## GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

# FORM GPAC COVER SHEET PG 1

Th	e GPAC Instruction	Guide explains how to complete this form.	1	Filer ID (Ethics Commission Filers) 00083064		2 Total pages filed: 10			
3	COMMITTEE NAME					OFFICE USE ONLY			
	Collin Strong PAC					Date Received			
	-								
						01/02/2025			
4	COMMITTEE ADDRESS		ITY	; STATE; ZIP COD	E				
	ADDIE33	3705 Amon Carter Dr.				Date Hand-delivered or Date Postmarked			
	Change of Address								
	L °	McKinney, TX 75070				Receipt # Amount			
						Date Processed			
						Date Imaged			
5	CAMPAIGN TREASURER	MS / MRS / MR FIRST				MI			
	NAME	Mr. Darrell E.							
		NICKNAME LAST				SUFFIX			
		Hale							
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE	;	APT / SUITE #; CI	TY;	STATE; ZIP CODE			
	TREASURER	3705 Amon Carter Dr.							
	STREET ADDRESS								
	(Residence or Business)	McKinney, TX 75070							
<u> </u>	· · ·	-							
ľ	CAMPAIGN TREASURER	STREET OR PO BOX;		APT / SUITE #; C	CITY;	STATE; ZIP CODE			
	MAILING	3705 Amon Carter Dr							
	ADDRESS								
	Change of Address	McKinney, TX 75070							
8	CAMPAIGN	AREA CODE PHONE NUMBER	FX	TENSION					
ľ	TREASURER	(214) 471-3584	L/						
	PHONE								
9	REPORT		0.0	de la francia da 19	_				
ľ	TYPE	X January 15	30th	day before election	L	Dissolution (Attach PAC-DR)			
			8th c	lay before election		10th day after campaign treasurer			
		July 15	Run	off		termination			
10	PERIOD	Month Day Year			ay	Year			
	COVERED	07/01/2024	THR	20UGH 12/31/2	2024				
		ļ							
11	ELECTION	ELECTION DATE		ELECTION TYPE	Ξ				
		Month Day Year X	Prir	nary Runoff		Other			
		03/05/2024	Ger	neral Special					
			•						
-		1 1							
	GO TO PAGE 2								
For	ms provided by Te	xas Ethics Commission www.	ethi	cs.state.tx.us		Version V4.1.0.5dd2ace2			
. 01			Sull	00.01010.17.00					

## GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)					
Collin Strong PAC			00083064						
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							
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)								
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00					
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	195.00					
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00					
	4. TOTAL POLITICA	L EXPENDITURES	\$	980.03					
CONTRIBUTION BALANCE	5. TOTAL POLITICAL C OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	2,038.94					
OUTSTANDING LOAN TOTALS	1	AMOUNT OF ALL OUTSTANDING LOANS AS OF 1 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. Darre	ell E. Hale						
		Signature of Ca	mpaign Treasu	rer					
AFFIX NOTARY	AFFIX NOTARY STAMP / SEAL ABOVE								
Sworn to and subscribed	I before me, by the said	, tł	nis the	day					
	of, 20, to certify which, witness my hand and seal of office.								
Signature of officer ac	Iministering oath	Printed name of officer administering oath	Title of offic	er administering oath					
Forms provided by Texas I	Ethics Commission	www.ethics.state.tx.us		Version V4.1.0.5dd2ace2					

S	JBT	OTALS - GPAC	C		м GPAC IEET PG 3 3 of 10
		EE NAME ong PAC	18 Filer ID 00083064	(Ethics Com	mission Filers)
		E SUBTOTALS SCHEDULE		SUBTO	TAL AMOUNT
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	195.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
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.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR C	ORGANIZATION	\$	
9.		SCHEDULE E: LOANS		\$	
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$	980.03
11.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
12.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$	
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	DNS	\$	
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	

## MONETARY POLITICAL CONTRIBUTIONS

#### SCHEDULE A1

Tł	he Instruc	ction Guide explains how to complete this f	1	Total pages Schedule A1: Sch: 1/3 Rpt: 4/10		
2 FII	LER NAME		3	Filer ID (Ethics Commission	ı Filers)	
	ollin Strong	I PAC			00083064	
<b>4</b> Da	ate	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
08	8/05/2024	Leyrer, Ellen				\$10.00
		6 Contributor address; City; State; Zip Code		1		
		Plano, TX 75023				
		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
Re	etired		Retired			
Da	ate	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
09	9/05/2024	Leyrer, Ellen				\$10.00
		Contributor address; City; State; Zip Code		]		
	· · ·	Plano, TX 75023				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
Kt	etired		Retired			
	ate	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
12	12/21/2024 Wilbur, Kirby					\$15.00
		Contributor address; City; State; Zip Code				
		Mallineau TV 75071				
	instant oppu	McKinney, TX 75071		Ĺ		
	rincipal occuj eal Estate /	pation / Job title (See Instructions)	Employer (See Instructions Self	5)		
				<del>.</del>		
	ate	Full name of contributor out-of-state PAC (ID#:)	)		Amount of Contribution (\$)	÷45.00
11	1/21/2024	Wilbur, Kirby				\$15.00
		Contributor address; City; State; Zip Code				
		McKinney, TX 75071				
Pri	rincinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u>		
	eal Estate /		Self	5)		
				Τ	Amount of Contribution (\$)	
	ate 0/21/2024	Full name of contributor out-of-state PAC (ID#: Wilbur, Kirby	)		Amount of Contribution (\$)	\$15.00
10	J/Z1/2024	-		ł		Φ10.00
		Contributor address; City; State; Zip Code				
		McKinney, TX 75071				
Pri	rincipal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	eal Estate /		-,			
			Self			

# MONETARY POLITICAL CONTRIBUTIONS

#### SCHEDULE A1

	The Instru	ction Guide explains how to complete this f	1	Total pages Schedule A1: Sch: 2/3 Rpt: 5/10		
2	FILER NAME		3	Filer ID (Ethics Commission	Filers)	
	Collin Strong	PAC		00083064	-	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	09/21/2024	Wilbur, Kirby		(+)	\$15.00	
		6 Contributor address; City; State; Zip Code				+_0.00
		Contributor address, City, State, Zip Code				
		McKinney, TX 75071				
	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u> ເ)		
ľ	Real Estate		Self	"		
╘				_		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	08/21/2024	Wilbur, Kirby				\$15.00
		Contributor address; City; State; Zip Code				
		McKinney, TX 75071				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Real Estate	Agent	Self			
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	12/13/2024	Wilbur, Kirby			\$20.00	
		Contributor address; City; State; Zip Code				
		McKinney, TX 75071				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Real Estate	Agent	Self			
⊨	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	11/13/2024	Wilbur, Kirby			/ incunt of Continuation (+)	\$20.00
	11,10,2021	Contributor address; City; State; Zip Code				¢20.00
		Contributor address, City, State, Zip Code				
		McKinney, TX 75071				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ນ		
	Real Estate	· · · ·	Self	,		
╞			-			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	#00.00
	10/13/2024	Wilbur, Kirby			\$20.00	
		Contributor address; City; State; Zip Code				
⊢	<u> </u>	McKinney, TX 75071	Employer (See Instructions	Ĺ		
		pation / Job title (See Instructions)	5)			
	Real Estate	Agent	Self			
I						

MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 3/3 Rpt: 6/10
2 FILER NAME Collin Strong PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00083064
4 Date       5 Full name of contributor       out-of-state PAC (ID#:)         09/13/2024       Wilbur, Kirby         6 Contributor address; City; State; Zip Code         McKinney, TX 75071	<ul><li>7 Amount of Contribution (\$)</li><li>\$20.00</li></ul>
8 Principal occupation / Job title (See Instructions)       9 Employer (See Instructions)         Real Estate Agent       Self	)
Date       Full name of contributor       out-of-state PAC (ID#:)         08/13/2024       Wilbur, Kirby         Contributor address; City; State; Zip Code	Amount of Contribution (\$) \$20.00
McKinney, TX 75071           Principal occupation / Job title (See Instructions)         Employer (See Instructions)	
Principal occupation / Job fulle (See Instructions)     Employer (See Instructions)       Real Estate Agent     Self	I

POLITICAL EXPENDITURES FROM POLITICAL	
CONTRIBUTIONS	

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)					
	The Instruction Guide explains how to complete this form.					
<b>1</b> Total pages Schedule F1:						
Sch: 1/4 Rpt: 7/10	Collin Strong PAC 00083064					
4 Date	5 Payee name					
08/30/2024	FrostBank					
6 Amount (\$)	7 Payee address; City; State; Zip Code					
\$5.00	5021 W Park Blvd,					
Expenditure from corporate funds	Plano, TX 75093					
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Fees Check if travel outside of Texas. Complete Schedule T.					
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
	Check Imaging Fee					
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held					
Date	Payee name					
09/30/2024	FrostBank					
Amount (\$)	Payee address; City; State; Zip Code					
\$5.00	5021 W Park Blvd,					
Expenditure from corporate funds	Plano, TX 75093					
PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Fees</li> <li>(b) Description         <ul> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> <li>Check Imaging Fee</li> </ul> </li> </ul>					
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held					
Date	Payee name					
10/31/2024	FrostBank					
Amount (\$)	Payee address; City; State; Zip Code					
\$5.00	5021 W Park Blvd,					
Expenditure from corporate funds	Plano, TX 75093					
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
OF EXPENDITURE	Fees       Check if travel outside of Texas. Complete Schedule T.         Check if Austin, TX, officeholder living expense         Check Imaging Fee					
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held					

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees         Office Overhead/Rental Expense         T           Food/Beverage Expense         Polling Expense         T           By -         Gift/Awards/Memorials Expense         Printing Expense         T				Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
<b>1</b> T	otal pages Schedule F1:	2 FIL	LER NAME					3	Filer ID	(Ethics Commission Filers)
	Sch: 2/4 Rpt: 8/10	Co	ollin Strong F	PAC					00083064	
<b>4</b> D	ate	<b>5</b> Pa	ayee name							
1	1/29/2024	Fre	ostBank							
<b>6</b> A	mount (\$)	<b>7</b> Pa	ayee address;	City;	State;	Zip Co	de			
	\$5.00	50	)21 W Park E	Blvd,						
	Expenditure from corporate funds	Pla	ano, TX 750	93						
8	PURPOSE OF EXPENDITURE		<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Fees</li> <li>(b) Description</li> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> <li>Check Imaging Fee</li> </ul>							
9 Complete ONLY if direct expenditure to benefit C/OH       Candidate/Officeholder name       Office sought       Office held							əld			
D	Date Payee name									
1	2/31/2024	Fre	ostBank							
	Amount (\$)     Payee address;     City;     State;     Zip Code       \$5.00     \$021 W Park Blvd,									
	Expenditure from corporate funds	Pla	ano, TX 750	93						
I	PURPOSE OF EXPENDITURE		<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Fees</li> <li>(b) Description         <ul> <li>Check if travel outsi</li> <li>Check if Austin, TX, Check Imaging F</li> </ul> </li> </ul>				officeholder living			
	omplete <u>ONLY</u> if direct xpenditure to benefit C/OI		ndidate/Officeh	nolder name	C	Office sou	ght		Office he	eld
D	ate	Pa	ayee name							
0	8/26/2024	Ma	ailchimp							
A	mount (\$)	Pa	ayee address;	City;	State;	Zip Co	de			
	\$98.07	67	'5 Ponce De	Leon Ave NE						
	Expenditure from	. S	Ste 5000							
	corporate funds	At	lanta, GA 30	308						
I	PURPOSE OF EXPENDITURE		ategory <sub>(See C</sub> dvertising Ex	ategories listed at the t pense	op of this sche	edule)		n, TX,	officeholder living	plete Schedule T. J expense
	complete <u>ONLY</u> if direct xpenditure to benefit C/OI		ndidate/Officeh	nolder name	C	Office sou	ght		Office he	eld

POLITICAL EXPENDITURES FROM POLITICAL	
CONTRIBUTIONS	

EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment				d/Rental Expense e se s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2 FILER	NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 3/4 Rpt: 9/10	Collin	Strong PAC					00083064
4	Date	5 Payee	name					
	09/24/2024	Mailc						
6	Amount (\$)	7 Payee	address; City;	State; Zip C	ode			
	\$98.07	675 F	once De Leon Ave NE					
		. Ste	5000					
	Expenditure from corporate funds	Atlan	ta, GA 30308					
8	PURPOSE		Ory (See Categories listed at the top	<b>f</b> 4h-1	(b)	Description		
-	OF		rtising Expense	of this schedule)	(,	·	outsi	de of Texas. Complete Schedule T.
	EXPENDITURE	7 10.7 0				Check if Austin	, TX,	officeholder living expense
						Email Adverti	isin	g
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candida	ate/Officeholder name	Office so	ught			Office held
	Date	Payee	name					
	10/25/2024 Mailchimp							
	Amount (\$)	Payee	address; City;	State; Zip C	code			
	\$98.07	675 F	once De Leon Ave NE					
		. Ste	5000					
	Expenditure from corporate funds		ta, GA 30308					
	PURPOSE OF	( <b>a)</b> Categ	Ory (See Categories listed at the top	o of this schedule)	(b)	Description		
	EXPENDITURE	Adve	rtising Expense					de of Texas. Complete Schedule T. , officeholder living expense
						Email Adverti		
								5
	Complete ONLY if direct	Candida	ate/Officeholder name	Office so	ught			Office held
	expenditure to benefit C/OI				0			
	Date	Paver	name					
	11/25/2024	Mailc						
	Amount (\$)		address; City;	State; Zip C	òde			
	\$98.07	,	Ponce De Leon Ave NE	οιαίο, Ζιρ Ο	<del>.</del>			
	\$90.U7							
	Expenditure from	. Ste						
	corporate funds	Atlan	ta, GA 30308		-			
	PURPOSE OF		Ory (See Categories listed at the top	o of this schedule)	(b)	Description		de ef Teures, Oenerlade Onla, 1 1 T
	EXPENDITURE	Adve	rtising Expense					de of Texas. Complete Schedule T. , officeholder living expense
						Email Adverti		
								5
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candida	ate/Officeholder name	Office so	ught			Office held

POLITICAL EXPENDITURES FROM POLITICAL	
CONTRIBUTIONS	

EXPENDITURE CATEGORIES FOR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
Sch: 4/4 Rpt: 10/10	Collin Strong PAC 00083064	
4 Date	5 Payee name	
12/31/2024	Mailchimp	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$98.07	675 Ponce De Leon Ave NE	
	. Ste 5000	
Expenditure from corporate funds	Atlanta, GA 30308	
8 PURPOSE		
OF	<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Advertising Expense</li> <li>(b) Description</li> <li>Check if travel outside of Texas. Complete Schedule T.</li> </ul>	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	Email Advertising	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
08/26/2024	Sqaurespace	
Amount (\$)	Payee address; City; State; Zip Code	
\$294.22	225 Varick St	
	12th floor	
Expenditure from corporate funds	New York, NY 10014	
PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Advertising Expense</li> <li>(b) Description</li> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> <li>Website Expense</li> </ul>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
10/15/2024	Zoom	
Amount (\$)	Payee address; City; State; Zip Code	
\$170.46	55 Almaden Blvd	
·-··	Suite 6	
Expenditure from		
corporate funds	San Jose, CA 95113	
PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Advertising Expense</li> <li>(b) Description</li> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> <li>Webconferencing Expense</li> </ul>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held	