,	PURPOSE COMMITTEE FINANCE REPORT	FORM GPAC COVER SHEET PG 1		
The GPAC Instruction	2 Total pages filed:			
3 COMMITTEE NAME	OFFICE USE ONLY			
TAKE	BACK YOUR RIGHTS	Data RECEIVED		
4 COMMITTEE ADDRESS	ADDRESS / PO BOX: APT / SUITE #; CITY; STATE; ZIP CODE	JUN 0 1 2011 4 35		
	P.O. BOX 915	Glix tecrelary's Office		
Change of Address	FILISCO ITX 75034	DOSTMANCES 5/31/		
5 CAMPAIGN TREASURER NAME	MS)MRS/MR FIRST MI CAROLYN	Date Processed		
	NICKHAME LAST SUFFIX	Date Imaged		
6 CAMPAIGN TREASURER'S STREET ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE:	ZIP CODE		
	PO. BOX 915			
	FRISCO, TX 75034			
7 CAMPAIGN TREASURER'S MAILING ADDRESS Change of Address	STREET OR PO BOX: APT/SUITE #; CITY; STATE;	ZIP CODE		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (972) 7(2-7878			
9 REPORTTYPE	January 16 36th day before election Runoff	Dissolution (attach PAC-DR) 10th day after campaign treasurer termination		
10 PERIOD COVERED	Month Day Year	Month Day Year		
	01/01/2011 THROUGH	06/30/2011		
11 ELECTION	ELECTION DATE ELECTION TYPE Month Day Year	The state of the s		
	Primary Runoff	General Special		
GO TO PAGE 2				

PURPOSE A	FORM GPAC COVER SHEET PG 2		
12 COMMITTEE NAM	ΛE		ACCOUNT # (Ethics Commission Filers)
TAKE	RACK VOI	OR RIGHTS	N/A
13 COMMITTEE	1. Candidates	A. Supported	
ACTIVITY (attach lists on plain paper to complete this report if necessary.)	(identify by name or, if applicable, classify by party)		
	eassiny by party)	B. Opposed	
			and the second s
	2. Measures A. Supported		
	(describe by date and location of		
	election and nature of issue)	B. Opposed	
	 Officeholders Assisted 		
	(identify by name or, if applicable, classify by pariy)		
14 CONTRIBUTION TOTALS	PLEDGES, LO	MIZED POLITICAL CONTRIBUTIONS (OTHER THAN ANS, OR GUARANTEES OF LOANS), UNLESS ITEMI If this report qualifies for the higher itemization thresh	ZED \$ -
	2. TOTAL POL (OTHER THAN	ITICAL CONTRIBUTIONS I PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0
EXPENDITURE TOTALS	3. TOTAL POLITI	CAL EXPENDITURES OF \$50 OR LESS, UNLESS ITE	MIZED \$
	4. TOTAL POLITICAL EXPENDITURES		\$ -0-
CONTRIBUTION BALANCE	5. TOTAL POLIT OF THE REPO	ICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS IRTING PERIOD	ST DAY \$
OUTSTANDING LOAN TOTALS	6. TOTAL PRINC LAST DAY OF	IPAL AMOUNT OF ALL OUTSTANDING LOANS AS O THE REPORTING PERIOD	F THE \$
15 AFFIDAVIT		I swear, or affirm, under penalty o report is true and correct and inclu reported by me under Title 15, Ele	ides all information required to be
		Signature of Car	mpaign Treasurer
AFFIX NOTARY STAMP	SEAL ABOVE		
Sworn to and subscr	lbed before me, by	the said CANGUN BECO	∠A, this the
day o	or Mall.	20, to certify which, witness m	y hand and seal of office.
Signature of officer adminis	tering oath F	rinted name of officer administering oath	Title of officer administering oath
		MLEAV. UUUE (