## MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

## FORM MPAC **COVER SHEET PG 1**

т	ne MPAC Instruction	2 Total pages filed: 5					
3	COMMITTEE NAME	OFFICE USE ONLY					
	McKinney Police A						
				Date Received ELECTRONICALLY FILED 09/16/2024			
4	COMMITTEE	ADDRESS / PO BOX; APT / SUITE #;	CITY; STATE; ZIP				
	ADDRESS	P.O. Box 521					
	Change of Address	McKinney, TX 75069		Date Hand-delivered or Date Postmarked			
5	CAMPAIGN	MS / MRS / MR FIRST	MI				
	TREASURER NAME	Mr. Kyle		Receipt # Amount			
		-					
				Date Processed			
		NICKNAME LAST	SUFFIX				
		Wilkersor	1	Date Imaged			
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #; CITY; ST	ATE; ZIP CODE			
ľ	TREASURER	PO Box 521	AFT SOIL $\pi$ , CIT, ST				
	STREET ADDRESS	FO B0X 321					
	(Residence or Business)						
		McKinney, TX 75069					
7	CAMPAIGN TREASURER	STREET ADDRESS OR PO BOX;	APT / SUITE #; CITY; ST	ATE; ZIP CODE			
	MAILING	PO Box 521					
	ADDRESS						
	Change of Address	McKinney, TX 75069					
8	CAMPAIGN	AREA CODE PHONE NUMBER	EXTENSION				
	TREASURER PHONE	(832) 512-9513					
9	REPORT TYPE	X Monthly	10th day after campaign	Dissolution (Attach PAC-DR)			
			L treasurer termination				
10	MONTHLY REPORT FILING	January 5 April	5 July 5	October 5			
	DEADLINE						
		February 5 May	5 X August 5	November 5			
		March 5 June	5 September 5	December 5			
11	L PERIOD	Month Day Year	Month	Day Year			
	COVERED	06/26/2024	THROUGH 07/25/2	-			
	GO TO PAGE 2						
L Fo	orms provided by Texas Ethics Commission www.ethics.state.tx.us Version V4.1.0.48da51f7						

# MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

# FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)			
McKinney Police Associ	00059287						
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported					
(Attach lists on plain paper to complete this report if necessary.)		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	PLEDGES, LOANS, CONTRIBUTIONS M	POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00			
	2. TOTAL POLITICA (OTHER THAN PLEI	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	0.00			
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00			
	4. TOTAL POLITICA	L EXPENDITURES	\$	0.00			
CONTRIBUTION BALANCE	5. TOTAL POLITICAL C OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	12,665.90			
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	THE \$	0.00			
16 AFFIDAVIT	•						
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.					
		Mr. Kyle	Wilkerson				
		Signature of Ca	mpaign Treası	Irer			
AFFIX NOTARY	AFFIX NOTARY STAMP / SEAL ABOVE						
Sworn to and subscribed	his the	day					
of	of, 20, to certify which, witness my hand and seal of office.						
Signature of officer ad	ninistering oath	Printed name of officer administering oath	Title of offic	cer administering oath			
Forms provided by Texas E	thics Commission	www.ethics.state.tx.us		Version V4.1.0.48da51f7			

### FORM MPAC COVER SHEET PG 3

3 of 5

17 COMMITTEE NAME 18 Filer ID					(Ethics Commission Filers)	
McKinney Police Association FOP #107 00059287						
19 SCH		SUBTOTAL AMOUNT				
NAM	ME OF S					
1.	1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS			\$	0.00	
2.	2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS			\$	0.00	
3.	3. X SCHEDULE B: PLEDGED CONTRIBUTIONS			\$	0.00	
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	R	\$		
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA LABOR ORGANIZATION	TION OR	\$		
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG/	ANIZATION	\$		
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$		
8.	8. SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION					
9.	Х	SCHEDULE E: LOANS		\$	0.00	
10.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$	0.00	
11.	Х	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00	
12.	Х	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIO	DNS	\$	0.00	
13.	Х	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00	
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	DNS	\$		
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$		

**SUBTOTALS - MPAC** 

# PLEDGED CONTRIBUTIONS

#### SCHEDULE **B**

The Instruction Guide explains how to complete this form.				1 Total pages Schedule B: Sch: 1/1 Rpt: 4/5					
2	FILER NAME			3	Filer ID (Ethics Commission Filers)				
	McKinney Police Association FOP #107					00059287			
4	TOTAL OF UNITEMIZED PLEDGES				\$			0.00	
5	Date 6 Full na	ame of pledgor	out-of-state PAC (ID#:_	)	8	Amount of pledge (\$)	9 	In-kind description (If applicable)	
	7 Pledg	or Address;	City; State; Zip Code			Check if trave	I I I I I I I I	of Texas. Complete Sch	edule T.
<b>10</b> Principal occupation / Job title (See Instructions)				11 Employer (See Instru	ctic	ons)			

LOANS		so	CHEDULE E
The Instruction Guide explains how to complete this form.	l pages Schedule : 1/1 Rpt: 5/5	ges Schedule E: 1 Rpt: 5/5	
2 FILER NAME McKinney Police Association FOP #107	ID (Ethics Con 59287	nmission Filers)	
<sup>4</sup> TOTAL OF UNITEMIZED LOANS		\$	0.00
5 Date of loan 7 Name of lender out-of-state PAC (ID#:		) <b>9</b> Loan Am	iount (\$)
6 Is lender a financial institution? 8 Lender address; City; State; Zip Code		10 Interest I	
		<b>11</b> Maturity	Date
<b>12</b> Principal occupation / Job title (See Instructions) <b>13</b> Employer (See Instruction)	is)		
14 Description of Collateral 15 Check if personal funds w   None	ere depos		account tructions)
16 GUARANTOR 17 Name of guarantor   INFORMATION INFORMATION		19 Amount	Guaranteed (\$)
not applicable <b>18</b> Guarantor address; City; State; Zip Code			
20 Principal occupation   21 Employer (See Instruction	IS)		