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: 6

OFFICE USE ONLY

Date

3 COMMITTEE NAME

Great Schools, Great City SPAC

4 COMMITTEE ADDRESS

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

☐ Change of Address

6341 Klamath Road
Fort Worth, TX 76116

AC

Postmarked

5 CAMPAIGN TREASURER NAME

MS MR FIRST

Receipt #

Date Processed

[redacted]

6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)

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

6341 Klamath Road
Fort Worth, TX 76116

[redacted]

SPEC F C-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM SPAC
COVER SHEET PG 2

12

13 Filer ID (Ethics Commission Filers)

nael

COMMITTEE PURPOSE
h lists on plain paper to ete this report if necessary.)

☐ CANDIDATE

OFFICE SOUGHT (candidate) / OFFICE

OFFICEHOLDER

☒ SUPPORT (Candidate or Measure)

BALLOT IDENTIFICATION / #

ELECTION DATE
Month Day Year

☐ OP (Ca or Measure)

☐ MEASURE

DESCRIPTION

☐ ST eholder)

15 CONTRIBUTION TOTALS

T L T ONS (OTHER THAN ANS, OR $

N UT $

ARANTEES OF LOANS)

TOTAL UNITEMIZED POLITICAL EXPENDITURES $

EXPENDITURE TOTALS $

CONTRIBUTION BALANCE

3 TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD $

OUTSTANDING LOAN TOTALS

4. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

90.00

TOTAL POLITICAL EXPENDITURES

27.02

16 SIGNATURE

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and

5.

6. $ 1500.00

Please complete either option below:

Signature of Campaign Treasurer (Declarant)

this the

AFFIX NOTARY STAMP / SEAL ABOVE

day of , 20 _____, to certify which, witness my hand and seal of office.

of officer oath Printed name of officer oath Title of

SUBTOTALS - SPAC

FORM SPAC
COVER SHEET PG 2

17 NAME
School Is Great City SPAC

18 Filer ID (Ethics Commission Filers)

19	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
	☒ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	$ 200.00
2.	☐ SCHEDULE A2 : NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	$
4.	☐ SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	$
5.	☐ SCHEDULE C2 : NO Y (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR	$
6.	☐ SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATON OR LABOR ORGANIZATION	$
7	SCHEDULE F: LOANS	$
		$
8.	☒ SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	90.00
9		$
10.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	$
	☐ SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	$
11		
12.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	$
	☐ [illegible]	$

TO FILER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule A1:

2 FILER NAME

3 Filer ID (Ethics Commission Filers)

4 Date

5 Full name of contributor ☐ out-of-state PAC

7 Amount of contribution ($)

6 Contributor address; City; State; Zip Code

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID#:)

Amount of contribution ($)

☐ out-of-state PAC (ID#:)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

Amount of contribution ($)

☐ out-of-state PAC

Contributor address; City; State; Zip Code

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

DO NOT include this page in the report

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The instruction guide explains how to complete this form.

5

6 Amount ($) $15.00

7 Payee address; City; State; Zip Code

(a) Category (See Categories listed at the top of this schedule)

9 Complete ONLY if direct expenditure to benefit C/OH — Candidate / Officeholder name — Office sought — Office held

5 nk

Amount ($) $15.00

Payee address; 2424 Merrick St, Fort Worth, TX 76107 State; Zip Code

8 Category (See Categories listed at the top of this schedule) Banking Expense

(b) Description Description

[redacted]

CON[redacted]

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

EXPENDITURE CATEGORIES FOR BOX 9(a)

The Instruction Guide explains how to complete this form.

1 Total h

2 FILER NAME

Mrs. Great City SPAC

4

5 Payee name

[redacted]

ss: City: State: Zip Code

$15.00 Merrick St. Ft. W[redacted]

PURPOSE OF EXPENDITURE Banking Expense Fee

Date

11/30/21 Veritex Bank

Amount ($) Payee address: City: State: Zip Code