

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) 00085758 | 2 Total pages filed: 5 | | | | | | | | | | | | | | | | | | | | | |
| 3 COMMITTEE NAME Families 4 Frisco | | OFFICE USE ONLY | | | | | | | | | | | | | | | | | | | | | | |
| 4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address | | Date Received ELECTRONICALLY FILED 07/08/2024 Date Hand-delivered or Date Postmarked <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">Receipt #</td> <td style="width:50%;">Amount</td> </tr> <tr> <td> </td> <td> </td> </tr> </table> Date Processed Date Imaged | | Receipt # | Amount | | | | | | | | | | | | | | | | | | | |
| Receipt # | Amount | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | |
| 5 CAMPAIGN TREASURER NAME | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%;">MS / MRS / MR</td> <td style="width:40%;">FIRST</td> <td colspan="2" style="width:40%;">MI</td> </tr> <tr> <td> </td> <td>Muniraj</td> <td colspan="2"> </td> </tr> <tr> <td colspan="4" style="border-top: 1px dotted black;">NICKNAME</td> </tr> <tr> <td> </td> <td>LAST</td> <td colspan="2">SUFFIX</td> </tr> <tr> <td> </td> <td>Janagarajan</td> <td colspan="2"> </td> </tr> </table> | | | MS / MRS / MR | FIRST | MI | | | Muniraj | | | NICKNAME | | | | | LAST | SUFFIX | | | Janagarajan | | | |
| MS / MRS / MR | FIRST | MI | | | | | | | | | | | | | | | | | | | | | | |
| | Muniraj | | | | | | | | | | | | | | | | | | | | | | | |
| NICKNAME | | | | | | | | | | | | | | | | | | | | | | | | |
| | LAST | SUFFIX | | | | | | | | | | | | | | | | | | | | | | |
| | Janagarajan | | | | | | | | | | | | | | | | | | | | | | | |
| 6 CAMPAIGN TREASURER STREET ADDRESS <small>(Residence or Business)</small> | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">STREET ADDRESS (NO PO BOX PLEASE);</td> <td style="width:10%;">APT / SUITE #;</td> <td style="width:10%;">CITY;</td> <td style="width:10%;">STATE;</td> <td style="width:10%;">ZIP CODE</td> </tr> <tr> <td>6869 Shadow Glen Dr.</td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td colspan="5">Frisco, TX 75035</td> </tr> </table> | | | STREET ADDRESS (NO PO BOX PLEASE); | APT / SUITE #; | CITY; | STATE; | ZIP CODE | 6869 Shadow Glen Dr. | | | | | Frisco, TX 75035 | | | | | | | | | | |
| STREET ADDRESS (NO PO BOX PLEASE); | APT / SUITE #; | CITY; | STATE; | ZIP CODE | | | | | | | | | | | | | | | | | | | | |
| 6869 Shadow Glen Dr. | | | | | | | | | | | | | | | | | | | | | | | | |
| Frisco, TX 75035 | | | | | | | | | | | | | | | | | | | | | | | | |
| 7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">STREET OR PO BOX;</td> <td style="width:10%;">APT / SUITE #;</td> <td style="width:10%;">CITY;</td> <td style="width:10%;">STATE;</td> <td style="width:10%;">ZIP CODE</td> </tr> <tr> <td>6869 Shadow Glen Dr.</td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td colspan="5">Frisco, TX 75035</td> </tr> </table> | | | STREET OR PO BOX; | APT / SUITE #; | CITY; | STATE; | ZIP CODE | 6869 Shadow Glen Dr. | | | | | Frisco, TX 75035 | | | | | | | | | | |
| STREET OR PO BOX; | APT / SUITE #; | CITY; | STATE; | ZIP CODE | | | | | | | | | | | | | | | | | | | | |
| 6869 Shadow Glen Dr. | | | | | | | | | | | | | | | | | | | | | | | | |
| Frisco, TX 75035 | | | | | | | | | | | | | | | | | | | | | | | | |
| 8 CAMPAIGN TREASURER PHONE | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%;">AREA CODE</td> <td style="width:30%;">PHONE NUMBER</td> <td style="width:50%;">EXTENSION</td> </tr> <tr> <td>(972)</td> <td>900-3404</td> <td> </td> </tr> </table> | | | AREA CODE | PHONE NUMBER | EXTENSION | (972) | 900-3404 | | | | | | | | | | | | | | | | |
| AREA CODE | PHONE NUMBER | EXTENSION | | | | | | | | | | | | | | | | | | | | | | |
| (972) | 900-3404 | | | | | | | | | | | | | | | | | | | | | | | |
| 9 REPORT TYPE | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;"><input type="checkbox"/> January 15</td> <td style="width:33%;"><input type="checkbox"/> 30th day before election</td> <td style="width:33%;"><input type="checkbox"/> Dissolution (Attach PAC-DR)</td> </tr> <tr> <td><input checked="" type="checkbox"/> July 15</td> <td><input type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> 10th day after campaign treasurer termination</td> </tr> <tr> <td> </td> <td><input type="checkbox"/> Runoff</td> <td> </td> </tr> </table> | | | <input type="checkbox"/> January 15 | <input type="checkbox"/> 30th day before election | <input type="checkbox"/> Dissolution (Attach PAC-DR) | <input checked="" type="checkbox"/> July 15 | <input type="checkbox"/> 8th day before election | <input type="checkbox"/> 10th day after campaign treasurer termination | | <input type="checkbox"/> Runoff | | | | | | | | | | | | | |
| <input type="checkbox"/> January 15 | <input type="checkbox"/> 30th day before election | <input type="checkbox"/> Dissolution (Attach PAC-DR) | | | | | | | | | | | | | | | | | | | | | | |
| <input checked="" 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 | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%;">Month</td> <td style="width:10%;">Day</td> <td style="width:10%;">Year</td> <td style="width:20%;">THROUGH</td> <td style="width:10%;">Month</td> <td style="width:10%;">Day</td> <td style="width:10%;">Year</td> </tr> <tr> <td> </td> <td>01</td> <td>01</td> <td> </td> <td> </td> <td>06</td> <td>30</td> </tr> <tr> <td colspan="7">2024</td> </tr> </table> | | | Month | Day | Year | THROUGH | Month | Day | Year | | 01 | 01 | | | 06 | 30 | 2024 | | | | | | |
| Month | Day | Year | THROUGH | Month | Day | Year | | | | | | | | | | | | | | | | | | |
| | 01 | 01 | | | 06 | 30 | | | | | | | | | | | | | | | | | | |
| 2024 | | | | | | | | | | | | | | | | | | | | | | | | |
| 11 ELECTION | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">ELECTION DATE</td> <td colspan="3">ELECTION TYPE</td> </tr> <tr> <td>Month Day Year</td> <td><input type="checkbox"/> Primary</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> Other</td> </tr> <tr> <td> </td> <td><input type="checkbox"/> General</td> <td><input type="checkbox"/> Special</td> <td> </td> </tr> </table> | | | ELECTION DATE | ELECTION TYPE | | | Month Day Year | <input type="checkbox"/> Primary | <input type="checkbox"/> Runoff | <input type="checkbox"/> Other | | <input type="checkbox"/> General | <input type="checkbox"/> Special | | | | | | | | | | |
| ELECTION DATE | ELECTION TYPE | | | | | | | | | | | | | | | | | | | | | | | |
| Month Day Year | <input type="checkbox"/> Primary | <input type="checkbox"/> Runoff | <input type="checkbox"/> Other | | | | | | | | | | | | | | | | | | | | | |
| | <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 Families 4 Frisco | 13 Filer ID (Ethics Commission Filers) 00085758 |
|---|---|

| | | |
|---|--|--------------|
| 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.) | |

| | | | |
|-------------------------------|---|----|----------|
| 15 CONTRIBUTION TOTALS | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold | \$ | 40.00 |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ | 40.00 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | \$ | 0.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ | 0.00 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ | 3,304.74 |
| 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.

Muniraj Janagarajan

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

SUBTOTALS - GPAC**FORM GPAC**
COVER SHEET PG 3
3 of 5

| | | |
|--|---|---|
| 17 COMMITTEE NAME Families 4 Frisco | | 18 Filer ID (Ethics Commission Filers) 00085758 |
| 19 SCHEDULE SUBTOTALS NAME OF SCHEDULE | | SUBTOTAL AMOUNT |
| 1. | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ 40.00 |
| 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 type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ |
| 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 checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ 79.54 |
| 15. | <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ |

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule I: Sch: 1/2 Rpt: 4/5 | 2 FILER NAME Families 4 Frisco | 3 Filer ID (Ethics Commission Filers) 00085758 |
| 4 Date 04/15/2024 | 5 Payee name ANEDOT.com | |
| 6 Amount (\$) 2.80 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee Address; City; State; Zip 1340 Poydras St New Orleans, LA 70112 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See instructions for examples of acceptable categories) Fees | (b) Description (See instructions regarding type of information required.) Donation processing Fees |
| Date 01/22/2024 | Payee name Constantcontact.com | |
| Amount (\$) 12.79 <input type="checkbox"/> Expenditure from corporate funds | Payee Address; City; State; Zip 1601 Trapelo Road Waltham, TX 02451 | |
| PURPOSE OF EXPENDITURE | (a) Category (See instructions for examples of acceptable categories) Fees | (b) Description (See instructions regarding type of information required.) Bulk email marketing subscription monthly fee |
| Date 02/21/2024 | Payee name Constantcontact.com | |
| Amount (\$) 12.79 <input type="checkbox"/> Expenditure from corporate funds | Payee Address; City; State; Zip 1601 Trapelo Road Waltham, TX 02451 | |
| PURPOSE OF EXPENDITURE | (a) Category (See instructions for examples of acceptable categories) Fees | (b) Description (See instructions regarding type of information required.) Bulk email marketing subscription monthly fee |
| Date 03/21/2024 | Payee name Constantcontact.com | |
| Amount (\$) 12.79 <input type="checkbox"/> Expenditure from corporate funds | Payee Address; City; State; Zip 1601 Trapelo Road Waltham, TX 02451 | |
| PURPOSE OF EXPENDITURE | (a) Category (See instructions for examples of acceptable categories) Fees | (b) Description (See instructions regarding type of information required.) Bulk email marketing subscription monthly fee |

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

| | | |
|---|---|---|
| 1 Total pages Schedule I: Sch: 2/2 Rpt: 5/5 | 2 FILER NAME Families 4 Frisco | 3 Filer ID (Ethics Commission Filers) 00085758 |
| 4 Date 04/22/2024 | 5 Payee name Constantcontact.com | |
| 6 Amount (\$) 12.79 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee Address; City; State; Zip 1601 Trapelo Road Waltham, TX 02451 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See instructions for examples of acceptable categories) Fees | (b) Description (See instructions regarding type of information required.) Bulk email marketing subscription monthly fee |
| Date 05/21/2024 | Payee name Constantcontact.com | |
| Amount (\$) 12.79 <input type="checkbox"/> Expenditure from corporate funds | Payee Address; City; State; Zip 1601 Trapelo Road Waltham, TX 02451 | |
| PURPOSE OF EXPENDITURE | (a) Category (See instructions for examples of acceptable categories) Fees | (b) Description (See instructions regarding type of information required.) Bulk email marketing subscription monthly fee |
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