

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC
COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers)

- N/A -

2 Total pages filed:

2

3 COMMITTEE NAME

Take Back Your Rights GPAC

OFFICE USE ONLY

Date Received

RECEIVED

JAN 07 2022

3:37 P.M. A.C.

CITY SECRETARY'S OFFICE

Date Hand-delivered or Date Postmarked

Receipt #

Amount \$

Date Processed

Date Imaged

4 COMMITTEE
ADDRESS

☐ Change of Address

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

P.O. Box 915
Frisco, Tx 75034

5 CAMPAIGN
TREASURER
NAME

☒ MS / MRS / MR

FIRST

MI

Cardyn

NICKNAME

LAST

SUFFIX

Becka

6 CAMPAIGN
TREASURER
STREET ADDRESS
(Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

Same as above

7 CAMPAIGN
TREASURER
MAILING ADDRESS

☐ 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

(214) 893-5015

9 REPORT TYPE

☒ January 15

☐ 30th day before election

☐ Dissolution Report (Attach PAC-FR)

☐ July 15

☐ 8th day before election

☐ 10th day after campaign treasurer termination

☐ Runoff

10 PERIOD
COVERED

Month Day Year

7 / 1 / 2021

THROUGH

Month Day Year

12 / 31 / 2021

11 ELECTION

ELECTION DATE

Month Day Year

N/A

ELECTION TYPE

☐ Primary

☐ Runoff

☐ Other

☐ General

☐ Special

N/A

Description _____

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GENERAL-PURPOSE COMMITTEE PURPOSE AND TOTALS

FORM GPAC
COVER SHEET PG 2

12 COMMITTEE NAME <i>Take Back Your Rights GPAC</i>		13 Filer ID (Ethics Commission Filers) <i>N/A</i>
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 <i>N/A</i>
		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) <input type="checkbox"/> Check here if this report qualifies for the higher itemization threshold	\$ <i>0</i>
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <i>0</i>
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ <i>0</i>
	4. TOTAL POLITICAL EXPENDITURES	\$ <i>0</i>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <i>0</i>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <i>0</i>

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.

Carolyn Becka

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 *Carolyn Becka*, and my date of birth is _____

My address is *PO Box 915* (street), *Frisco* (city), *TX* (state), *75034* (zip code), *USA* (country)

Executed in *Collin* County, State of *Texas*, on the *3* day of *January*, 20 *22*.
(month) (year)

Carolyn Becka

Signature of Campaign Treasurer (Declarant)