

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: 29
3 COMMITTEE NAME McKinney Values PAC		OFFICE USE ONLY	
		Date Received ELECTRONICALLY FILED 01/14/2025	
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 MI Mr. Joseph C.	
		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 checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input 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 Month Day Year 07/01/2024 THROUGH 12/31/2024	
11 ELECTION		ELECTION DATE ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> Other 05/03/2025 <input type="checkbox"/> General <input type="checkbox"/> Special Municipal	

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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)	\$ 705.07
	<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)	\$ 4,688.53
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 3,698.33
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 3,898.16
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 29

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	\$	4,688.53
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	\$	3,698.33
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: 1/12 Rpt: 4/29
2 FILER NAME McKinney Values PAC		3 Filer ID (Ethics Commission Filers) 00086990
4 Date 11/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arco, Joseph <hr/> 6 Contributor address; City; State; Zip Code McKinney, TX 75072	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) Retired
Date 08/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Armstrong, Paulette <hr/> Contributor address; City; State; Zip Code McKinney, TX 75093	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boe, Kristina <hr/> Contributor address; City; State; Zip Code McKinney, TX 75069	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Hairstylist		Employer (See Instructions) self-employed
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boe, Kristina <hr/> Contributor address; City; State; Zip Code McKinney, TX 75069	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Stylist		Employer (See Instructions) Self
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Jean <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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/12 Rpt: 5/29
2 FILER NAME McKinney Values PAC		3 Filer ID (Ethics Commission Filers) 00086990
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Todd <hr/> 6 Contributor address; City; State; Zip Code McKinney, TX 75072	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 07/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burks, Julie <hr/> Contributor address; City; State; Zip Code McKinney, TX 75071	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bush, Matthew <hr/> Contributor address; City; State; Zip Code McKinney, TX 75072	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castrianni, Elizabeth <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) homemaker		Employer (See Instructions) homemaker
Date 09/10/2024	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 (\$) \$40.00
Principal occupation / Job title (See Instructions) Real estate		Employer (See Instructions) Chabot Strategies

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/12 Rpt: 6/29
2 FILER NAME McKinney Values PAC		3 Filer ID (Ethics Commission Filers) 00086990
4 Date 10/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craycraft, Matt	7 Amount of Contribution (\$) \$90.00
6 Contributor address; City; State; Zip Code McKinney, TX 75071		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) self-employed
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craycraft, Matt	Amount of Contribution (\$) \$60.00
Contributor address; City; State; Zip Code McKinney, TX 75071		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) self-employed
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAILY, BONNIE	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code McKinney, TX 75070		
Principal occupation / Job title (See Instructions) homemaker		Employer (See Instructions) homemaker
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donald, A D	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code McKinney, TX 75025		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donnelly, John	Amount of Contribution (\$) \$40.00
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: 4/12 Rpt: 7/29
2 FILER NAME McKinney Values PAC		3 Filer ID (Ethics Commission Filers) 00086990
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Durrance, Cynthia <hr/> 6 Contributor address; City; State; Zip Code Denton, TX 76208	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Sales & Marketing Manager		9 Employer (See Instructions) A Place At Home
Date 07/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farrar, Sylvia <hr/> Contributor address; City; State; Zip Code Allen, TX 75013	Amount of Contribution (\$) \$23.00
Principal occupation / Job title (See Instructions) Tutor math science foreign language		Employer (See Instructions) Self- Farrar Tutoring
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galloway, Kaye <hr/> Contributor address; City; State; Zip Code Aubrey, TX 76227	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Hay farmer		Employer (See Instructions) Self
Date 10/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heritage Ranch <hr/> Contributor address; City; State; Zip Code Fairview, TX 75069	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/28/2024	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 (\$) \$10.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) LM Consultants, Engineering Consultant

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/12 Rpt: 8/29
2 FILER NAME McKinney Values PAC		3 Filer ID (Ethics Commission Filers) 00086990
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lafon, Rickie <hr/> 6 Contributor address; City; State; Zip Code McKinney, TX 75069	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Sunrise Learning Center, Inc.
Date 09/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lassiter, Sharon <hr/> Contributor address; City; State; Zip Code McKinney, TX 75072	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) self-employed		Employer (See Instructions) self-employed
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leftin, Judith <hr/> Contributor address; City; State; Zip Code McKinney, TX 75072	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) homemaker		Employer (See Instructions) homemaker
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lorenz, Rosina <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 08/23/2024	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 (\$) \$40.00
Principal occupation / Job title (See Instructions) TV Show Host and Producer		Employer (See Instructions) ExecYou Productions

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/12 Rpt: 9/29
2 FILER NAME McKinney Values PAC		3 Filer ID (Ethics Commission Filers) 00086990
4 Date 10/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mathis, Mary <hr/> 6 Contributor address; City; State; Zip Code McKinney, TX 75072	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) homemaker		9 Employer (See Instructions) homemaker
Date 07/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKinney, Susan <hr/> Contributor address; City; State; Zip Code McKinney, TX 75072	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Substitute teacher		Employer (See Instructions) MISD
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNamara, Denise <hr/> Contributor address; City; State; Zip Code McKinney, TX 75252	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) McNamara Media, LLC
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montes, john <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75071	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Shawn <hr/> Contributor address; City; State; Zip Code Orangevale, TX 95662	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) self-employed		Employer (See Instructions) self-employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/12 Rpt: 10/29
2 FILER NAME McKinney Values PAC		3 Filer ID (Ethics Commission Filers) 00086990
4 Date 11/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Osborne, Sam <hr/> 6 Contributor address; City; State; Zip Code McKinney, TX 75071	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Accountant		9 Employer (See Instructions) Weaver - Accountant
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Padilla, Joe <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) self-employed		Employer (See Instructions) self-employed
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Regner, Kari <hr/> Contributor address; City; State; Zip Code McKinney, TX 75035	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rowen, Ed <hr/> Contributor address; City; State; Zip Code McKinney, TX 75072	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rowen, Edward <hr/> Contributor address; City; State; Zip Code McKinney, TX 75072	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Public Affairs Consultant		Employer (See Instructions) Rough Rider Strategies

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/12 Rpt: 11/29
2 FILER NAME McKinney Values PAC		3 Filer ID (Ethics Commission Filers) 00086990
4 Date 12/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sequenzia, Madison	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code McKinney, TX 75071		
8 Principal occupation / Job title (See Instructions) homemaker		9 Employer (See Instructions) homemaker
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sequenzia, Madison	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code McKinney, TX 75071		
Principal occupation / Job title (See Instructions) homemaker		Employer (See Instructions) homemaker
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sequenzia, Madison	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code McKinney, TX 75071		
Principal occupation / Job title (See Instructions) homemaker		Employer (See Instructions) homemaker
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sequenzia, Madison	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code McKinney, TX 75071		
Principal occupation / Job title (See Instructions) homemaker		Employer (See Instructions) homemaker
Date 08/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sequenzia, Madison	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code McKinney, TX 75071		
Principal occupation / Job title (See Instructions) homemaker		Employer (See Instructions) homemaker

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/12 Rpt: 12/29
2 FILER NAME McKinney Values PAC		3 Filer ID (Ethics Commission Filers) 00086990
4 Date 10/06/2024	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 (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Small Business Owner		9 Employer (See Instructions) AR Workshop Garland
Date 08/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaw, Rachel <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Small Business Owner		Employer (See Instructions) AR Workshop Garland
Date 08/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaw, Rachel <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TV Show Host and Producer		Employer (See Instructions) ExecYou Productions
Date 07/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaw, Rachel <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Rachel Shaw		Employer (See Instructions) Rachel Shaw
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Square Inc <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94103	Amount of Contribution (\$) \$419.49
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/12 Rpt: 13/29
2 FILER NAME McKinney Values PAC		3 Filer ID (Ethics Commission Filers) 00086990
4 Date 08/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Staffan, Paul <hr/> 6 Contributor address; City; State; Zip Code McKinney, TX 75071	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) RF Engineer		9 Employer (See Instructions) RTX
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tritthart, Michael <hr/> Contributor address; City; State; Zip Code McKinney, TX 75071	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) self-employed		Employer (See Instructions) MTritt INC
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tritthart, Shantel <hr/> Contributor address; City; State; Zip Code McKinney, TX 75071	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) self-employed		Employer (See Instructions) self-employed
Date 08/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Velez, Jennifer <hr/> Contributor address; City; State; Zip Code McKinney, TX 75402	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NYPD
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vranich, Joseph <hr/> Contributor address; City; State; Zip Code McKinney, TX 75071	Amount of Contribution (\$) \$20.00
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: 11/12 Rpt: 14/29
2 FILER NAME McKinney Values PAC		3 Filer ID (Ethics Commission Filers) 00086990
4 Date 08/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallis, Bridgette	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code McKinney, TX 75072		
8 Principal occupation / Job title (See Instructions) homemaker		9 Employer (See Instructions) homemaker
Date 07/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warren, Robert	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code McKinney, TX 75070		
Principal occupation / Job title (See Instructions) Delivery		Employer (See Instructions) Doordash
Date 10/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warren, Tammy	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Mckinney, TX 75070		
Principal occupation / Job title (See Instructions) Executive Assistant		Employer (See Instructions) Emerson
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warren, Tammy	Amount of Contribution (\$) \$60.00
Contributor address; City; State; Zip Code Mckinney, TX 75070		
Principal occupation / Job title (See Instructions) Executive Assistant		Employer (See Instructions) Emerson
Date 08/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warren, Tammy	Amount of Contribution (\$) \$60.00
Contributor address; City; State; Zip Code Mckinney, TX 75070		
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: 12/12 Rpt: 15/29
2 FILER NAME McKinney Values PAC		3 Filer ID (Ethics Commission Filers) 00086990
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warren, Tammy	7 Amount of Contribution (\$) \$280.97
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 10/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weisz, Jeanne	Amount of Contribution (\$) \$75.00
Contributor address; City; State; Zip Code Frisco, TX 75034		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wineroth, Dafne	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code McKinney, TX 75071		
Principal occupation / Job title (See Instructions) Sub Teacher		Employer (See Instructions) MISD
Date 07/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Womack, Nicole	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code McKinney, TX 75072		
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) N/A
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) philips, charles	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code McKinney, TX 75071		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Philips & Epperson Attorneys, LP

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: 1/14 Rpt: 16/29	2 FILER NAME McKinney Values PAC	3 Filer ID (Ethics Commission Filers) 00086990
4 Date 07/29/2024	5 Payee name Amazon	
6 Amount (\$) \$43.28 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 440 Terry Ave N Seattle, WA 98109	
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 EVENT
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/07/2024	Payee name Amazon	
Amount (\$) \$14.07 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 440 Terry Ave N Seattle, WA 98109	
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 07/24/2024	Payee name Bakd by McKinney	
Amount (\$) \$58.52 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code unknown McKinney, TX 75069	
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 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: 2/14 Rpt: 17/29	2 FILER NAME McKinney Values PAC	3 Filer ID (Ethics Commission Filers) 00086990
4 Date 10/11/2024	5 Payee name Current Revolt, the Colony	
6 Amount (\$) \$100.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 7004 Fox Drive The Colony, TX 75056	
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 12/06/2024	Payee name Dollar Tree/misc	
Amount (\$) \$4.33 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5151 McKinney Ranch Pkwy McKinney, TX 75071	
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 EVENT
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/12/2024	Payee name Dollartree/straw buckect, etc.	
Amount (\$) \$16.24 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5151 McKinney Ranch Pkwy McKinney, TX 75071	
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: 3/14 Rpt: 18/29	2 FILER NAME McKinney Values PAC	3 Filer ID (Ethics Commission Filers) 00086990
4 Date 09/23/2024	5 Payee name Dunkin	
6 Amount (\$) \$5.62 <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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/21/2024	Payee name El Rincon, Restaurant	
Amount (\$) \$231.38 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 7951 Collin Mckinney 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
Date 09/06/2024	Payee name El Rincon	
Amount (\$) \$98.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 7951 Collin Mckinney 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 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: 4/14 Rpt: 19/29	2 FILER NAME McKinney Values PAC	3 Filer ID (Ethics Commission Filers) 00086990
4 Date 08/12/2024	5 Payee name Esp-Biz	
6 Amount (\$) \$237.88 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code unknown Allen, TX 75002	
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 OTHER
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/02/2024	Payee name Facebook	
Amount (\$) \$9.07 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025	
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 11/18/2024	Payee name Facebook	
Amount (\$) \$4.91 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025	
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: 5/14 Rpt: 20/29	2 FILER NAME McKinney Values PAC	3 Filer ID (Ethics Commission Filers) 00086990
4 Date 09/16/2024	5 Payee name Godaddy	
6 Amount (\$) \$72.32 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code unknow Tempe, AZ 85280	
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 EVENT
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/16/2024	Payee name Godaddy	
Amount (\$) \$76.62 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code unknow Tempe, AZ 85280	
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 EVENT
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/09/2024	Payee name Heritage Ranch, Fairview	
Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 465 Scemic Ranch Circle 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: 6/14 Rpt: 21/29	2 FILER NAME McKinney Values PAC	3 Filer ID (Ethics Commission Filers) 00086990
4 Date 08/20/2024	5 Payee name Jay R Event rentals	
6 Amount (\$) \$54.13 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code unknows McKinney, TX 75071	
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 12/09/2024	Candidate/Officeholder name Payee name Kroger/book of stamps	
Amount (\$) \$14.60 <input type="checkbox"/> Expenditure from corporate funds	Office sought Payee address; City; State; Zip Code 2901 S Lake Forest Dr 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 OTHER
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/16/2024	Candidate/Officeholder name Payee name Mail America	
Amount (\$) \$120.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought Payee address; City; State; Zip Code 5100 Eldorado Pkwy 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 FEES
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: 7/14 Rpt: 22/29	2 FILER NAME McKinney Values PAC	3 Filer ID (Ethics Commission Filers) 00086990
4 Date 08/27/2024	5 Payee name Minuteman Press	
6 Amount (\$) \$276.39 <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 08/08/2024	Payee name National Name badge Terntum	
Amount (\$) \$18.89 <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 EVENT
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/19/2024	Payee name Party City	
Amount (\$) \$26.17 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2097 N Central Expwy 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

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: 8/14 Rpt: 23/29	2 FILER NAME McKinney Values PAC	3 Filer ID (Ethics Commission Filers) 00086990
4 Date 08/21/2024	5 Payee name SIPS Fine Wine & Spirits	
6 Amount (\$) \$389.70 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 200 S Ridge Rcd McKinney, TX 75072	
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 07/26/2024	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
Date 08/27/2024	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: 9/14 Rpt: 24/29	2 FILER NAME McKinney Values PAC	3 Filer ID (Ethics Commission Filers) 00086990
4 Date 09/27/2024	5 Payee name SendinBlue Paris-	
6 Amount (\$) \$39.00 <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 07/26/2024	Payee name SendinBlue Paris-fees	
Amount (\$) \$0.39 <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 08/27/2024	Payee name SendinBlue Paris-fees	
Amount (\$) \$0.39 <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: 10/14 Rpt: 25/29	2 FILER NAME McKinney Values PAC	3 Filer ID (Ethics Commission Filers) 00086990
4 Date 10/28/2024	5 Payee name SendinBlue Paris-fees	
6 Amount (\$) \$0.43 <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 11/27/2024	Payee name SendinBlue Paris-fees	
Amount (\$) \$0.43 <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 12/27/2024	Payee name SendinBlue Paris-fees	
Amount (\$) \$0.43 <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: 11/14 Rpt: 26/29	2 FILER NAME McKinney Values PAC	3 Filer ID (Ethics Commission Filers) 00086990
4 Date 10/28/2024	5 Payee name SendinBlue Paris	
6 Amount (\$) \$39.00 <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 11/27/2024	Payee name SendinBlue Paris	
Amount (\$) \$39.00 <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
Date 12/27/2024	Payee name SendinBlue Paris	
Amount (\$) \$39.00 <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: 12/14 Rpt: 27/29	2 FILER NAME McKinney Values PAC	3 Filer ID (Ethics Commission Filers) 00086990
4 Date 11/22/2024	5 Payee name Starbucks/chocolat 2	
6 Amount (\$) \$9.90 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 6841 Virginia McKinney, TX 75071	
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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/09/2024	Payee name Subway/	
Amount (\$) \$63.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4900 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
Date 11/14/2024	Payee name Sultan (rest)food items	
Amount (\$) \$50.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3935 S Lake Forest Dr 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: 13/14 Rpt: 28/29	2 FILER NAME McKinney Values PAC	3 Filer ID (Ethics Commission Filers) 00086990
4 Date 07/25/2024	5 Payee name TST/Venezia's pizza	
6 Amount (\$) \$108.25 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1820 Eldorado pkwy McKinney, TX 75069	
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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/20/2024	Payee name The Stix/meeting	
Amount (\$) \$838.20 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 301 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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/19/2024	Payee name WalMart	
Amount (\$) \$28.13 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 7602 SW 8th St Bentoville, AK 72716	
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 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 | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By - | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 14/14 Rpt: 29/29	2 FILER NAME McKinney Values PAC	3 Filer ID (Ethics Commission Filers) 00086990
4 Date 09/27/2024	5 Payee name Zeffy-fee	
6 Amount (\$) \$0.43	7 Payee address; City; State; Zip Code 917 Avenue du Mont Montreal QC H4P1M7 Canada	
<input type="checkbox"/> Expenditure from corporate funds		
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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held