

# GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC  
COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this form.		1 ACCOUNT # (Ethics Commission Filers) <b>NIA</b>	2 Total pages filed: <b>2</b>
3 COMMITTEE NAME <b>Take Back Your Rights PAC</b>		<b>OFFICE USE ONLY</b>	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address		ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <b>P.O. Box 915 Frisco, Tx. 75034</b>	
5 CAMPAIGN TREASURER NAME		Date Received <b>Received 01.07.2014 via us mail KSN</b>	
MS MRS / MR FIRST MI <b>Carolyn</b> NICKNAME LAST SUFFIX <b>Beeka</b>		HD / PM Receipt # Amount 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 <b>'' ''</b>	
7 CAMPAIGN TREASURER'S MAILING ADDRESS <input type="checkbox"/> Change of Address		STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <b>'' ''</b>	
8 CAMPAIGN TREASURER PHONE		AREA CODE PHONE NUMBER EXTENSION <b>( '' ) ''</b>	
9 REPORT TYPE		<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (attach PAC-DR) <input type="checkbox"/> July 15 <input type="checkbox"/> 9th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff	
10 PERIOD COVERED		Month Day Year      Month Day Year <b>07 / 01 / 2013      THROUGH      12 / 31 / 2013</b>	
11 ELECTION		ELECTION DATE      ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special <b>///</b>	
<b>GO TO PAGE 2</b>			

# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

# FORM GPAC COVER SHEET PG 2

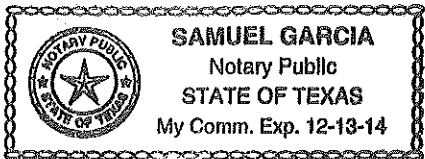
12 COMMITTEE NAME <i>Take Back Your Rights PAC</i>	ACCOUNT # (Ethics Commission Filers) <i>NIA</i>
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13 COMMITTEE ACTIVITY <small>(attach lists on plain paper to complete this report if necessary.)</small>	1. Candidates <small>(identify by name or, if applicable, classify by party)</small>	A. Supported
		B. Opposed
	2. Measures <small>(describe by date and location of election and nature of issue)</small>	A. Supported
		B. Opposed
	3. Officeholders Assisted <small>(identify by name or, if applicable, classify by party)</small>	

14 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$	<i>0</i>
EXPENDITURE TOTALS	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	<i>0</i>
	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	<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>

15 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.



**SAMUEL GARCIA**  
Notary Public  
STATE OF TEXAS  
My Comm. Exp. 12-13-14

*Carolyn Becka*  
\_\_\_\_\_  
Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said *Campaign Treasurer*, this the *3* day of *January*, 20 *14*, to certify which, witness my hand and seal of office.

*[Signature]*  
\_\_\_\_\_  
Signature of officer administering oath

*Samuel Garcia*  
\_\_\_\_\_  
Printed name of officer administering oath

*Notary Public*  
\_\_\_\_\_  
Title of officer administering oath