

FORM MPAC
COVER SHEET PG 1

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MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME McKinney Committee to Inform Voters and Businesses on Issues and Concerns		13 Filer ID (Ethics Commission Filers) 00055986
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) ☐ check here if this report qualifies for the higher itemization threshold
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 952.51
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 22,602.57
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.

Ms. Lisa Hermes

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 - MPAC**FORM MPAC**
COVER SHEET PG 3
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17 COMMITTEE NAME McKinney Committee to Inform Voters and Businesses on Issues and Concerns		18 Filer ID (Ethics Commission Filers) 00055986
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	☒ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 952.51
2.	☒ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0.00
3.	☒ SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
4.	☐ SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	☐ SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	☐ SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	☐ SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	☐ SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	☒ SCHEDULE E: LOANS	\$ 0.00
10.	☒ SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 0.00
11.	☒ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
12.	☒ SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$ 0.00
13.	☒ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
14.	☐ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	☐ 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: 1/3 Rpt: 4/8
2 FILER NAME McKinney Committee to Inform Voters and Businesses on Issues and Concerns		3 Filer ID (Ethics Commission Filers) 00055986
4 Date 10/10/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Blue Line Electric 6 Contributor address; City; State; Zip Code McKinney, TX 75071	7 Amount of Contribution (\$) \$80.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/03/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Cocktail Creamery Contributor address; City; State; Zip Code McKinney, TX 75069	Amount of Contribution (\$) \$42.50
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/23/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Cottonwood Creek Church Contributor address; City; State; Zip Code Allen, TX 75013	Amount of Contribution (\$) \$42.50
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/26/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Dallas IVF - McKinney Contributor address; City; State; Zip Code McKinney, TX 75071	Amount of Contribution (\$) \$42.50
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/14/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) El Pollo Alegre Contributor address; City; State; Zip Code McKinney, TX 75069	Amount of Contribution (\$) \$42.50
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: 2/3 Rpt: 5/8
2 FILER NAME McKinney Committee to Inform Voters and Businesses on Issues and Concerns		3 Filer ID (Ethics Commission Filers) 00055986
4 Date 10/01/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) It Takes Three Mediation LLC 6 Contributor address; City; State; Zip Code McKinney, TX 75071	7 Amount of Contribution (\$) \$11.68
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/03/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Morphic Development Contributor address; City; State; Zip Code McKinney, TX 75069	Amount of Contribution (\$) \$42.50
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/14/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Oliviacolette Esthetics Contributor address; City; State; Zip Code McKinney, TX 75071	Amount of Contribution (\$) \$42.50
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/29/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Performance Roofing, Inc Contributor address; City; State; Zip Code McKinney, TX 75069	Amount of Contribution (\$) \$32.50
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/01/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Postal Annex #12014 Contributor address; City; State; Zip Code McKinney, TX 75071	Amount of Contribution (\$) \$41.25
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: 3/3 Rpt: 6/8
2 FILER NAME McKinney Committee to Inform Voters and Businesses on Issues and Concerns		3 Filer ID (Ethics Commission Filers) 00055986
4 Date 10/08/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Saunders, Walsh, & Beard 6 Contributor address; City; State; Zip Code McKinney, TX 75070	7 Amount of Contribution (\$) \$42.50
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/08/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Texas Security Bank Contributor address; City; State; Zip Code Dallas, TX 75254	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/03/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) The Body Shop Collision Repair Contributor address; City; State; Zip Code McKinney, TX 75069	Amount of Contribution (\$) \$67.08
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/24/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) The Guitar Sanctuary Contributor address; City; State; Zip Code McKinney, TX 75071	Amount of Contribution (\$) \$42.50
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/24/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Traxxas Contributor address; City; State; Zip Code McKinney, TX 75070	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

PLEDGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:
Sch: 1/1 Rpt: 7/8

2 FILER NAME

McKinney Committee to Inform Voters and Businesses on Issues and Concerns

3 Filer ID (Ethics Commission Filers)
00055986

4 TOTAL OF UNITEMIZED PLEDGES

\$ 0.00

5 Date

6 Full name of pledgor ☐ out-of-state PAC (ID#: _____)

7 Pledgor Address; City; State; Zip Code

8 Amount of
pledge (\$)

9 In-kind description
(If applicable)

☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:
Sch: 1/1 Rpt: 8/8

2 FILER NAME

McKinney Committee to Inform Voters and Businesses on Issues and Concerns

3 Filer ID (Ethics Commission Filers)
00055986

4 TOTAL OF UNITEMIZED LOANS

\$ 0.00

5 Date of loan

7 Name of lender

☐ out-of-state PAC (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 occupation / Job title (See Instructions)

13 Employer (See Instructions)

14 Description of Collateral

☐ None

15 Check if personal funds were deposited into political account
(See Instructions)

☐

16 GUARANTOR
INFORMATION

17 Name of guarantor

19 Amount Guaranteed (\$)

☐ not applicable

18 Guarantor address; City; State; Zip Code

20 Principal occupation

21 Employer (See Instructions)