

# GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC  
COVER SHEET PG 1

<b>The GPAC Instruction Guide explains how to complete this form.</b>		<b>1</b> Filer ID (Ethics Commission Filers) 00089571	<b>2</b> Total pages filed: 8
<b>3</b> COMMITTEE NAME Collin County Republican Assembly Political Action Committee		<b>OFFICE USE ONLY</b>	
		Date Received ELECTRONICALLY FILED 07/02/2025	
		Date Hand-delivered or Date Postmarked	
		Receipt #	Amount
		Date Processed	
		Date Imaged	
<b>4</b> COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE		
	8407 Lanners  McKinney, TX 75072		
<b>5</b> CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI
	Mr.	Ed	
	NICKNAME	LAST	SUFFIX
		Rowen	
<b>6</b> CAMPAIGN TREASURER STREET ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE		
	8407 Lanners  McKinney, TX 75072		
<b>7</b> CAMPAIGN TREASURER MAILING ADDRESS	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE		
	8407 Lanners  McKinney, TX 75072		
<b>8</b> CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	(972)	439-2217	
<b>9</b> REPORT TYPE	<input type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Dissolution (Attach PAC-DR)
	<input checked="" type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> 10th day after campaign treasurer termination
	<input type="checkbox"/> Runoff		
<b>10</b> PERIOD COVERED	Month Day Year	THROUGH	Month Day Year
	01/01/2025		06/30/2025
<b>11</b> ELECTION	ELECTION DATE	ELECTION TYPE	
	Month Day Year 06/07/2025	<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> Runoff <input type="checkbox"/> Other
		<input type="checkbox"/> General	<input type="checkbox"/> Special

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# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**  
COVER SHEET PG 2

<b>12 COMMITTEE NAME</b> Collin County Republican Assembly Political Action Committee	<b>13 Filer ID</b> (Ethics Commission Filers) 00089571
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<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported    Scott Sanford Mayor of McKinney
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

<b>15 CONTRIBUTION TOTALS</b>	<b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</b> <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 25.00
	<b>2. TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 1,305.00
EXPENDITURE TOTALS	<b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>	\$ 0.00
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 1,127.65
CONTRIBUTION BALANCE	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 177.35
OUTSTANDING LOAN TOTALS	<b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 0.00

**16 AFFIDAVIT**

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Mr. Ed Rowen  
\_\_\_\_\_  
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 8

<b>17 COMMITTEE NAME</b> Collin County Republican Assembly Political Action Committee		<b>18 Filer ID</b> (Ethics Commission Filers) 00089571
<b>19 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 1,305.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 1,127.65
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**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/2 Rpt: 4/8
<b>2</b> FILER NAME Collin County Republican Assembly Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00089571
<b>4</b> Date 06/10/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ballard, Linda <hr/> <b>6</b> Contributor address; City; State; Zip Code  McKinney, TX 75072	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 04/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Collin County Citizens for Integrity PAC <hr/> Contributor address; City; State; Zip Code  McKinney, TX 75071	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jensen, John <hr/> Contributor address; City; State; Zip Code  McKinney, TX 75070	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 06/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McKinney Values PAC <hr/> Contributor address; City; State; Zip Code  McKinney, TX 75070	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/27/2025	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 (\$)  \$130.00
Principal occupation / Job title (See Instructions) IT Mgmt		Employer (See Instructions) CBRE

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/2 Rpt: 5/8
<b>2</b> FILER NAME Collin County Republican Assembly Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00089571
<b>4</b> Date 06/03/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Montes, John <hr/> <b>6</b> Contributor address; City; State; Zip Code  McKinney, TX 75071	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) IT Mgmt		<b>9</b> Employer (See Instructions) CBRE
Date 05/30/2025	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 (\$)  \$80.00
Principal occupation / Job title (See Instructions) IT Mgmt		Employer (See Instructions) CBRE
Date 05/14/2025	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 (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Warren, Tammy <hr/> Contributor address; City; State; Zip Code  McKinney, TX 75070	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Exec Asst		Employer (See Instructions) Emerson

# 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.

<b>1</b> Total pages Schedule F1: Sch: 1/3 Rpt: 6/8	<b>2</b> FILER NAME Collin County Republican Assembly Political Action	<b>3</b> Filer ID (Ethics Commission Filers) 00089571
<b>4</b> Date 06/11/2025	<b>5</b> Payee name Efundraising Connections	
<b>6</b> Amount (\$) \$52.61  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2830 G Street Suite 200 Sacramento, CA 95816	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fundraising processing fees
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/10/2025	Payee name Inform the Republic	
Amount (\$) \$259.29  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 701 Addie Lane McKinney, TX 75071	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense phone banking
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/09/2025	Payee name Inform the Republic	
Amount (\$) \$82.72  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 701 Addie Lane McKinney, TX 75071	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense phone banking
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.

<b>1</b> Total pages Schedule F1: Sch: 2/3 Rpt: 7/8	<b>2</b> FILER NAME Collin County Republican Assembly Political Action	<b>3</b> Filer ID (Ethics Commission Filers) 00089571
<b>4</b> Date 06/17/2025	<b>5</b> Payee name TextPSP	
<b>6</b> Amount (\$) \$15.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 914 Santmyer Drive  Leesburh, VA 20175	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense texting service
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/05/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$532.00  <input type="checkbox"/> Expenditure from corporate funds	Payee name TextPSP  Payee address; City; State; Zip Code 914 Santmyer Drive  Leesburh, VA 20175	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Text messaging
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/02/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$77.14  <input type="checkbox"/> Expenditure from corporate funds	Payee name TextPSP  Payee address; City; State; Zip Code 914 Santmyer Drive  Leesburh, VA 20175	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Text messaging
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                        | 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.

<b>1</b> Total pages Schedule F1: Sch: 3/3 Rpt: 8/8	<b>2</b> FILER NAME Collin County Republican Assembly Political Action	<b>3</b> Filer ID (Ethics Commission Filers) 00089571
<b>4</b> Date 06/02/2025	<b>5</b> Payee name TextPSP	
<b>6</b> Amount (\$) \$36.89  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 914 Santmyer Drive  Leesburh, VA 20175	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense text messaging
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 06/02/2025	Payee name TextPSP	
Amount (\$) \$2.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 914 Santmyer Drive  Leesburh, VA 20175	
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 Text messaging
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 05/30/2025	Payee name TextPSP	
Amount (\$) \$70.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 914 Santmyer Drive  Leesburh, VA 20175	
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 text messaging
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held