

FORM COR-PAC

SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM SPAC
COVER SHEET PG 1

| | | | |
|--|--|---------------------------------------|---|
| The SPAC Instruction Guide explains how to complete this form. | | 1 Filer ID (Ethics Commission Filers) | 2 Total pages filed: 5 |
| 3 COMMITTEE NAME Frisco Teachers For Truth | | | OFFICE USE ONLY Date Received AUG 11 2022 Date Hand-delivered or Date Postmarked Receipt # Amount \$ Date Processed Date Imaged |
| 4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 246 Frisco, TX 75034 | | |
| 5 CAMPAIGN TREASURER NAME | MS / MRS / MR Mrs. | FIRST Anne | MI |
| | NICKNAME McCausland | LAST | SUFFIX |
| 6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business) | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 2209 Crowbridge Drive Frisco, Texas 75033 | | |
| 7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address | STREET ADDRESS OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE same as above | | |
| 8 CAMPAIGN TREASURER PHONE | AREA CODE PHONE NUMBER EXTENSION (972) 335-9976 | | |
| 9 REPORT TYPE | <input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Dissolution Report (Attached PAC-FR) <input type="checkbox"/> Runoff <input type="checkbox"/> 10th day after campaign treasurer termination | | |
| 10 PERIOD COVERED | Month Day Year Month Day Year 04 / 19 / 22 THROUGH 04 / 27 / 22 | | |
| 11 ELECTION | ELECTION DATE ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other 05 / 07 / 22 <input checked="" type="checkbox"/> General <input type="checkbox"/> Special Description _____ | | |

GO TO PAGE 2

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM SPAC
COVER SHEET PG 2

12 COMMITTEE NAME **Frisco Teachers for Truth** 13 Filer ID (Ethics Commission Filers)

| | | |
|--|--|---|
| 14 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.) <input checked="" type="checkbox"/> SUPPORT (Candidate or Measure) <input type="checkbox"/> OPPOSE (Candidate or Measure) <input type="checkbox"/> ASSIST (Officeholder) | <input checked="" type="checkbox"/> CANDIDATE | CANDIDATE / OFFICEHOLDER NAME Gopal Ponangi / Natalie Hebert / Dustin Paschal |
| | <input type="checkbox"/> OFFICEHOLDER | OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder) Frisco ISD Place 1 / Place 2 / Place 3 |
| | <input type="checkbox"/> MEASURE | BALLOT IDENTIFICATION / # <div style="display: flex; justify-content: space-between;"> <div>Month / Day / Year</div> </div> |
| | DESCRIPTION | |

| | | |
|-------------------------|---|-----------|
| 15 CONTRIBUTION TOTALS | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) | \$ 20.36 |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ 20.36 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | \$ 0.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ 275.00 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 0.00 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 0.00 |

16 SIGNATURE 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.

Anne McCausland
Signature of Campaign Treasurer (Declarant)

Please complete either option below:

(1) Affidavit

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
OR

(2) Unsworn Declaration

My name is Anne McCausland, and my date of birth is 12-08-1964.
 My address is 2209 Crowbridge Drive, Frisco, TX, 75033, USA.
 (street) (city) (state) (zip code) (country)
 Executed in Denton County, State of Texas, on the 11 day of August, 2022.
 (Month) (year)
Anne McCausland
 Signature of Campaign Treasurer (Declarant)

SUBTOTALS - SPAC**FORM SPAC
COVER SHEET PG 3**

| | | |
|---|--|---|
| 17 COMMITTEE NAME Frisco Teachers for Truth | | 18 Filer ID (Ethics Commission Filers) |
| 19 SCHEDULE SUBTOTALS NAME OF SCHEDULE | | SUBTOTAL AMOUNT |
| 1. | <input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ |
| 2. | <input checked="" type="checkbox"/> SCHEDULE A2 : NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ 20.36 |
| 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 D: PLEDGED CONTRIBUTIONS FROM CORPORATON OR LABOR ORGANIZATION | \$ |
| 7. | <input type="checkbox"/> SCHEDULE E: LOANS | \$ |
| 8. | <input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS | \$ |
| 9. | <input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ 275.00 |
| 10. | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS | \$ |
| 11. | <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ |
| 12. | <input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH | \$ |
| 13. | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS | \$ |
| 14. | <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ |
| | | |

SCHEDULE A2

If the requested information is not applicable, DO NOT include this page in the report.

Forms provided by Texas Ethics Commission www.ethics.state.tx.us Revised 7/16/2021

UNPAID INCURRED OBLIGATIONS**SCHEDULE F2**If the requested information is not applicable, **DO NOT** include this page in the report.**EXPENDITURE CATEGORIES FOR BOX 10(a)**Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political CommitteeEvent Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal ServicesLoan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract LaborSolicitation/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 F2: 1 | 2 FILER NAME Frisco Teachers for Truth | 3 Filer ID (Ethics Commission Filers) |
| 4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS | | \$ |
| 5 Date 4/25/22 | 6 Payee name Perfect IT Solution Inc. | |
| 7 Amount (\$) 275.00 | 8 Payee address; City; State; Zip Code 1821 Meadow Ridge Dr. Flower Mound TX 75028 | |
| 9 TYPE OF EXPENDITURE | <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | |
| 10 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description Push Cards |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate / Officeholder name Gopal Ponangi Natalie Hebert Dustin Paschal | Office sought Frisco ISD Place 1 Frisco ISD Place 2 Frisco ISD Place 3 |
| Date | Payee name | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| TYPE OF EXPENDITURE | <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) | Description |
| | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought |
| | | Office held |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED | | |