FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00031892 3 COMMITTEE NAME **OFFICE USE ONLY** Plano Police Association PAC Date Received **ELECTRONICALLY FILED** 05/01/2025 COMMITTEE ADDRESS / PO BOX; APT / SUITE #: CITY: STATE: ZIP **ADDRESS** P.O. Box 861956 Plano, TX 75086 Date Hand-delivered or Date Postmarked CAMPAIGN MS / MRS / MR **FIRST** MI **TREASURER** Receipt # Amount Mr. Aaron M. NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Graham CAMPAIGN APT / SUITE #; STREET ADDRESS (NO PO BOX PLEASE); CITY; STATE; ZIP CODE TREASURER PO BOX 861956 STREET **ADDRESS** (Residence or Business) Plano, TX 75086-1956 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** PO BOX 861956 MAILING **ADDRESS** Plano, TX 75086-1956 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (601) 917-1210 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 April 5 July 5 October 5 REPORT FILING **DEADLINE** February 5 X May 5 August 5 November 5 March 5 September 5 December 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 03/26/2025 04/25/2025 **GO TO PAGE 2**

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

2 COMMITTEE NAME		1	L3 Filer ID	(Ethics Commission Filers)
Plano Police Associatio	n PAC		00031892	
4 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Mr. John Muns City of Plano, N	layor, Place	6
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Measures	A. Supported		
	(Describe by date and location of election and nature of issue.)			
		B. Opposed		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
5 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE 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	\$	16,380.62
CONTRIBUTION BALANCE	5. TOTAL POLITICAL O	CONTRIBUTIONS MAINTAINED AS OF THE LAST E G PERIOD	DAY \$	13,695.88
OUTSTANDING LOAN TOTALS	•	AMOUNT OF ALL OUTSTANDING LOANS AS OF THE REPORTING PERIOD	HE \$	0.00
6 AFFIDAVIT				
		I swear, or affirm, under penalty of per true and correct and includes all inform under Title 15, Election Code.		
		Mr. Aaron N	M. Graham	
		Signature of Can		ırer
AFFIX NOTARY	STAMP / SEAL ABOVE			
Sworn to and subscribed	before me, by the said	, thi	is the	day
		which, witness my hand and seal of office.		

MONTHLY FILING GPAC REPORT: PURPOSE

FORM MPAC **ADDENDUM**

	13 Filer ID (Ethics Commission Filers) 00031892 Duncil, Place 2
(Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 1. Candidates (Identify by name or, if applicable, classify by party.) (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) A. Supported Chris Krupa Downs City of Applicable classify by party.) B. Opposed A. Supported Chris Krupa Downs City of Applicable classify by party.)	
(Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 1. Candidates (Identify by name or, if applicable, classify by party.) (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) A. Supported Chris Krupa Downs City of Applicable, classify by party. B. Opposed A. Supported Chris Krupa Downs City of Applicable, classify by party. A. Supported Chris Krupa Downs City of Applicable, classify by party. A. Supported Chris Krupa Downs City of Applicable, classify by party.	ouncil, Place 2
paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) COMMITTEE ACTIVITY 1. Candidates (Identify by name or, if applicable, classify by party.) (Attach lists on plain paper to complete this report if necessary.) 8. Opposed A. Supported Chris Krupa Downs City of applicable, classify by party.) B. Opposed 2. Measures (Describe by date and location of election and nature of issue.)	
(Describe by date and location of election and nature of issue.) B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) A. Supported Chris Krupa Downs City of applicable, classify by party.) B. Opposed B. Opposed A. Supported Chris Krupa Downs City of applicable, classify by party.) A. Supported Chris Krupa Downs City of applicable, classify by party.) A. Supported Chris Krupa Downs City of applicable, classify by party.) A. Supported Chris Krupa Downs City of applicable, classify by party.)	
Committee Committee	
3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) COMMITTEE ACTIVITY 1. Candidates (Identify by name or, if applicable, classify by party.) (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.)	
Assisted (Identify by name or, if applicable, classify by party.) COMMITTEE ACTIVITY 1. Candidates (Identify by name or, if applicable, classify by party.) (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.)	
COMMITTEE ACTIVITY 1. Candidates (Identify by name or, if applicable, classify by party.) (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) A. Supported Chris Krupa Downs City of applicable. B. Opposed A. Supported	
ACTIVITY (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.)	
paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) A. Supported	Plano, Council, Place 4
(Describe by date and location of election and nature of issue.)	
B. Opposed	
3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY 1. Candidates (Identify by name or, if applicable, classify by party.) A. Supported Hayden Padgett City of Planary Padgett City o	ano, Council, Place 8
(Attach lists on plain paper to complete this report if necessary.)	
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.)	

MONTHLY FILING GPAC REPORT: PURPOSE

FORM MPAC **ADDENDUM**

				Page 4 01 12
12 COMMITTEE NAME				13 Filer ID (Ethics Commission Filers)
Plano Police Association F	PAC			00031892
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	Ballot ID:null Election Date:2025- New Police Headquarters	05-03 Desc:City of Plano Proposition B
		B. Opposed		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
COMMITTEE ACTIVITY	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	Ballot ID:null Election Date:2025- C, New Police Training Center	05-03 Desc:City of Plano Proposition
		B. Opposed		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Steve Lavine City of Plano, Cour	ncil, Place 5
(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		
	Officeholders Assisted (Identify by name or, if			
	applicable, classify by party.)	l		

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3 5 of 12

				5 of 12
L7 COMMITT	(Ethics Commis	ssion Filers)		
Plano Po	lice Association PAC	00031892		
	E SUBTOTALS SCHEDULE		SUBTOTA	L AMOUNT
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	0.00
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00
3. X	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	0.00
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	DR	\$	
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPOR LABOR ORGANIZATION	ATION OR	\$	
6.	6. SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION			
7.	7. SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION			
8.	8. SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION			
9. X	9. X SCHEDULE E: LOANS			
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	\$	16,380.62	
11. X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	0.00	
12. X	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTI	\$	0.00	
13. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTI	ONS	\$	
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

PLED	GED CONTRIBU	TIONS				SCHEDULE B
Tł	The Instruction Guide explains how to complete this form. FILER NAME Plano Police Association PAC					dule B: /12
						nics Commission Filers)
4 TOTAL	OF UNITEMIZED PLEDG	SES			\$	0.00
5 Date	6 Full name of pledgor 7 Pledgor Address;	out-of-state PAC (ID#:			Amount of pledge (\$)	9 In-kind description (If applicable)
10 Dringing I	and the first of t	etions)	144 - 1 10			I I I side of Texas. Complete Schedule T
10 Principal (occupation / Job title (See Instru	ctions)	11 Employer (See Instru	ructi	ons)	

	LOANS					SCHEDULE E
	The Instruction	on Guide explains how	v to complete this f	orm.	ı	ages Schedule E: /1 Rpt: 7/12
2	FILER NAME Plano Police As	sociation PAC				(Ethics Commission Filers)
4	TOTAL OF UN	NITEMIZED LOANS			I	\$ 0.00
5	Date of loan	7 Name of lender	out-of-state PA	C (ID#:		9 Loan Amount (\$)
6	Is lender a financial institution?	8 Lender address;	City; State;	Zip Code		10 Interest Rate
						11 Maturity Date
12	Principal occupati	on / Job title (See Instruction	s)	13 Employer (See Instruc	tions)	1
14	Description of Col	lateral		15 Check if personal fund	s were deposite	d into political account (See Instructions)
16	GUARANTOR INFORMATION	17 Name of guarantor		<u> </u>		19 Amount Guaranteed (\$)
	not applicable	18 Guarantor address;	City; State;	Zip Code		
	Principal occupati	on		21 Employer (See Instruc	tions)	

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Candidate/Officeholder/Politica Credit Card Payment		s Salaries/	expense Wages/Contract Labor	OTHER (enter a	category not listed above)
Credit Card Payment	The Instruc	ction Guide explains how to co	omplete this form.		
1 Total pages Schedule F1:	2 FILER NAME			3 Filer ID	(Ethics Commission Filers)
Sch: 1/5 Rpt: 8/12	Plano Police Associa	tion PAC		00031892	
4 Date	5 Payee name			•	
04/21/2025	Guardian Public Strat	egies			
6 Amount (\$)	7 Payee address; City	/; State; Zip C	ode		
\$15,122.52	1108 Lavaca Street 1	10-506			
Expenditure from corporate funds	Austin, TX 78701				
8 PURPOSE			(b) Description		
OF	(a) Category (See Categories	isted at the top of this schedule)	(b) Description	outside of Texas. Com	nlete Schedule T
EXPENDITURE	Advertising Expense		ı <u></u>	n, TX, officeholder living	•
			Municipal Ele	ection Mailer	
9 Complete ONLY if direct	Candidate/Officeholder na	ame Office so	ught	Office he	eld
expenditure to benefit C/OI	I				
Date	Payee name				
04/21/2025	Guardian Public Strat	egies			
Amount (\$)	Payee address; City	/; State; Zip C	ode		
\$870.06	1108 Lavaca Street 1				
Expenditure from corporate funds	Austin, TX 78701				
•			(4)		
PURPOSE OF	(a) Category (See Categories	isted at the top of this schedule)	(b) Description	outside of Texas. Com	nlete Schedule T
EXPENDITURE	Advertising Expense		ı <u>–</u>	n, TX, officeholder living	
			Municipal Ele	ection Signs	
Complete ONLY if direct	Candidate/Officeholder na	ame Office so	ught	Office he	eld
expenditure to benefit C/OI	I				
Date	Payee name				
04/07/2025	Meta				
Amount (\$)	Payee address; City	/; State; Zip C	nde		
\$31.50	1 Hacker Way	γ, σιαιο, Σιρ σ	ouc		
ψ01.00	Triadici Way				
Expenditure from	Monlo Dark CA 0403	E			
corporate funds	Menlo Park, CA 9402		In .		
PURPOSE OF	(a) Category (See Categories	isted at the top of this schedule)	(b) Description	outside of Texas. Com	inloto Schodulo T
EXPENDITURE	Advertising Expense		ı <u>–</u>	n, TX, officeholder living	
			Municipal Ele	-	,
Complete ONLY if direct	Candidate/Officeholder na	ame Office so	ught	Office he	eld
expenditure to benefit C/OI	I				

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/Wag	es/Contract Labor OTHER (enter a category not listed above)
,	The Instruction Guide explains how to comp	lete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 2/5 Rpt: 9/12	Plano Police Association PAC	00031892
4 Date	5 Payee name	·
04/07/2025	Meta	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$32.16	1 Hacker Way	
, , , , ,		
Expenditure from	Maria Park CA 04035	
corporate funds	Menlo Park, CA 94025	
8 PURPOSE OF	C , (cor consigning in the top of this constant)) Description
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Municipal Election
		Maritopal Election
Complete ONLY if direct	Condidate /Office holder name Office cough	t Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough H	t Office held
Date	Payee name	
04/09/2025	Meta	
Amount (\$)	Payee address; City; State; Zip Code	
\$32.60	1 Hacker Way	
Expenditure from corporate funds	Menlo Park, CA 94025	
PURPOSE) Description
OF	(con a magained mana tap or and constant)	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Advertising Expense	Check if Austin, TX, officeholder living expense
		Municipal Election
Complete ONLY if direct	Candidate/Officeholder name Office sough	t Office held
expenditure to benefit C/OI	Н	
Date	Payas nama	
04/11/2025	Payee name	
	Meta	
Amount (\$)	Payee address; City; State; Zip Code	
\$31.59	1 Hacker Way	
Expenditure from		
corporate funds	Menlo Park, CA 94025	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin, TX, officeholder living expense
		Municipal Election
Complete ONLY if direct	Candidate/Officeholder name Office sough	t Office held
expenditure to benefit C/OI	4	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Officeholder/Delitical Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 3/5 Rpt: 10/12	Plano Police Association PAC 00031892
4 Date	5 Payee name
04/15/2025	Meta
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$33.78	1 Hacker Way
Expenditure from	
corporate funds	Menlo Park, CA 94025
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Municipal Election
	Mullicipal Liection
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
04/17/2025	Meta
Amount (\$)	Payee address; City; State; Zip Code
\$30.65	1 Hacker Way
Ψ00.00	Triadical Way
Expenditure from corporate funds	Menlo Park, CA 94025
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Municipal Election
	mamopa Liosion
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
04/17/2025	Meta
Amount (\$)	Payee address; City; State; Zip Code
\$31.98	1 Hacker Way
, 3=.30	
Expenditure from corporate funds	Menlo Park, CA 94025
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Municipal Election
	Mariopai Liection
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Candidate/Officeholder/Politica	The Instruction Guide explains how to co	-	te this form.			
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)			
Sch: 4/5 Rpt: 11/12	Plano Police Association PAC	00031892				
4 Date	5 Payee name		1			
04/21/2025	Meta					
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode				
\$31.19	1 Hacker Way					
Expenditure from						
corporate funds	Menlo Park, CA 94025					
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) I	Description			
EXPENDITURE	Advertising Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
			Municipal Election			
			·			
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	ıght	Office held			
expenditure to benefit C/O	Н					
Date	Payee name					
04/21/2025	Meta					
Amount (\$)	Payee address; City; State; Zip Co	ode				
\$32.13	1 Hacker Way					
Evnanditura from						
Expenditure from corporate funds	Menlo Park, CA 94025					
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description			
OF EXPENDITURE	Advertising Expense	[Check if travel outside of Texas. Complete Schedule T.			
			Check if Austin, TX, officeholder living expense Municipal Election			
			manisipal Liceach			
Complete ONLY if direct	Candidate/Officeholder name Office sou	<u>l</u> ıght	Office held			
expenditure to benefit C/O						
Date	Payee name					
04/23/2025	Meta					
Amount (\$)	Payee address; City; State; Zip Co	ode				
\$38.09	1 Hacker Way					
Expenditure from corporate funds	Menlo Park, CA 94025					
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) I	Description			
OF EXPENDITURE	Advertising Expense	[Check if travel outside of Texas. Complete Schedule T.			
			Check if Austin, TX, officeholder living expense Municipal Election			
		'	manoipai Licotion			
Complete ONLY if direct	Candidate/Officeholder name Office sou	<u>l</u> ıght	Office held			
expenditure to benefit C/O		J	5.005.000			

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

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)

Credit Card Payment	The Instruction Guide explains how to com	plete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 5/5 Rpt: 12/12	Plano Police Association PAC	00031892
4 Date	5 Payee name	
04/24/2025	Meta	
6 Amount (\$)	7 Payee address; City; State; Zip Cod	e
\$31.36	1 Hacker Way	
Expenditure from		
corporate funds	Menlo Park, CA 94025	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Municipal Election
		Wallelpar Licetion
9 Complete ONLY if direct	Candidate/Officeholder name Office soug	ht Office held
expenditure to benefit C/O		
Date	Payee name	
04/25/2025	Meta	
Amount (\$)	Payee address; City; State; Zip Cod	0
\$31.01	1 Hacker Way	c
Ψ31.01	Triacker way	
Expenditure from corporate funds	Menlo Park, CA 94025	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	b) Description
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Municipal Election
Complete ONLY if direct	Candidate/Officeholder name Office soug	ht Office held
expenditure to benefit C/O	Н	