

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: 32 |
| 3 COMMITTEE NAME McKinney Values PAC | | OFFICE USE ONLY | |
| | | Date Received ELECTRONICALLY FILED 07/13/2024 | |
| 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 Mr. Joseph C. | MI | |
| | 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 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 | Month Day Year THROUGH Month Day Year 01/01/2024 06/30/2024 | | |
| 11 ELECTION | ELECTION DATE Month Day Year | ELECTION TYPE <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 McKinney Values PAC | 13 Filer ID (Ethics Commission Filers) 00086990 |
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|---|--|--------------|
| 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) | \$ 749.18 |
| | <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) | \$ 5,963.18 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | \$ 0.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ 4,826.45 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 2,907.96 |
| 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

SUBTOTALS - GPAC**FORM GPAC**
COVER SHEET PG 3
3 of 32

| | | | |
|--|---|--------------------------------|----------------------------|
| 17 COMMITTEE NAME McKinney Values PAC | | 18 Filer ID 00086990 | (Ethics Commission Filers) |
| 19 SCHEDULE SUBTOTALS NAME OF SCHEDULE | | SUBTOTAL AMOUNT | |
| 1. | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ | 5,963.18 |
| 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 | \$ | 4,826.45 |
| 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: 1/14 Rpt: 4/32 |
| 2 FILER NAME McKinney Values PAC | | 3 Filer ID (Ethics Commission Filers) 00086990 |
| 4 Date 03/28/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Terry <hr/> 6 Contributor address; City; State; Zip Code Denton, TX 76205 | 7 Amount of Contribution (\$) \$60.00 |
| 8 Principal occupation / Job title (See Instructions) Self | | 9 Employer (See Instructions) Patriots at Lage |
| Date 01/06/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arco, Joe <hr/> Contributor address; City; State; Zip Code McKinney, TX 75072 | Amount of Contribution (\$) \$200.00 |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) retired |
| Date 01/06/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arco, Joseph <hr/> Contributor address; City; State; Zip Code McKinney, TX 75072 | Amount of Contribution (\$) \$90.00 |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) retired |
| Date 03/10/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arco, Joseph <hr/> Contributor address; City; State; Zip Code McKinney, TX 75072 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) retired |
| Date 04/17/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bartholomew, Kristin <hr/> Contributor address; City; State; Zip Code McKinney, TX 75072 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) assistant | | Employer (See Instructions) KMB Coaching |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 2/14 Rpt: 5/32 |
| 2 FILER NAME McKinney Values PAC | | 3 Filer ID (Ethics Commission Filers) 00086990 |
| 4 Date 01/10/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becker, Mahvash <hr/> 6 Contributor address; City; State; Zip Code McKinney, TX 75070 | 7 Amount of Contribution (\$) \$5.00 |
| 8 Principal occupation / Job title (See Instructions) retired | | 9 Employer (See Instructions) Retired |
| Date 04/09/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boduch, Joseph A <hr/> Contributor address; City; State; Zip Code Frisco, TX 75035 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) IT Solution Architect | | Employer (See Instructions) Texas Instruments |
| Date 03/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Borra, Matthew <hr/> Contributor address; City; State; Zip Code Melissa, TX 75454 | Amount of Contribution (\$) \$5.00 |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) retired |
| Date 05/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowers, Debbie <hr/> Contributor address; City; State; Zip Code Plano, TX 75023 | Amount of Contribution (\$) \$5.00 |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) retired |
| Date 06/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Breed, Cynthia <hr/> Contributor address; City; State; Zip Code Austin, TX 78750 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Sales | | Employer (See Instructions) Self |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 3/14 Rpt: 6/32 |
| 2 FILER NAME McKinney Values PAC | | 3 Filer ID (Ethics Commission Filers) 00086990 |
| 4 Date 06/02/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buettner, Russell <hr/> 6 Contributor address; City; State; Zip Code McKinney, TX 75072 | 7 Amount of Contribution (\$) \$150.00 |
| 8 Principal occupation / Job title (See Instructions) retired | | 9 Employer (See Instructions) retired |
| Date 01/23/2024 | 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 (\$) \$45.00 |
| Principal occupation / Job title (See Instructions) Real estate | | Employer (See Instructions) Chabot Strategies |
| Date 06/03/2024 | 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 (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) Real estate | | Employer (See Instructions) Chabot Strategies |
| Date 01/17/2024 | 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 (\$) \$220.00 |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) retired |
| Date 01/23/2024 | 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 (\$) \$45.00 |
| Principal occupation / Job title (See Instructions) Office Manager | | Employer (See Instructions) Clark Hill |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 4/14 Rpt: 7/32 |
| 2 FILER NAME McKinney Values PAC | | 3 Filer ID (Ethics Commission Filers) 00086990 |
| 4 Date 02/24/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craycraft, Matt <hr/> 6 Contributor address; City; State; Zip Code McKinney, TX 75071 | 7 Amount of Contribution (\$) \$30.00 |
| 8 Principal occupation / Job title (See Instructions) Office Manager | | 9 Employer (See Instructions) Clark Hill |
| Date 04/07/2024 | 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 (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) Office Manager | | Employer (See Instructions) Clark Hill |
| Date 06/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daily, Bonnie <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) retired |
| Date 03/13/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deutschmann, Cassandra <hr/> Contributor address; City; State; Zip Code Plano, TX 75025 | Amount of Contribution (\$) \$20.00 |
| Principal occupation / Job title (See Instructions) Homemaker | | Employer (See Instructions) Homemaker |
| Date 05/01/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donnelly, John <hr/> Contributor address; City; State; Zip Code McKinney, TX 75071 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) Sales | | Employer (See Instructions) SensoScientific, Inc. |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 5/14 Rpt: 8/32 |
| 2 FILER NAME McKinney Values PAC | | 3 Filer ID (Ethics Commission Filers) 00086990 |
| 4 Date 06/08/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Maria <hr/> 6 Contributor address; City; State; Zip Code Plano, TX 75075 | 7 Amount of Contribution (\$) \$25.00 |
| 8 Principal occupation / Job title (See Instructions) self employed | | 9 Employer (See Instructions) Self Employed |
| Date 03/28/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrison, Dan <hr/> Contributor address; City; State; Zip Code McKinney, TX 75069 | Amount of Contribution (\$) \$150.00 |
| Principal occupation / Job title (See Instructions) Community Builder | | Employer (See Instructions) McKinney East |
| Date 02/20/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrison, Jim <hr/> Contributor address; City; State; Zip Code McKinney, TX 75072 | Amount of Contribution (\$) \$20.00 |
| Principal occupation / Job title (See Instructions) self employed | | Employer (See Instructions) Producer |
| Date 06/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, Carol <hr/> Contributor address; City; State; Zip Code McKinney, TX 75069 | Amount of Contribution (\$) \$20.00 |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) retired |
| Date 04/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, David <hr/> Contributor address; City; State; Zip Code McKinney, TX 75071 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) Business Development | | Employer (See Instructions) LI Group |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 6/14 Rpt: 9/32 |
| 2 FILER NAME McKinney Values PAC | | 3 Filer ID (Ethics Commission Filers) 00086990 |
| 4 Date 04/04/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hale, Darrell <hr/> 6 Contributor address; City; State; Zip Code McKinney, TX 75070 | 7 Amount of Contribution (\$) \$10.00 |
| 8 Principal occupation / Job title (See Instructions) Commissioner | | 9 Employer (See Instructions) Collin County |
| Date 04/04/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Cody <hr/> Contributor address; City; State; Zip Code Mckinney, TX 75072 | Amount of Contribution (\$) \$20.00 |
| Principal occupation / Job title (See Instructions) Marketing | | Employer (See Instructions) Self |
| Date 06/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holdstock, Rebecca <hr/> Contributor address; City; State; Zip Code McKinney, TX 75072 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Substitute Teacher | | Employer (See Instructions) Misd |
| Date 06/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hood, Josh <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070 | Amount of Contribution (\$) \$240.00 |
| Principal occupation / Job title (See Instructions) Owner | | Employer (See Instructions) Texas Shower Glass |
| Date 03/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jarrett, Dennis <hr/> Contributor address; City; State; Zip Code Plano, TX 75023 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) N/A | | Employer (See Instructions) Retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|--|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 7/14 Rpt: 10/32 |
| 2 FILER NAME McKinney Values PAC | | 3 Filer ID (Ethics Commission Filers) 00086990 |
| 4 Date 03/13/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John, Jensen <hr/> 6 Contributor address; City; State; Zip Code MCKINNEY, TX 75070 | 7 Amount of Contribution (\$) \$10.00 |
| 8 Principal occupation / Job title (See Instructions) Civil Engineer | | 9 Employer (See Instructions) LM Consultants |
| Date 06/12/2024 | 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 (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) Civil Engineer | | Employer (See Instructions) LM Consultants |
| Date 03/17/2024 | 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 (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) VP | | Employer (See Instructions) CorVel Corporation |
| Date 04/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) L Kemp, Sam <hr/> Contributor address; City; State; Zip Code Greenville, TX 75402 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 01/23/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laseter, Jason <hr/> Contributor address; City; State; Zip Code Prosper, TX 75078 | Amount of Contribution (\$) \$55.00 |
| 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: 8/14 Rpt: 11/32 |
| 2 FILER NAME McKinney Values PAC | | 3 Filer ID (Ethics Commission Filers) 00086990 |
| 4 Date 04/08/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laseter, Jason <hr/> 6 Contributor address; City; State; Zip Code Prosper, TX 75078 | 7 Amount of Contribution (\$) \$10.00 |
| 8 Principal occupation / Job title (See Instructions) Attorney | | 9 Employer (See Instructions) Laseter Law Firm |
| Date 06/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lohmann, Jan <hr/> Contributor address; City; State; Zip Code Plano, TX 75023 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) retired |
| Date 04/09/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lusk, Teresa <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) TV Show Host and Producer | | Employer (See Instructions) ExecYou Productions |
| Date 04/09/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAllister, Margie <hr/> Contributor address; City; State; Zip Code McKinney, TX 75072 | Amount of Contribution (\$) \$20.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 01/02/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meredith, Thomas <hr/> Contributor address; City; State; Zip Code McKinney, TX 75072 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 9/14 Rpt: 12/32 |
| 2 FILER NAME McKinney Values PAC | | 3 Filer ID (Ethics Commission Filers) 00086990 |
| 4 Date 04/22/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minuteman Press <hr/> 6 Contributor address; City; State; Zip Code McKinney, TX 75069 | 7 Amount of Contribution (\$) \$1,000.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 06/29/2024 | 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) retired | | Employer (See Instructions) retired |
| Date 06/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Penn, Stan <hr/> Contributor address; City; State; Zip Code McKinney, TX 75069 | Amount of Contribution (\$) \$200.00 |
| Principal occupation / Job title (See Instructions) Business ownee | | Employer (See Instructions) Stan Penn |
| Date 01/10/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ponce, Jennifer <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070 | Amount of Contribution (\$) \$55.00 |
| Principal occupation / Job title (See Instructions) assistan | | Employer (See Instructions) Supreme Wraps |
| Date 03/20/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pratt, Rebecca <hr/> Contributor address; City; State; Zip Code Dallas, TX 75238 | Amount of Contribution (\$) \$60.00 |
| Principal occupation / Job title (See Instructions) Accountant | | Employer (See Instructions) Global Velo, Inc. |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 10/14 Rpt: 13/32 |
| 2 FILER NAME McKinney Values PAC | | 3 Filer ID (Ethics Commission Filers) 00086990 |
| 4 Date 01/19/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reed, Tom <hr/> 6 Contributor address; City; State; Zip Code McKinney, TX 75070 | 7 Amount of Contribution (\$) \$5.00 |
| 8 Principal occupation / Job title (See Instructions) assistan | | 9 Employer (See Instructions) RapidSOS |
| Date 04/02/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson, Keresa <hr/> Contributor address; City; State; Zip Code McKinney, TX 75072 | Amount of Contribution (\$) \$40.00 |
| Principal occupation / Job title (See Instructions) CEO | | Employer (See Instructions) Lawton group |
| Date 01/24/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rowen, Ed <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070 | Amount of Contribution (\$) \$55.00 |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) Retired |
| Date 01/04/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Self, Tracy <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) homemaker |
| Date 03/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seward, Shanon <hr/> Contributor address; City; State; Zip Code Mckinney, TX 75071 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) Consulting | | Employer (See Instructions) Global Conductor |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 11/14 Rpt: 14/32 |
| 2 FILER NAME McKinney Values PAC | | 3 Filer ID (Ethics Commission Filers) 00086990 |
| 4 Date 04/08/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaw, Rachel <hr/> 6 Contributor address; City; State; Zip Code McKinney, TX 75070 | 7 Amount of Contribution (\$) \$10.00 |
| 8 Principal occupation / Job title (See Instructions) Entrepreneur | | 9 Employer (See Instructions) Self Employed |
| Date 05/20/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Jill <hr/> Contributor address; City; State; Zip Code Troup, TX 75789 | Amount of Contribution (\$) \$20.00 |
| Principal occupation / Job title (See Instructions) self wonder women outreach | | Employer (See Instructions) Self Wonder Women Outreach |
| Date 01/09/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Shayla <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070 | Amount of Contribution (\$) \$5.00 |
| Principal occupation / Job title (See Instructions) diana brooks law | | Employer (See Instructions) Diana Brooks Law |
| Date 04/09/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tate, Alivia <hr/> Contributor address; City; State; Zip Code McKinney, TX 75071 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) Executive Assistant | | Employer (See Instructions) Lawton Group |
| Date 06/24/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Vicente <hr/> Contributor address; City; State; Zip Code Mckinney, TX 75070 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) ASO | | Employer (See Instructions) UT Dallas |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 12/14 Rpt: 15/32 |
| 2 FILER NAME McKinney Values PAC | | 3 Filer ID (Ethics Commission Filers) 00086990 |
| 4 Date 01/17/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warren, Robert <hr/> 6 Contributor address; City; State; Zip Code McKinney, TX 75070 | 7 Amount of Contribution (\$) \$200.00 |
| 8 Principal occupation / Job title (See Instructions) retired | | 9 Employer (See Instructions) retired |
| Date 02/06/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warren, Robert <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070 | Amount of Contribution (\$) \$9.00 |
| Principal occupation / Job title (See Instructions) Delivery | | Employer (See Instructions) Door Dash |
| Date 01/04/2024 | 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 |
| Date 01/05/2024 | 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 (\$) \$95.00 |
| Principal occupation / Job title (See Instructions) united states | | Employer (See Instructions) United States |
| Date 02/04/2024 | 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

| | | |
|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 13/14 Rpt: 16/32 |
| 2 FILER NAME McKinney Values PAC | | 3 Filer ID (Ethics Commission Filers) 00086990 |
| 4 Date 03/04/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warren, Tammy | 7 Amount of Contribution (\$) \$5.00 |
| 6 Contributor address; City; State; Zip Code Mckinney, TX 75070 | | |
| 8 Principal occupation / Job title (See Instructions) Executive Assistant | | 9 Employer (See Instructions) Emerson |
| Date 04/04/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warren, Tammy | Amount of Contribution (\$) \$5.00 |
| Contributor address; City; State; Zip Code Mckinney, TX 75070 | | |
| Principal occupation / Job title (See Instructions) Executive Assistant | | Employer (See Instructions) Emerson |
| Date 05/04/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warren, Tammy | Amount of Contribution (\$) \$5.00 |
| Contributor address; City; State; Zip Code Mckinney, TX 75070 | | |
| Principal occupation / Job title (See Instructions) Executive Assistant | | Employer (See Instructions) Emerson |
| Date 06/04/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warren, Tammy | Amount of Contribution (\$) \$5.00 |
| Contributor address; City; State; Zip Code Mckinney, TX 75070 | | |
| Principal occupation / Job title (See Instructions) Executive Assistant | | Employer (See Instructions) Emerson |
| Date 01/05/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Christy | Amount of Contribution (\$) \$25.00 |
| Contributor address; City; State; Zip Code McKinney, TX 75071 | | |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 14/14 Rpt: 17/32 |
| 2 FILER NAME McKinney Values PAC | | 3 Filer ID (Ethics Commission Filers) 00086990 |
| 4 Date 02/05/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Christy <hr/> 6 Contributor address; City; State; Zip Code McKinney, TX 75071 | 7 Amount of Contribution (\$) \$25.00 |
| 8 Principal occupation / Job title (See Instructions) retired | | 9 Employer (See Instructions) retired |
| Date 02/04/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) chan, Jeff <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75071 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) retired |
| Date 03/28/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) chan, Jeff <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75071 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) retired |
| Date 04/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) chan, Jeff <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75071 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 04/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) chan, Jeff <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75071 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) retired |

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: 1/15 Rpt: 18/32 | 2 FILER NAME McKinney Values PAC | 3 Filer ID (Ethics Commission Filers) 00086990 |
| 4 Date 06/07/2024 | 5 Payee name Amazon | |
| 6 Amount (\$) \$55.20 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 410 Terry Ave North Seattle, WA 90109 | |
| 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 06/30/2024 | Payee name Amazon | |
| Amount (\$) \$47.60 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 410 Terry Ave North Seattle, WA 90109 | |
| 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 06/30/2024 | Payee name Amazon | |
| Amount (\$) \$85.96 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 410 Terry Ave North Seattle, WA 90109 | |
| 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: 2/15 Rpt: 19/32 | 2 FILER NAME McKinney Values PAC | 3 Filer ID (Ethics Commission Filers) 00086990 |
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|-----------------------------|---|
| 4 Date 01/23/2024 | 5 Payee name Anamia's Tex Mex |
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| 6 Amount (\$) \$25.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 1821 N Lake Forest Dr McKinney, TX 75071 |
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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 |
|---------------------------------|--|---|

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

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|--------------------|--|
| Date 04/04/2024 | Payee name Christ Fellowship Church/meet room |
|--------------------|--|

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| Amount (\$) \$100.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 2801 Orchid Dr McKinney, TX 75072 |
|--|--|

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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 |
|-------------------------------|--|---|

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

| | |
|--------------------|-----------------------------------|
| Date 01/08/2024 | Payee name Collin Co Rep Plano |
|--------------------|-----------------------------------|

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|--|---|
| Amount (\$) \$1,500.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 2963 W 15th ST Plano, TX 75075 |
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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 |
|-------------------------------|--|---|

| | | | |
|---|-----------------------------|---------------|-------------|
| 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: 3/15 Rpt: 20/32 | 2 FILER NAME McKinney Values PAC | 3 Filer ID (Ethics Commission Filers) 00086990 |
| 4 Date 02/22/2024 | 5 Payee name Delaney's Irish Pub | |
| 6 Amount (\$) \$57.96 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 6150 W Eldorado Pkwy McKinney, TX 75070 | |
| 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 05/24/2024 | Payee name Delaney's Irish Pub | |
| Amount (\$) \$60.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 6150 W Eldorado Pkwy 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 05/06/2024 | Payee name Dunkin | |
| Amount (\$) \$7.99 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 3201 Eldorado Pkwy McKinney, TX 75070 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 FOOD |
| 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: 4/15 Rpt: 21/32 | 2 | FILER NAME McKinney Values PAC | 3 | Filer ID (Ethics Commission Filers) 00086990 |
| 4 | Date 05/06/2024 | 5 | Payee name Dunkin | | |
| 6 | Amount (\$) \$5.39 <input type="checkbox"/> Expenditure from corporate funds | 7 | Payee address; City; State; Zip Code 3201 Eldorado Pkwy McKinney, TX 75070 | | |
| 8 | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 FOOD | | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held | |
| | Date 05/29/2024 | | Payee name Hale, Darrell | | |
| | Amount (\$) \$250.00 <input type="checkbox"/> Expenditure from corporate funds | | Payee address; City; State; Zip Code 2300 Bloomdale Rd McKinney, TX 75071 | | |
| | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense DONATIONS | | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held | |
| | Date 06/10/2024 | | Payee name Hideout Caf | | |
| | Amount (\$) \$427.18 <input type="checkbox"/> Expenditure from corporate funds | | Payee address; City; State; Zip Code 1751 Eldorado Pkwy McKinney, TX 75069 | | |
| | 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 <u>ONLY</u> 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: 5/15 Rpt: 22/32 | 2 FILER NAME McKinney Values PAC | 3 Filer ID (Ethics Commission Filers) 00086990 |
| 4 Date 04/10/2024 | 5 Payee name Kroger | |
| 6 Amount (\$) \$11.97 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 2901 Lake Forest Dr McKinney, TX 75070 | |
| 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 <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 06/03/2024 | Candidate/Officeholder name Office sought Office held | |
| Payee name Magic Studio Claymont | | |
| Amount (\$) \$39.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 2093 Philadelphia Pike Claymont, DE 19703 | |
| 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 <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 06/14/2024 | Candidate/Officeholder name Office sought Office held | |
| Payee name Magic Studio Claymont | | |
| Amount (\$) \$39.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 2093 Philadelphia Pike Claymont, DE 19703 | |
| 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 <u>ONLY</u> if direct expenditure to benefit C/OH | | |

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: 6/15 Rpt: 23/32 | 2 FILER NAME McKinney Values PAC | 3 Filer ID (Ethics Commission Filers) 00086990 |
| 4 Date 06/14/2024 | 5 Payee name McKinney Chamber | |
| 6 Amount (\$) \$200.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 7300 State Hwy 121 McKinney, TX 75070 | |
| 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 04/09/2024 | Payee name McKinney Chamber | |
| Amount (\$) \$450.00 <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) 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 05/29/2024 | Payee name McKinney Main Street | |
| Amount (\$) \$40.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 111 N Tennessee St McKinney, TX 75069 | |
| 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: 7/15 Rpt: 24/32 | 2 FILER NAME McKinney Values PAC | 3 Filer ID (Ethics Commission Filers) 00086990 |
| 4 Date 01/23/2024 | 5 Payee name Minuteman Press | |
| 6 Amount (\$) \$27.06 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 1502 W University Dr McKinney, TX 75069 | |
| 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 06/10/2024 | Payee name Minuteman Press | |
| Amount (\$) \$115.45 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1502 W University Dr McKinney, TX 75069 | |
| 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 04/26/2024 | Payee name Minuteman Press | |
| Amount (\$) \$188.25 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1502 W University Dr McKinney, TX 75069 | |
| 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: 8/15 Rpt: 25/32 | 2 FILER NAME McKinney Values PAC | 3 Filer ID (Ethics Commission Filers) 00086990 |
| 4 Date 05/31/2024 | 5 Payee name Natl' name badge tarenturm | |
| 6 Amount (\$) \$18.89 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 2010 Marshall St Tarentum, PA 15084 | |
| 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 06/03/2024 | Payee name Natl' name badge tarenturm | |
| Amount (\$) \$12.94 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 2010 Marshall St Tarentum, PA 15084 | |
| 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 05/31/2024 | Payee name Natl' name badge tarenturm | |
| Amount (\$) \$12.44 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 2010 Marshall St Tarentum, PA 15084 | |
| 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: 9/15 Rpt: 26/32 | 2 FILER NAME McKinney Values PAC | 3 Filer ID (Ethics Commission Filers) 00086990 |
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|-----------------------------|---|
| 4 Date 06/03/2024 | 5 Payee name Natl' name badge tarenturm |
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|---|---|
| 6 Amount (\$) \$109.44 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 2010 Marshall St Tarentum, PA 15084 |
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| 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 |
|---------------------------------|--|---|

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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 04/15/2024 | Payee name Patina Green/McKinney |
|--------------------|-------------------------------------|

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|---|--|
| Amount (\$) \$34.10 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 116 N Tennessee St McKinney, TX 75069 |
|---|--|

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 FOOD |
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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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|--------------------|-------------------------------------|
| Date 04/26/2024 | Payee name SendinBlue Paris-fees |
|--------------------|-------------------------------------|

| | |
|---|--|
| Amount (\$) \$25.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 106 Blvd Haussmann Paris Paris 75008 France |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FEES |
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| Complete <u>ONLY</u> 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: 10/15 Rpt: 27/32 | 2 FILER NAME McKinney Values PAC | 3 Filer ID (Ethics Commission Filers) 00086990 |
|--|--|--|

| | |
|-----------------------------|--|
| 4 Date 04/26/2024 | 5 Payee name SendinBlue Paris-fees |
|-----------------------------|--|

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| 6 Amount (\$) \$0.28 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 106 Blvd Haussmann Paris Paris 75008 France |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FEES |
|---------------------------------|---|--|

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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 05/28/2024 | Payee name SendinBlue Paris-fees |
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| Amount (\$) \$25.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 106 Blvd Haussmann Paris Paris 75008 France |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FEES |
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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 05/28/2024 | Payee name SendinBlue Paris-fees |
|--------------------|-------------------------------------|

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| Amount (\$) \$0.28 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 106 Blvd Haussmann Paris Paris 75008 France |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FEES |
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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.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: Sch: 11/15 Rpt: 28/32 | 2 FILER NAME McKinney Values PAC | 3 Filer ID (Ethics Commission Filers) 00086990 |
| 4 Date 06/10/2024 | 5 Payee name SendinBlue Paris-fees | |
| 6 Amount (\$) \$10.00 <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) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FEES |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 06/10/2024 | Payee name SendinBlue Paris-fees | |
| Amount (\$) \$0.11 <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) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FEES |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 01/26/2024 | 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) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FEES |
| 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: 12/15 Rpt: 29/32 | 2 FILER NAME McKinney Values PAC | 3 Filer ID (Ethics Commission Filers) 00086990 |
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| 4 Date 01/26/2024 | 5 Payee name SendinBlue Paris |
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| 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 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FEES |
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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 02/26/2024 | Payee name SendinBlue Paris |
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| Amount (\$) \$25.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 106 Blvd Haussmann Paris Paris 75008 France |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FEES |
|------------------------|--|---|

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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 02/26/2024 | Payee name SendinBlue Paris |
|--------------------|--------------------------------|

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|---|--|
| Amount (\$) \$0.28 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 106 Blvd Haussmann Paris Paris 75008 France |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FEES |
|------------------------|--|---|

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|---|-----------------------------|---------------|-------------|
| 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: 13/15 Rpt: 30/32 | 2 FILER NAME McKinney Values PAC | 3 Filer ID (Ethics Commission Filers) 00086990 |
| 4 Date 03/26/2024 | 5 Payee name SendinBlue Paris | |
| 6 Amount (\$) \$25.00 <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) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FEES |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 03/26/2024 | Payee name SendinBlue Paris | |
| Amount (\$) \$0.28 <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) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FEES |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 06/26/2024 | 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) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FEES |
| 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: 14/15 Rpt: 31/32 | 2 FILER NAME McKinney Values PAC | 3 Filer ID (Ethics Commission Filers) 00086990 |
| 4 Date 06/26/2024 | 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) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FEES |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 06/30/2024 | Payee name SendinBlue Paris | |
| Amount (\$) \$53.41 <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) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FEES |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 06/30/2024 | Payee name SendinBlue Paris | |
| Amount (\$) \$0.59 <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) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FEES |
| 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: 15/15 Rpt: 32/32 | 2 FILER NAME McKinney Values PAC | 3 Filer ID (Ethics Commission Filers) 00086990 |
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| 4 Date 02/05/2024 | 5 Payee name Vista Print |
|-----------------------------|------------------------------------|

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| 6 Amount (\$) \$108.24 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 275 Wyman St Waltham, MA 02421 |
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| 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 |
|---------------------------------|--|---|

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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 02/05/2024 | Payee name Zeffy |
|--------------------|---------------------|

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| Amount (\$) \$425.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 917 Ave du Mont-Royal E Montreal QC H2J1X3 Canada |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FEES |
|-------------------------------|---|--|

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

| | |
|--------------------|---------------------|
| Date 03/18/2024 | Payee name Zeffy |
|--------------------|---------------------|

| | |
|--|--|
| Amount (\$) \$136.38 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 917 Ave du Mont-Royal E Montreal QC H2J1X3 Canada |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FEES |
|-------------------------------|---|--|

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

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