FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00088301 3 COMMITTEE NAME **OFFICE USE ONLY Texas Truth Movement** Date Received **ELECTRONICALLY FILED** 07/14/2025 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 27708 Tomball Pkwy Date Hand-delivered or Date Postmarked Box 108 Change of Address Tomball, TX 77375 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Gary NAME NICKNAME LAST **SUFFIX** Gray STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 23303 Cannon Creek Trail STREET **ADDRESS** (Residence or Business) Tomball, TX 77377 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 23303 Cannon Creek Trail MAILING **ADDRESS** Tomball, TX 77377 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (713) 635-9002 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Х Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 01/01/2025 06/30/2025 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special **GO TO PAGE 2**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Texas Truth Movement	t		00088301	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	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.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	772.00
	2. TOTAL POLITICAL (OTHER THAN PLE	L CONTRIBUTIONS EDGES, LOANS, OR GUARANTEES OF LOANS)	\$	1,002.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	D POLITICAL EXPENDITURES	\$	10.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	1,556.89
CONTRIBUTION BALANCE	5. TOTAL POLITICAL (OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	0.00
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT	<u> </u>		<u> </u>	
		I swear, or affirm, under penalty of pe true and correct and includes all inforr under Title 15, Election Code.		
		Gary	Gray	
		Signature of Car	mpaign Treasu	rer
AFFIX NOTARY	STAMP / SEAL ABOVE			
		, th	nis the	day
of	_, 20, to certify	which, witness my hand and seal of office.		
Signature of officer ac	Iministering oath	Printed name of officer administering oath	Title of offic	eer administering oath

SUBTOTALS - GPAC

FORM **GPAC** COVER SHEET PG 3

		3 of 9
17 COMMITTEE NAME Texas Truth Movement	(Ethics Commission Filers)	
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT	
1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 1,002.00
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTR	RIBUTIONS	\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION	RATION OR LABOR	\$
5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS LABOR ORGANIZATION	FROM CORPORATION OR	\$
6. SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION	I OR LABOR ORGANIZATION	\$
7. SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORA ORGANIZATION	ATION OR LABOR	\$
8. SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORA	TION OR LABOR ORGANIZATION	\$
9. SCHEDULE E: LOANS		\$
10. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL	. CONTRIBUTIONS	\$ 1,556.89
11. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
12. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITIC	CAL CONTRIBUTIONS	\$
13. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
14. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITIC	CAL CONTRIBUTIONS	\$
15. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND C	ONTRIBUTIONS RETURNED	\$

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instruc	ction Guide explains how to complete this 1	form.	1	Total pages Schedule A1: Sch: 1/1 Rpt: 4/9	
2	FILER NAME Texas Truth	Movement		3	Filer ID (Ethics Commission Filers) 00088301	
4	Date 01/29/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$40.00
_		Houston, TX 77095	1	_		
8	retired	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 01/21/2025	Full name of contributor out-of-state PAC (ID#:_Gastineau, Paul Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$40.00
	Principal occur	Magnolia, TX 77355 pation / Job title (See Instructions)	Employer (See Instructions	:) [
	retired	salon, cop and (coc mondono)	Employer (eee med dediction	',		
	Date 02/12/2025	Full name of contributor out-of-state PAC (ID#:_ Jackson, Mary Ann Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$40.00
		Cypress, TX 77429				
	Principal occu retired	oation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 02/25/2025	Full name of contributor out-of-state PAC (ID#:_Latham, Leann Contributor address; City; State; Zip Code Cypress, TX 77429			Amount of Contribution (\$)	\$40.00
	Principal occu retired	pation / Job title (See Instructions)	Employer (See Instructions	<u>. </u>		
	Date 01/02/2025	Full name of contributor out-of-state PAC (ID#:_Morrison, Denise Contributor address; City; State; Zip Code Tomball, TX 77377			Amount of Contribution (\$)	\$70.00
	Principal occu retired	pation / Job title (See Instructions)	Employer (See Instructions	5)		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Legal Services The Instruction Gu		Wages	s/Contract Labor		OTHER (enter a	strict a category not listed above)	
4 Tatal manage Calculula Edu	6 EU ED MANE				1	_	Ell ID	(Ethias Campaianian Filam	
1 Total pages Schedule F1:	l					3	Filer ID	(Ethics Commission Filers	5)
Sch: 1/5 Rpt: 5/9	Texas Truth	Movement					00088301		
4 Date	5 Payee name								
03/14/2025	Hale, Rache	el							
6 Amount (\$)	7 Payee addres	ss; City;	State; Zip Co	nde					
\$500.00	1302 Briarw		State, Zip Ot	Juc					
φ500.00		ood ITali							
Expenditure from	Henderson								
corporate funds	TX, TX 756	54							
8 PURPOSE	(a) Category (Se	ee Categories listed at th	e top of this schedule)	(b)	Description				
OF	Event Expe		,		Check if travel of	outsi	de of Texas. Con	plete Schedule T.	
EXPENDITURE	·				Check if Austin,	, TX,	officeholder living	g expense	
					Speaker Hon	ora	ırium		
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Offi	ceholder name	Office sou	ight			Office h	eld	
experience to belief of or									
Date	Payee name								
02/25/2025	Jackson, M	ary Ann							
Amount (\$)	Payee addres	ss; City;	State; Zip Co	ode					
\$198.75	11611 Brec								
4100.110	11011 5.00	inair ot							
Expenditure from		. == .00							
corporate funds	Cypress, T	(77429							
PURPOSE	(a) Category (Se	ee Categories listed at th	e top of this schedule)	(b)	Description				
OF EXPENDITURE	Advertising	Expense			=			nplete Schedule T.	
					ш	, TX,	officeholder living	g expense	
					Printing				
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Offi	ceholder name	Office sou	ught			Office h	eld	
expenditure to benefit C/Oi	1								
Date	Payee name								
01/02/2025	Karthost								
Amount (\$)	Payee addre	ss; City;	State; Zip Co	nde					
\$35.69	14015 Park	-	Ototto, 2.p 0	54.0					
Ψ33.03									
Expenditure from	Building A S								
corporate funds	Tomball, TX	77377							
PURPOSE	(a) Category (Se	ee Categories listed at th	e top of this schedule)	(b)	Description				
OF EXPENDITURE	Advertising				_			plete Schedule T.	
EXPENDITORE							officeholder living	g expense	
					Website Host	ing	l		
Complete ONLY if direct	Candidate/Offi	ceholder name	Office sou	ught			Office h	eld	
expenditure to benefit C/OI	Н								

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense
Printing Expense

Candidate/Officeholder/Politica Credit Card Payment		Legal Services The Instruction Guide	Salaries/	Wages	/Contract Labor		OTHER (enter a	category not listed above)
1 Total pages Schedule F1:	2 FILER NAME					3	Filer ID	(Ethics Commission Filers)
Sch: 2/5 Rpt: 6/9	Texas Truth	Movement					00088301	
4 Date	5 Payee name							
02/03/2025	Karthost							
6 Amount (\$)	7 Payee addres	s; City;	State; Zip C	ode				
\$35.69	14015 Park	Dr						
Expenditure from	Building A S	uite 112						
corporate funds	Tomball, TX	77377						
8 PURPOSE OF		e Categories listed at the to	p of this schedule)	(b)	Description			
EXPENDITURE	Advertising	Expense			_		de of Texas. Com officeholder living	
					Website Host			, 0.100
						. 9	•	
Complete ONLY if direct expenditure to benefit C/OH	I Candidate/Offic	ceholder name	Office so	ught			Office he	eld
SAPORGILATO TO DOTTOTIL O/OI	•							
Date	Payee name							
04/01/2025	Karthost							
Amount (\$)	Payee addres	s; City;	State; Zip C	ode				
\$35.69	14015 Park	Dr						
	Building A S	uite 112						
Expenditure from corporate funds	Tomball, TX	77377						
PURPOSE	(a) Category (Se	e Categories listed at the to	p of this schedule)	(b)	Description			
OF EXPENDITURE	Advertising	Expense			<u></u>		de of Texas. Com officeholder living	
					Website Host			onpense
						9		
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Offic	ceholder name	Office so	ught			Office he	eld
experientale to beliefft C/OI	•							
Date	Payee name							
05/01/2025	Karthost							
Amount (\$)	Payee addres	s; City;	State; Zip C	ode				
\$35.69	14015 Park	Dr						
- Formanditure Cons	Building A S	uite 112						
Expenditure from corporate funds	Tomball, TX	77377						
PURPOSE	(a) Category (Se	e Categories listed at the to	p of this schedule)	(b)	Description			
OF EXPENDITURE	Advertising		•				de of Texas. Com	
LAI LIBITOIL					ш		officeholder living	expense
					Website Host	urig		
Complete ONLY if direct	Candidate/Offi	eholder name	Office so	uabt			Office he	ald
expenditure to benefit C/Ol		CHOIGEI HAIHE	Office 500	ugrit			Office He	Jiu

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 3/5 Rpt: 7/9	Texas Truth Movement 00088301
4 Date	5 Payee name
06/02/2025	Karthost
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$35.69	14015 Park Dr
Expenditure from	Building A Suite 112
corporate funds	Tomball, TX 77377
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Website Hosting
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
04/23/2025	Linahan, Alice
Amount (\$)	Payee address; City; State; Zip Code
\$300.00	104 Meadow Bend Dr
Expenditure from corporate funds	Kingsland, TX 78639
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Speaker Honorarium
	opeaner Heriotanam
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
01/27/2025	PostNet Tomball
Amount (\$)	Payee address; City; State; Zip Code
\$113.75	27708 Tomball Parkway
Expenditure from	
corporate funds	Tomball, TX 77375
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Printing
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 4/5 Rpt: 8/9	Texas Truth Movement 00088301
4 Date	5 Payee name
02/12/2025	PostNet Tomball
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$101.08	27708 Tomball Pkwy
Expenditure from corporate funds	Tomball, TX 77375
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Printing
	T intuing
Complete CNI V if direct	Candidate/Officeholder name Office sought Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
Date	Payee name
02/25/2025	PostNet Tomball
Amount (\$)	Payee address; City; State; Zip Code
\$30.16	27708 Tomball Pkwy
Expenditure from corporate funds	Tomball, TX 77375
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Event Expense Cry Category (See Categories listed at the top of this schedule) Event Expense Cry Category (See Categories listed at the top of this schedule) Cry Category (See Categories listed at the top of this schedule)
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Printing
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
03/03/2025	Postnet TX233
Amount (\$)	Payee address; City; State; Zip Code
\$35.69	27708 Tomball Parkway
Ψ55.09	255 . 5ban . atay
Expenditure from	Toroball TV 7707F
corporate funds	Tomball, TX 77375
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Printing
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense
Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 5/5 Rpt: 9/9	Texas Truth Movement 00088301
4 Date	5 Payee name
04/23/2025	Postnet TX233
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$38.95	27708 Tomball Parkway
Evpanditure from	
Expenditure from corporate funds	Tomball, TX 77375
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Printing
	Filling
O Complete ONLY !! -!!	Condidate/Officeholder name Office assists
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/25/2025	QuickQuack Car Wash
Amount (\$)	Payee address; City; State; Zip Code
\$22.99	9144 Fry Rd
Expenditure from corporate funds	Cypress, TX 77433
·	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Door Prize - Feb Meeting
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Davisa nama
	Payee name
04/23/2025	Valley Ranch Grill
Amount (\$)	Payee address; City; State; Zip Code
\$27.07	22548 State Highway 249
Expenditure from	
corporate funds	Houston, TX 77070
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Event Expense
EAFEINDITURE	Check if Austin, TX, officeholder living expense
	Speaker Meal
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiorare to benefit C/Of	1