Election Code.                                    | ty of perjury, th<br>all information r | nat the accompanying report is required to be reported by me |
|   |  | Mr.  | Aaron M. Gra                           | aham   |
|   |  | Signature  | e of Campaign                          | Treasurer  |
| AFFIX NOTARY S  | TAMP / SEAL ABOVE  |  |  |  |
| Sworn to and subscribed b   | efore me. by the said  |  | . this the                             | day  |
|   |  | which, witness my hand and seal of office.   | ,                                      |  |
|   |  |  |  |  |
| Signature of officer adm  | inistering oath  | Printed name of officer administering oath   | Title                                  | e of officer administering oath                              |

### **SUBTOTALS - MPAC**

# FORM MPAC COVER SHEET PG 3

|                       |  |              |                | 3 of 8       |
|-----------------------|--|--------------|----------------|--------------|
| 17 COMMITT            | EE NAME  | 18 Filer ID  | (Ethics Commis | sion Filers) |
| Plano Po              |  |              |                |              |
| 19 SCHEDUI<br>NAME OF | SUBTOTA  | L AMOUNT     |                |              |
| 1. X                  | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                                      |              | \$             | 0.00         |
| 2. X                  | 2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS                   |              |                | 0.00         |
| 3. X                  | X SCHEDULE B: PLEDGED CONTRIBUTIONS  |              |                | 0.00         |
| 4.                    | SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO<br>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                        | SANIZATION   | \$             |              |
| 7.                    | SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION           | 1            | \$             |              |
| 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 CONTRIBUTION                    | S            | \$             | 234.14       |
| 11. X                 | SCHEDULE F2: UNPAID INCURRED OBLIGATIONS   |              | \$             | 0.00         |
| 12. X                 | SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTI                     | ONS          | \$             | 0.00         |
| 13. X                 | SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD                                      |              | \$             | 0.00         |
| 14.                   | SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTI                   | ONS          | \$             |              |
| 15.                   | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER          | RETURNED     | \$             |              |
|                       |  |              | •              |              |

| PLE   | OGED CONTRIBU                              | TIONS                 |                      |           | SCHEDULE I  | В      |  |
|---|--|-----------------------|----------------------|-----------|---|--------|--|
| The Instruction Guide explains how to complete this form. |  |                       |                      | 1         | Total pages Schedule B:<br>Sch: 1/1 Rpt: 4/8              | B:     |  |
|   | Plano Police Association PAC               |                       |                      |           | 3 Filer ID (Ethics Commission Filers) 00031892            |        |  |
| <u></u>   | OF UNITEMIZED PLEDG                        | ES                    |                      |           |   | 0.00   |  |
| 5 Date  | 6 Full name of pledgor  7 Pledgor Address; | out-of-state PAC (ID# |                      | 8         | Amount of pledge (\$) In-kind description (If applicable) |        |  |
|   |  |                       | T.,                  | [         | Check if travel outside of Texas. Complete Sche           | dule T |  |
| 10 Principal  | occupation / Job title (See Instru         | ctions)               | 11 Employer (See Ins | struction | ons)  |        |  |
|   |  |                       |                      |           |   |        |  |
|   |  |                       |                      |           |   |        |  |

|    | LOANS   |                                  |                 |                               |                    | SCHEDUI  | ΕE      |
|----|---|----------------------------------|-----------------|-------------------------------|--------------------|--|---------|
|    | The Instruction Guide explains how to complete this form. |                                  |                 |                               | 1                  | ages Schedule E:<br>/1 Rpt: 5/8                |         |
|    | FILER NAME<br>Plano Police Ass                            | sociation PAC                    |                 |                               | 3 Filer ID 00031   | (Ethics Commission                             | Filers) |
| 4  | TOTAL OF UN   | IITEMIZED LOANS                  |                 |                               | •                  | \$   | 0.00    |
| 5  | Date of loan  | 7 Name of lender                 | out-of-state PA | C (ID#:                       | 9 Loan Amount (\$) |  |         |
|    | Is lender a<br>financial<br>institution?                  | 8 Lender address; C              | City; State;    | Zip Code                      |                    | 10 Interest Rate                               |         |
|    |   |                                  |                 |                               |                    | 11 Maturity Date                               |         |
| 12 | Principal occupation                                      | on / Job title (See Instructions | )               | 13 Employer (See Instructions | 5)                 | -  |         |
| 14 | Description of Coll  None                                 | ateral                           |                 | 15 Check if personal funds we | ere deposite       | d into political account<br>(See Instructions) |         |
|    | GUARANTOR<br>INFORMATION                                  | 17 Name of guarantor             |                 |                               |                    | 19 Amount Guarante                             | ed (\$) |
|    | not applicable  | <b>18</b> Guarantor address; C   | City; State;    | Zip Code                      |                    |  |         |
|    |   |                                  |                 |                               |                    |  |         |
| 20 | Principal occupation                                      | I<br>on                          |                 | 21 Employer (See Instructions | 5)                 | 1  |         |
|    |   |                                  |                 |                               |                    |  |         |

## 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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor, Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (onter a category pet listed above)

| Credit Card Payment   | The Instruction Guide explains how to com                        | plete this form.  |
|---|--|---|
| 1 Total pages Schedule F1:                                    |  | 3 Filer ID (Ethics Commission Filers)   |
| Sch: 1/3 Rpt: 6/8   | Plano Police Association PAC                                     | 00031892  |
| 4 Date  | 5 Payee name   |   |
| 05/13/2024  | Meta / Facebook  |   |
| 6 Amount (\$)   | 7 Payee address; City; State; Zip Code                           | е   |
| \$26.38   | 1 Hacker Way   |   |
|   |  |   |
| Expenditure from corporate funds                              | Menlo Park, CA 94025   |   |
| 8 PURPOSE   | c , (eee emegenee meter at the telep of the constant)            | b) Description  |
| OF<br>EXPENDITURE   | Advertising Expense  | Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  |
|   |  | Advertising for Kim Laseter for Judge Campaign  |
|   |  | 7 (d. 101 (d. 101 ) 2 (d. 101 |
| 9 Complete ONLY if direct                                     | Candidate/Officeholder name Office sough                         | ht Office held  |
| expenditure to benefit C/O                                    |  | dge District 401st  |
| Data  |  |   |
| Date  | Payee name Moto / Facebook                                       |   |
| 05/20/2024  | Meta / Facebook  |   |
| Amount (\$)   | Payee address; City; State; Zip Code                             | е   |
| \$37.93   | 1 Hacker Way   |   |
| Expenditure from corporate funds                              | Menlo Park, CA 94025   |   |
| PURPOSE   | (a) Category (See Categories listed at the top of this schedule) | b) Description  |
| OF<br>EXPENDITURE   | Advertising Expense  | Check if travel outside of Texas. Complete Schedule T.  |
|   |  | Check if Austin, TX, officeholder living expense  Advertising for Kim Laseter for Judge Campaign  |
|   |  | Advertising for Mill Laseter for stude Campaign   |
| Complete ONLY if direct                                       | Candidate/Officeholder name Office sough                         | ht Office held  |
| expenditure to benefit C/O                                    | •  | Il Office field   |
|   |  |   |
| Date  | Payee name   |   |
| 05/20/2024  | Meta / Facebook  |   |
| Amount (\$)   | Payee address; City; State; Zip Code                             | е   |
| \$27.08   | 1 Hacker Way   |   |
| Evponditure from  |  |   |
| Expenditure from corporate funds                              | Menlo Park, CA 94025   |   |
| PURPOSE   | (a) Category (See Categories listed at the top of this schedule) | b) Description  |
| OF<br>EXPENDITURE   | Advertising Expense  | Check if travel outside of Texas. Complete Schedule T.  |
| EXPENDITORE   |  | Check if Austin, TX, officeholder living expense  |
|   |  | Advertising for Kim Laseter for Judge Campaign  |
|   |  |   |
| Complete <u>ONLY</u> if direct<br>expenditure to benefit C/OI | Candidate/Officeholder name Office sough                         | ht Office held  |
| expenditure to benefit Groi                                   | 1<br>  |   |
|   |  |   |
|   |  |   |

## 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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

ursement Solicitation/Fundraising Expense
Expense Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

| Candidate/Officeholder/Politica<br>Credit Card Payment | I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.  |
|--|--|
| 1 Total pages Schedule F1:                             | 2 FILER NAME 3 Filer ID (Ethics Commission Filers)   |
| Sch: 2/3 Rpt: 7/8                                      | Plano Police Association PAC 00031892  |
| 4 Date   | 5 Payee name   |
| 05/22/2024   | Meta / Facebook  |
| 6 Amount (\$)  | 7 Payee address; City; State; Zip Code   |
| \$48.57  | 1 Hacker Way   |
|  |  |
| Expenditure from corporate funds                       | Menlo Park, CA 94025   |
| 8 PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description   |
| OF<br>EXPENDITURE                                      | Advertising Expense Check if travel outside of Texas. Complete Schedule T.   |
|  | Check if Austin, TX, officeholder living expense  Advertising for Kim Laseter for Judge Campaign   |
|  | Advertising for fam Easeter for studge earnpuign   |
| 9 Complete ONLY if direct                              | Candidate/Officeholder name Office sought Office held  |
| expenditure to benefit C/OI                            | 1  |
| Date   | Payee name   |
| 05/23/2024   | Meta / Facebook  |
| Amount (\$)  | Payee address; City; State; Zip Code   |
| \$31.79  | 1 Hacker Way   |
| , ,  | · · · · · · · · · · · · · · · · · ·  |
| Expenditure from corporate funds                       | Menlo Park, CA 94025   |
| PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description   |
| OF<br>EXPENDITURE                                      | Advertising Expense Check if travel outside of Texas. Complete Schedule T.   |
|  | Check if Austin, TX, officeholder living expense  Advertising for Kim Laseter for Judge Campaign   |
|  | Advertising for Nin Laseter for Studye Campaign  |
| Complete <u>ONLY</u> if direct                         | Candidate/Officeholder name Office sought Office held  |
| expenditure to benefit C/OI                            |  |
| D-1-   |  |
| Date   | Payee name   |
| 05/24/2024   | Meta / Facebook  |
| Amount (\$)  | Payee address; City; State; Zip Code   |
| \$30.23  | 1 Hacker Way   |
| Expenditure from corporate funds                       | Menlo Park, CA 94025   |
| •  |  |
| PURPOSE<br>OF  | (a) Category (See Categories listed at the top of this schedule)  Advertising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T. |
| EXPENDITURE  | Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense                                   |
|  | Advertising for Kim Laseter for Judge Campaign   |
|  |  |
| Complete ONLY if direct                                | Candidate/Officeholder name Office sought Office held  |
| expenditure to benefit C/OI                            | 1  |
|  |  |
|  |  |
|  |  |

## 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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

|   | Contributions/ Donations Made By<br>Candidate/Officeholder/Politica<br>Credit Card Payment | / -<br>Il Committee | Gift/Awards/Memorials Ex<br>Legal Services  The Instruction Guid | rpense Printii<br>Salari | g Expense<br>g Expense<br>es/Wages/Contract Labor<br>complete this form. |   |        |
|---|--|---------------------|--|--------------------------|--|---|--------|
| 1 | Total pages Schedule F1:   | 2 FILER NAM         | Ē  |                          |  | 3 Filer ID (Ethics Commission Filers)       | )      |
|   | Sch: 3/3 Rpt: 8/8  | Plano Polic         | e Association PAC  |                          |  | 00031892                                    |        |
| 4 | Date   | 5 Payee name        |  |                          |  |   |        |
|   | 05/16/2024   | Meta / Fac          | ebook  |                          |  |   |        |
| 6 | Amount (\$)  | 7 Payee addre       | ess; City;   | State; Zip               | Code   |   | $\neg$ |
| l | \$32.16  | 1 Hacker V          | /av  |                          |  |   |        |
| l |  |                     | ,  |                          |  |   |        |
|   | Expenditure from corporate funds   | Menlo Park          | x, CA 94025  |                          |  |   |        |
| 8 | PURPOSE  | (a) Category (S     | see Categories listed at the                                     | top of this schedule)    | (b) Description  |   |        |
| l | OF<br>EXPENDITURE  | Advertising         |  |                          |  | avel outside of Texas. Complete Schedule T. |        |
| l | LAFLINDITORE   |                     |  |                          |  | ustin, TX, officeholder living expense      |        |
| l |  |                     |  |                          | Advertisin   | g for Kim Laseter for Judge Campaign        |        |
| l |  |                     |  |                          |  |   |        |
| 9 | Complete ONLY if direct expenditure to benefit C/O   | Candidate/Off<br>H  | iceholder name   | Office :                 | sought   | Office held                                 |        |
|   |  |                     |  |                          |  |   |        |