GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC COVER SHEET PG 1

3 COMMITTEE NAME North Texas PAC for Trust, Honesty, and Integrity Date Received ELECTRONICALLY FIL 10/06/2024	
North Texas PAC for Trust, Honesty, and Integrity Date Received ELECTRONICALLY FIL	
10/00/2024	
4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE	
ADDRESS 4265 Harvest Hill Road Date Hand-delivered or Date Postn	marked
Change of Address	hancu
Carrollton, TX 75010	
Date Processed	
Date Imaged	
5 CAMPAIGN MS / MRS / MR FIRST MI	
TREASURER NAME Mr. Thomas R.	
NICKNAME LAST SUFFIX	
Washington	
6 CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE;	ZIP CODE
TREASURER STREET 1805 Countryside	
ADDRESS	
(Residence or Business) Carrollton, TX 75007	
7 CAMPAIGN STREET OR PO BOX; APT / SUITE #; CITY; STATE;	ZIP CODE
TREASURER MAILING 1805 Countryside	
ADDRESS	
Change of Address Carrollton, TX 75007	
8 CAMPAIGN AREA CODE PHONE NUMBER EXTENSION	
TREASURER (972) 695-9596	
PHONE (012) 000 0000	
9 REPORT January 15 X 30th day before election Dissolution (Attach PAC-DR	२)
TYPE Sthead and some second and a state of the second seco	ocuror
July 15 Let termination	asurer
10 PERIOD Month Day Year Month Day Year	
COVERED 07/01/2024 THROUGH 09/26/2024	
11 ELECTION ELECTION DATE ELECTION TYPE	
Month Day Year Primary Runoff Other	
11/05/2024 X General Special	
GO TO PAGE 2	
Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V4.1.	.0.48da51f7

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 File	r ID	(Ethics Commission Filers)
North Texas PAC for T	rust, Honesty, and Integ	prity	000	81712	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	I		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures	A. Supported			
	(Describe by date and location of election and nature of issue.)				
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if				
	applicable, classify by party.)				
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	 POLITICAL CONTRIBUTIONS (OTHER TH OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold 	IAN	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOA	ANS)	\$	0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES		\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES		\$	95.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL C OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE G PERIOD	LAST DAY	\$	2,419.60
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS A REPORTING PERIOD	AS OF THE	\$	0.00
16 AFFIDAVIT				1	
		I swear, or affirm, under penal true and correct and includes a under Title 15, Election Code.			
		Mr. Th	omas P. Was	shinaton	
			omas R. Was	-	
AFFIX NOTAR	Y STAMP / SEAL ABOVE	Ç dat	. 5		
Sworn to and subscribo	hefore me by the said		this the		day
		which, witness my hand and seal of office.	, uns une _		uuy
Signature of officer a	dministering oath	Printed name of officer administering oath	Title	e of office	r administering oath
Forms provided by Texas	Ethics Commission	www.ethics.state.tx.us			Version V4.1.0.48da51f7

SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3 3 of 7

17 COMMIT North Te	(Ethics Comn	nission Filers)			
19 SCHEDULE SUBTOTALS SUB NAME OF SCHEDULE SUB					
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	0.00	
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00	
3. X SCHEDULE B: PLEDGED CONTRIBUTIONS				0.00	
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	DR	\$		
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$		
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$		
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	2	\$		
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$		
9. X	SCHEDULE E: LOANS		\$	0.00	
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	95.00	
11. X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00	
12. X	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	0.00	
13. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00	
14. X	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	30.00	
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$		
			-		

PLEDGED CONTRIBUTIONS

SCHEDULE **B**

_									
The Instruction Guide explains how to complete this form.		1	Total pages S Sch: 1/1 Rp		9 B:				
2	FILER NAME				3	Filer ID	(Ethics (Commission Filers)	
	North Texas	s PAC for Trust, Honesty, ar	nd Integrity			00081712			
4	TOTAL OF	UNITEMIZED PLEDGE	S			\$			0.00
5	Date	6 Full name of pledgor	out-of-state PAC (ID#:_)	8	Amount of pledge (\$)	9	In-kind description (If applicable)	
		7 Pledgor Address;	City; State; Zip Code			Check if trave	i I I I I el outside	of Texas. Complete Sch	iedule T.
10	Principal occ	upation / Job title (See Instructi	ons)	11 Employer (See Instru	ctic	ns)			

LOANS		SCHEDULE E
The Instruction Guide explains how to complete this form.		iges Schedule E: 1 Rpt: 5/7
2 FILER NAME North Texas PAC for Trust, Honesty, and Integrity	3 Filer ID 000817	(Ethics Commission Filers) 712
⁴ TOTAL OF UNITEMIZED LOANS		\$ 0.00
5 Date of loan 7 Name of lender out-of-state PAC (ID#:)	9 Loan Amount (\$)
6 Is lender a financial institution? 8 Lender address; City; State; Zip Code		10 Interest Rate 11 Maturity Date
12 Principal occupation / Job title (See Instructions) 13 Employer (See Instructions))	
14 Description of Collateral 15 Check if personal funds were None Image: Check if personal funds were	re deposited	d into political account (See Instructions)
16 GUARANTOR 17 Name of guarantor INFORMATION INFORMATION		19 Amount Guaranteed (\$)
not applicable 18 Guarantor address; City; State; Zip Code		
20 Principal occupation 21 Employer (See Instructions))	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel out of District I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
1 Total pages Schedule F1:	
Sch: 1/1 Rpt: 6/7	North Texas PAC for Trust, Honesty, and Integrity 00081712
4 Date 09/26/2024	5 Payee name Campaign Verify, Inc.
6 Amount (\$) \$95.00 Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1215 31st Street NW PO Box 3554 Washington, DC 20007-9998
8 PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Registration Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

Sch: 1/1 Rpt: 7/7 North Texas PAC for Trust, Honesty, and Integrity 00081712 4 Date 5 Payee name 07/10/2024 Prosperity Bank USA 6 Amount (\$) 7 Payee address; City; State; Zip 10.00 Carrollton, TX 75007 Carrollton, TX 75007 (b) Description (See instructions regarding type of information require 06 PURPOSE Carrollton, TX 75007 (b) Description (See instructions regarding type of information require 08/11/2024 Payee name Off Service Fee Service Fee Date Payee name Posperity Bank USA Service Fee Service Fee 08/11/2024 Prosperity Bank USA Amount (\$) Payee Address; City; State; Zip Service Fee 08/10/2024 Payee name Carrollton, TX 75007 Service Fee Service Fee Date OF Category (See instructions for examples of acceptable categories) (b) Description Service Fee Date Carrollton, TX 75007 Service Fee Service Fee Service Fee Date Payee name Service Fee Service Fee Service Fee		The Instruction Guide explains how to complete this form.
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