

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) 00066451	2 Total pages filed: 20
3 COMMITTEE NAME True Texas Project PAC		OFFICE USE ONLY	
		Date Received ELECTRONICALLY FILED 01/14/2024	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address		ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1972 Casa Loma Ct. Grapevine, TX 76051	
		Date Hand-delivered or Date Postmarked	
		Receipt #	Amount
		Date Processed	
		Date Imaged	
5 CAMPAIGN TREASURER NAME		MS / MRS / MR FIRST MI Mr. Fred D.	
		NICKNAME LAST SUFFIX McCarty III	
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)		STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1972 Casa Loma Ct. Grapevine, TX 76051	
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address		STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1972 Casa Loma Ct. Grapevine, TX 76051	
8 CAMPAIGN TREASURER PHONE		AREA CODE PHONE NUMBER EXTENSION (972) 741-0004	
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"/> 8th 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 07/01/2023 THROUGH 12/31/2023	
11 ELECTION		ELECTION DATE ELECTION TYPE Month Day Year <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other 03/05/2024 <input type="checkbox"/> General <input type="checkbox"/> Special	

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GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME True Texas Project PAC	13 Filer ID (Ethics Commission Filers) 00066451
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14 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 Mrs. CHERYL WARREN Orange County GOP Chair
		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>	

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	\$	0.00
	2. TOTAL POLITICAL CONTRIBUTIONS <small>(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)</small>	\$	2,360.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	135.70
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	11,742.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

16 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.

 Mr. Fred D. McCarty III
 Signature of Campaign Treasurer

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

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**
ADDENDUM

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12 COMMITTEE NAME True Texas Project PAC		13 Filer ID (Ethics Commission Filers) 00066451
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 B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	Judge DEVINE JOHN Supreme Court Justice
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported David Schenck Court Of Criminal Appeals, Judge B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
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 GINA PARKER Court Of Criminal Appeals, Judge B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**
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12 COMMITTEE NAME True Texas Project PAC		13 Filer ID (Ethics Commission Filers) 00066451
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 WAYNE RICHARD State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
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 Daren Meis State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
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 Mr. ABRAHAM GEORGE State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**
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12 COMMITTEE NAME True Texas Project PAC		13 Filer ID (Ethics Commission Filers) 00066451
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 SCOTT LONDON Hood County Sheriff B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported KEVIN ANDREWS Hood County Commissioner Pct 1 B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
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 CRISWELL NATE Hood County Commissioner Pct 3 B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**
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12 COMMITTEE NAME True Texas Project PAC		13 Filer ID (Ethics Commission Filers) 00066451
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 JOHN SHIRLEY Hood County Constable Pct 2 B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported GREG HARRELL Hood County GOP Chair B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
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 KYLE Biedermann State Chairman B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**
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12 COMMITTEE NAME True Texas Project PAC		13 Filer ID (Ethics Commission Filers) 00066451
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 DAVID LOWE State Representative
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

SUBTOTALS - GPAC

17 COMMITTEE NAME True Texas Project PAC		18 Filer ID (Ethics Commission Filers) 00066451
19 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 2,360.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 135.70
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/11 Rpt: 9/20
2 FILER NAME True Texas Project PAC		3 Filer ID (Ethics Commission Filers) 00066451
4 Date 07/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burns, Nomi (Mrs.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Keller, TX 76248	
8 Principal occupation / Job title (See Instructions) self		9 Employer (See Instructions) retired
Date 08/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burns, Nomi (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Keller, TX 76248	
Principal occupation / Job title (See Instructions) self		Employer (See Instructions) retired
Date 09/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burns, Nomi (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Keller, TX 76248	
Principal occupation / Job title (See Instructions) self		Employer (See Instructions) retired
Date 10/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burns, Nomi (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Keller, TX 76248	
Principal occupation / Job title (See Instructions) self		Employer (See Instructions) retired
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burns, Nomi (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Keller, TX 76248	
Principal occupation / Job title (See Instructions) self		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/11 Rpt: 10/20
2 FILER NAME True Texas Project PAC		3 Filer ID (Ethics Commission Filers) 00066451
4 Date 12/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burns, Nomi (Mrs.)	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Keller, TX 76248	
8 Principal occupation / Job title (See Instructions) self		9 Employer (See Instructions) retired
Date 08/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLOSE, JARED (Mr.)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code FRIENDSWOOD, TX 77546	
Principal occupation / Job title (See Instructions) MARKETING		Employer (See Instructions) ABBVIE
Date 07/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cannon, Timothy (Mr.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Keller, TX 76248	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cannon, Timothy (Mr.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Keller, TX 76248	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cannon, Timothy (Mr.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Keller, TX 76248	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/11 Rpt: 11/20
2 FILER NAME True Texas Project PAC		3 Filer ID (Ethics Commission Filers) 00066451
4 Date 11/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cannon, Timothy (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Keller, TX 76248	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cannon, Timothy (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Keller, TX 76248	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crouch, Chandler (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Haslet, TX 76052	
Principal occupation / Job title (See Instructions) Realtor/Broker		Employer (See Instructions) Chandler Crouch Realtors
Date 08/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crouch, Chandler (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Haslet, TX 76052	
Principal occupation / Job title (See Instructions) Realtor/Broker		Employer (See Instructions) Chandler Crouch Realtors
Date 09/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crouch, Chandler (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Haslet, TX 76052	
Principal occupation / Job title (See Instructions) Realtor/Broker		Employer (See Instructions) Chandler Crouch Realtors

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/11 Rpt: 12/20
2 FILER NAME True Texas Project PAC		3 Filer ID (Ethics Commission Filers) 00066451
4 Date 10/09/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crouch, Chandler (Mr.) 6 Contributor address; City; State; Zip Code Haslet, TX 76052	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Realtor/Broker		9 Employer (See Instructions) Chandler Crouch Realtors
Date 11/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crouch, Chandler (Mr.) Contributor address; City; State; Zip Code Haslet, TX 76052	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Realtor/Broker		Employer (See Instructions) Chandler Crouch Realtors
Date 12/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crouch, Chandler (Mr.) Contributor address; City; State; Zip Code Haslet, TX 76052	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Realtor/Broker		Employer (See Instructions) Chandler Crouch Realtors
Date 08/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DREWRY, CHRISTINA (Mrs.) Contributor address; City; State; Zip Code FLINT, TX 75762	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) HOMEMAKER		Employer (See Instructions) SELF
Date 07/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FELL, TRAVIS (Mr.) Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PRODUCT MANAGER		Employer (See Instructions) Bright Health

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/11 Rpt: 13/20
2 FILER NAME True Texas Project PAC		3 Filer ID (Ethics Commission Filers) 00066451
4 Date 08/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FELL, TRAVIS (Mr.)	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	
8 Principal occupation / Job title (See Instructions) PRODUCT MANAGER		9 Employer (See Instructions) Bright Health
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENDRICKS, BRUCE (Mr.)	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code NAMPA, IN 83651	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 07/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harper, Robert (Mr.)	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Hurst, TX 76053	
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Self
Date 08/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harper, Robert (Mr.)	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Hurst, TX 76053	
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Self
Date 09/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harper, Robert (Mr.)	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Hurst, TX 76053	
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/11 Rpt: 14/20
2 FILER NAME True Texas Project PAC		3 Filer ID (Ethics Commission Filers) 00066451
4 Date 10/16/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harper, Robert (Mr.) 6 Contributor address; City; State; Zip Code Hurst, TX 76053	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Project Manager		9 Employer (See Instructions) Self
Date 11/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harper, Robert (Mr.) Contributor address; City; State; Zip Code Hurst, TX 76053	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Self
Date 11/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kreif, Tammy Contributor address; City; State; Zip Code Fort Worth, TX 76177	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Well Tester		Employer (See Instructions) Select Energy Services
Date 09/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINDBERG, DAVID (Mr.) Contributor address; City; State; Zip Code AMARILLO, TX 79124	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 07/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linn, Judith (Mrs.) Contributor address; City; State; Zip Code Colleyville, TX 76034	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/11 Rpt: 15/20
2 FILER NAME True Texas Project PAC		3 Filer ID (Ethics Commission Filers) 00066451
4 Date 08/23/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linn, Judith (Mrs.)	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Colleyville, TX 76034	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 09/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linn, Judith (Mrs.)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Colleyville, TX 76034	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linn, Judith (Mrs.)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Colleyville, TX 76034	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linn, Judith (Mrs.)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Colleyville, TX 76034	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NORVILLE, MADELYN (Mrs.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code COLLEYVILLE, TX 76034	
Principal occupation / Job title (See Instructions) FLIGHT ATTENDANT		Employer (See Instructions) DELTA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/11 Rpt: 16/20
2 FILER NAME True Texas Project PAC		3 Filer ID (Ethics Commission Filers) 00066451
4 Date 08/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NORVILLE, MADELYN (Mrs.) <hr/> 6 Contributor address; City; State; Zip Code COLLEYVILLE, TX 76034	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) FLIGHT ATTENDANT		9 Employer (See Instructions) DELTA
Date 09/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NORVILLE, MADELYN (Mrs.) <hr/> Contributor address; City; State; Zip Code COLLEYVILLE, TX 76034	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) FLIGHT ATTENDANT		Employer (See Instructions) DELTA
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NORVILLE, MADELYN (Mrs.) <hr/> Contributor address; City; State; Zip Code COLLEYVILLE, TX 76034	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) FLIGHT ATTENDANT		Employer (See Instructions) DELTA
Date 11/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NORVILLE, MADELYN (Mrs.) <hr/> Contributor address; City; State; Zip Code COLLEYVILLE, TX 76034	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) FLIGHT ATTENDANT		Employer (See Instructions) DELTA
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NORVILLE, MADELYN (Mrs.) <hr/> Contributor address; City; State; Zip Code COLLEYVILLE, TX 76034	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) FLIGHT ATTENDANT		Employer (See Instructions) DELTA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/11 Rpt: 17/20
2 FILER NAME True Texas Project PAC		3 Filer ID (Ethics Commission Filers) 00066451
4 Date 08/22/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ray , Thomas (Mr.)	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Plano, TX 75074	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ray , Thomas (Mr.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Plano, TX 75074	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ray , Thomas (Mr.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Plano, TX 75074	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ray , Thomas (Mr.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Plano, TX 75074	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ray , Thomas (Mr.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Plano, TX 75074	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/11 Rpt: 18/20
2 FILER NAME True Texas Project PAC		3 Filer ID (Ethics Commission Filers) 00066451
4 Date 09/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHEFFLER, GLENN (Mr.) <hr/> 6 Contributor address; City; State; Zip Code BROOKSVILLE, FL 34613	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 11/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Solmon, Allan (Mr.) <hr/> Contributor address; City; State; Zip Code Colleyville, TX 76034	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Pilot		Employer (See Instructions) United Airlines
Date 07/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Solmon , Ethan (Mr.) <hr/> Contributor address; City; State; Zip Code Colleyville, TX 76034	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) none
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Solmon , Ethan (Mr.) <hr/> Contributor address; City; State; Zip Code Colleyville, TX 76034	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) none
Date 08/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Solmon , Nicholas (Mr.) <hr/> Contributor address; City; State; Zip Code Colleyville, TX 76034	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) student		Employer (See Instructions) student

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/11 Rpt: 19/20
2 FILER NAME True Texas Project PAC		3 Filer ID (Ethics Commission Filers) 00066451
4 Date 11/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Solmon , Suzanna (Mrs.) <hr/> 6 Contributor address; City; State; Zip Code Colleyville, TX 76034	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Flight Attendant		9 Employer (See Instructions) Southwest Air
Date 10/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Solmon , Zachary (Mr.) <hr/> Contributor address; City; State; Zip Code Colleyville, TX 76034	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) student		Employer (See Instructions) student
Date 12/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VALE, LOU (Mr.) <hr/> Contributor address; City; State; Zip Code KNOX CITY, TX 79529	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) TEACHER

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/1 Rpt: 20/20	2 FILER NAME True Texas Project PAC	3 Filer ID (Ethics Commission Filers) 00066451
4 Date 12/29/2023	5 Payee name Piryx Rally	
6 Amount (\$) \$135.70 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 995 Market Street 2nd Floor San Francisco, CA 94103	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CC Processing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
		Office held