

SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT


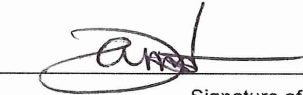

FORM SPAC COVER SHEET PG 1

The SPAC Instruction Guide explains how to complete this form.		1 ACCOUNT # (Ethics Commission Filers)	2 Total pages filed: 3
3 COMMITTEE NAME Citizens Supporting Frisco's Future		OFFICE USE ONLY Date Received: RECEIVED APR 10 2015 BY: <i>ARM</i> Date Hand-delivered or Postmarked:	
4 COMMITTEE ADDRESS <input type="checkbox"/> change of address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 623 Frisco TX 034		Receipt # Amount
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mr. James NICKNAME LAST SUFFIX Nunn		Date Processed Date Imaged
6 CAMPAIGN TREASURER'S STREET ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 10341 Casetta Drive Frisco TX 035		
7 CAMPAIGN TREASURER'S MAILING ADDRESS <input type="checkbox"/> change of address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 623 Frisco TX 75034		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (469) 287-8488		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Dissolution (attach PAC-DR) <input type="checkbox"/> Runoff <input type="checkbox"/> 10th day after campaign treasurer termination		
10 PERIOD COVERED	Month Day Year Month Day Year 02 / 24 / 2015 THROUGH 04 / 10 / 2015		
11 ELECTION	ELECTION DATE ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special 05 / 09 / 2015		

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SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM SPAC COVER SHEET PG 2

12 COMMITTEE NAME Citizens Supporting Frisco's Future		ACCOUNT # (Ethics Commission Filers)	
13 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 type="checkbox"/> CANDIDATE <input type="checkbox"/> OFFICEHOLDER	CANDIDATE / OFFICEHOLDER NAME	
		OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)	
	<input checked="" type="checkbox"/> MEASURE	BALLOT IDENTIFICATION / # Propositions 1 - 8	
		ELECTION DATE Month Day Year 05 / 09 / 2015	
		DESCRIPTION Supporting Propositions for Frisco Bonds	
14 CONTRIBUTION TOTALS EXPENDITURE TOTALS CONTRIBUTION BALANCE OUTSTANDING LOAN TOTALS	1.	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0.00
	2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 7,000.00
	3.	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4.	TOTAL POLITICAL EXPENDITURES	\$ 0.00
	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 7,000.00
	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00
15 AFFIDAVIT			
<p>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.</p>			
 <p>AFFIX NOTARY STAMP / SEAL ABOVE</p>		 Signature of Campaign Treasurer	
Sworn to and subscribed before me, by the said <u>James Nunn</u> , this the <u>10th</u> day of <u>April</u> , 20 <u>15</u> , to certify which, witness my hand and seal of office.			
 Signature of officer administering oath		<u>Kristi Morrow</u> Printed name of officer administering oath	
		<u>Assistant City Secretary</u> Title of officer administering oath	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 1	
2 FILER NAME Citizens Supporting Frisco's Future		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/8/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craig & Kathryn Hall 6 Contributor address; City; State; Zip Code 6801 Gaylord Pkwy, #100, Frisco TX 75034	7 Amount of contribution (\$) \$5,000.00 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/8/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garver, LLC Contributor address; City; State; Zip Code 3010 Gaylord Pkwy, #190, Frisco TX 75034	Amount of contribution (\$) \$2,000.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 2/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James Nunn Contributor address; City; State; Zip Code 10341 Casetta Drive, Frisco TX 75035	Amount of contribution (\$) \$20.05 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable) Cost of website domains
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>			