

# GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC  
COVER SHEET PG 1

|                                                                                               |                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                       |                                  |
|-----------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|
| <b>The GPAC Instruction Guide explains how to complete this form.</b>                         |                                                                                                                                                                                                                                                                                                                                                      | <b>1 Filer ID</b><br>(Ethics Commission Filers)<br>00086976                                                                                                                           | <b>2 Total pages filed:</b><br>5 |
| <b>3 COMMITTEE NAME</b><br>Collin County Reproductive Justice Coalition                       |                                                                                                                                                                                                                                                                                                                                                      | <b>OFFICE USE ONLY</b>                                                                                                                                                                |                                  |
|                                                                                               |                                                                                                                                                                                                                                                                                                                                                      | Date Received<br><b>ELECTRONICALLY FILED</b><br>07/14/2024                                                                                                                            |                                  |
|                                                                                               |                                                                                                                                                                                                                                                                                                                                                      | Date Hand-delivered or Date Postmarked                                                                                                                                                |                                  |
|                                                                                               |                                                                                                                                                                                                                                                                                                                                                      | Receipt #                                                                                                                                                                             | Amount                           |
|                                                                                               |                                                                                                                                                                                                                                                                                                                                                      | Date Processed                                                                                                                                                                        |                                  |
|                                                                                               |                                                                                                                                                                                                                                                                                                                                                      | Date Imaged                                                                                                                                                                           |                                  |
| <b>4 COMMITTEE ADDRESS</b><br><br><input type="checkbox"/> Change of Address                  | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE<br>PO Box 294<br><br>McKinney, TX 75070                                                                                                                                                                                                                                                       |                                                                                                                                                                                       |                                  |
|                                                                                               | <b>5 CAMPAIGN TREASURER NAME</b>                                                                                                                                                                                                                                                                                                                     | MS / MRS / MR<br><br>FIRST<br>Mary S.<br><br>NICKNAME<br>LAST<br>Peebles                                                                                                              | MI<br><br>SUFFIX                 |
| <b>6 CAMPAIGN TREASURER STREET ADDRESS</b><br><br>(Residence or Business)                     | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE<br>1617 Treehouse<br><br>Plano, TX 75023                                                                                                                                                                                                                                     |                                                                                                                                                                                       |                                  |
| <b>7 CAMPAIGN TREASURER MAILING ADDRESS</b><br><br><input type="checkbox"/> Change of Address | STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE<br>PO Box 294<br><br>McKinney, TX 75070                                                                                                                                                                                                                                                       |                                                                                                                                                                                       |                                  |
| <b>8 CAMPAIGN TREASURER PHONE</b>                                                             | AREA CODE PHONE NUMBER EXTENSION<br>(972) 741-0655                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                       |                                  |
| <b>9 REPORT TYPE</b>                                                                          | <input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR)<br><input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination<br><input type="checkbox"/> Runoff |                                                                                                                                                                                       |                                  |
| <b>10 PERIOD COVERED</b>                                                                      | Month Day Year      THROUGH      Month Day Year<br>01/01/2024      06/30/2024                                                                                                                                                                                                                                                                        |                                                                                                                                                                                       |                                  |
| <b>11 ELECTION</b>                                                                            | ELECTION DATE<br>Month Day Year                                                                                                                                                                                                                                                                                                                      | ELECTION TYPE<br><input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other<br><input type="checkbox"/> General <input type="checkbox"/> Special |                                  |

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# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**  
COVER SHEET PG 2

|                                                                          |                                                           |
|--------------------------------------------------------------------------|-----------------------------------------------------------|
| <b>12 COMMITTEE NAME</b><br>Collin County Reproductive Justice Coalition | <b>13 Filer ID</b> (Ethics Commission Filers)<br>00086976 |
|--------------------------------------------------------------------------|-----------------------------------------------------------|

|                                                                                                         |                                                                                              |              |
|---------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|--------------|
| <b>14 COMMITTEE ACTIVITY</b><br><br>(Attach lists on plain paper to complete this report if necessary.) | <b>1. Candidates</b><br>(Identify by name or, if applicable, classify by party.)             | A. Supported |
|                                                                                                         |                                                                                              | B. Opposed   |
|                                                                                                         | <b>2. Measures</b><br>(Describe by date and location of election and nature of issue.)       | A. Supported |
|                                                                                                         |                                                                                              | B. Opposed   |
|                                                                                                         | <b>3. Officeholders Assisted</b><br>(Identify by name or, if applicable, classify by party.) |              |

|                                |                                                                                                                                              |             |
|--------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|-------------|
| <b>15 CONTRIBUTION TOTALS</b>  | <b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</b> | \$ 0.00     |
|                                | <input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold                                 |             |
| <b>EXPENDITURE TOTALS</b>      | <b>2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)</b>                                                  | \$ 5,000.00 |
|                                | <b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>                                                                                            | \$ 0.00     |
| <b>CONTRIBUTION BALANCE</b>    | <b>4. TOTAL POLITICAL EXPENDITURES</b>                                                                                                       | \$ 0.00     |
|                                | <b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>                                                | \$ 6,539.30 |
| <b>OUTSTANDING LOAN TOTALS</b> | <b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>                                         | \$ 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.

Mary S. Peebles  
\_\_\_\_\_  
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

|                                                                          |                                                                                                                   |                                                           |
|--------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|
| <b>17 COMMITTEE NAME</b><br>Collin County Reproductive Justice Coalition |                                                                                                                   | <b>18 Filer ID</b> (Ethics Commission Filers)<br>00086976 |
| <b>19 SCHEDULE SUBTOTALS</b>                                             |                                                                                                                   | SUBTOTAL AMOUNT                                           |
|                                                                          | NAME OF SCHEDULE                                                                                                  |                                                           |
| 1.                                                                       | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                                 | \$ 5,000.00                                               |
| 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           | \$ 100.00                                                 |
| 15.                                                                      | <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER       | \$                                                        |

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

|                                                                               |                                                                                                                                                                                                 |                                                          |
|-------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|
| <b>The Instruction Guide explains how to complete this form.</b>              |                                                                                                                                                                                                 | <b>1</b> Total pages Schedule A1:<br>Sch: 1/1 Rpt: 4/5   |
| <b>2</b> FILER NAME<br>Collin County Reproductive Justice Coalition           |                                                                                                                                                                                                 | <b>3</b> Filer ID (Ethics Commission Filers)<br>00086976 |
| <b>4</b> Date<br>06/20/2024                                                   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>BROWN, JEAN<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>MCKINNEY, TX 75072 | <b>7</b> Amount of Contribution (\$)<br><br>\$5,000.00   |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>SELF EMPLOYED |                                                                                                                                                                                                 | <b>9</b> Employer (See Instructions)                     |

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

|                                                                                             |                                                                                                                |                                                                                                    |
|---------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|
| <b>1</b> Total pages Schedule I:<br>Sch: 1/1 Rpt: 5/5                                       | <b>2</b> FILER NAME<br>Collin County Reproductive Justice Coalition                                            | <b>3</b> Filer ID (Ethics Commission Filers)<br>00086976                                           |
| <b>4</b> Date<br>05/03/2024                                                                 | <b>5</b> Payee name<br>US POST OFFICE                                                                          |                                                                                                    |
| <b>6</b> Amount (\$)<br>100.00<br><input type="checkbox"/> Expenditure from corporate funds | <b>7</b> Payee Address; City; State; Zip<br>7210 VIRGINIA PKWY<br>STE 110<br>MCKINNEY, TX 75071                |                                                                                                    |
| <b>8</b> <b>PURPOSE OF EXPENDITURE</b>                                                      | <b>(a)</b> Category (See instructions for examples of acceptable categories)<br>Office Overhead/Rental Expense | <b>(b)</b> Description (See instructions regarding type of information required.)<br>PO BOX RENTAL |