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): 00084967

2 Total pages filed: 11

OFFICE USE ONLY

Date Received: ELECTRONICALLY FILED 07/14/2025

Date Hand-delivered or Date Postmarked:

Receipt #:

Amount:

Date Processed:

Date Imaged:

3 COMMITTEE NAME: Represent Texas

4 COMMITTEE ADDRESS

☐ Change of Address

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

PO Box 140981

Dallas, TX 75214

5 CAMPAIGN TREASURER NAME

MS / MRS / MR: Ms.

FIRST: Laura

MI:

NICKNAME:

LAST: Barry

SUFFIX:

6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)

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

911 West Gray St.

Apt 1

Houston, TX 77019

7 CAMPAIGN TREASURER MAILING ADDRESS

☐ Change of Address

STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

TX

8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION

(512) 461-1195

9 REPORT TYPE

☐ January 15

☒ July 15

☐ 30th day before election

☐ 8th day before election

☐ Runoff

☐ Dissolution (Attach PAC-DR)

☐ 10th day after campaign treasurer termination

10 PERIOD COVERED

Month Day Year: 01/01/2025

THROUGH

Month Day Year: 06/30/2025

11 ELECTION

ELECTION DATE

Month Day Year: 11/03/2026

ELECTION TYPE

☐ Primary

☒ General

☐ Runoff

☐ Special

☐ Other

GO TO PAGE 2

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC
COVER SHEET PG 2

12 COMMITTEE NAME Represent Texas	**13** Filer ID (Ethics Commission Filers) 00084967

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.)	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) ☐ check here if this report qualifies for the higher itemization threshold	$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 395.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	$ 307.35
	4. TOTAL POLITICAL EXPENDITURES	$ 1,557.35
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 11,728.17
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.

Ms. Laura Barry
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

SUBTOTALS - GPAC

FORM GPAC
COVER SHEET PG 3

17 COMMITTEE NAME	18 Filer ID (Ethics Commission Filers)
Represent Texas	00084967

19 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	$ 395.00
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 LABOR ORGANIZATION	$
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	$
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	$
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	$
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 CONTRIBUTIONS	$ 1,557.35
11.	X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	$ 0.00
12.	X	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	$ 0.00
13.	X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	$ 0.00
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	$
15.		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: 1/5 Rpt: 4/11

2 FILER NAME: Represent Texas

3 Filer ID (Ethics Commission Filers): 00084967

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____)	7 Amount of Contribution ($)
01/24/2025	Jones, Karen 6 Contributor address; City; State; Zip Code Terrell, TX 75160	$10.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Not Employed	Not Employed

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/24/2025	Jones, Karen Contributor address; City; State; Zip Code Terrell, TX 75160	$10.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Not Employed	Not Employed

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/24/2025	Jones, Karen Contributor address; City; State; Zip Code Terrell, TX 75160	$10.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Not Employed	Not Employed

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
04/24/2025	Jones, Karen Contributor address; City; State; Zip Code Terrell, TX 75160	$10.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Not Employed	Not Employed

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
05/24/2025	Jones, Karen Contributor address; City; State; Zip Code Terrell, TX 75160	$10.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Not Employed	Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 2/5 Rpt: 5/11

2 FILER NAME
Represent Texas

3 Filer ID (Ethics Commission Filers)
00084967

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____)	7 Amount of Contribution ($)
06/24/2025	Jones, Karen 6 Contributor address; City; State; Zip Code Terrell, TX 75160	$10.00
8 Principal occupation / Job title (See Instructions) Not Employed	9 Employer (See Instructions) Not Employed	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/23/2025	LOVE, KATHLEEN Contributor address; City; State; Zip Code Dallas, TX 75218	$10.00
Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) Not Employed	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/23/2025	LOVE, KATHLEEN Contributor address; City; State; Zip Code Dallas, TX 75218	$10.00
Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) Not Employed	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/23/2025	LOVE, KATHLEEN Contributor address; City; State; Zip Code Dallas, TX 75218	$10.00
Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) Not Employed	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
04/23/2025	LOVE, KATHLEEN Contributor address; City; State; Zip Code Dallas, TX 75218	$10.00
Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) Not Employed	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 3/5 Rpt: 6/11

2 FILER NAME
Represent Texas

3 Filer ID (Ethics Commission Filers)
00084967

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____)	7 Amount of Contribution ($)
05/23/2025	LOVE, KATHLEEN 6 Contributor address; City; State; Zip Code Dallas, TX 75218	$10.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Not Employed	Not Employed

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
06/23/2025	LOVE, KATHLEEN Contributor address; City; State; Zip Code Dallas, TX 75218	$10.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Not Employed	Not Employed

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/30/2025	Pleasants, Chrystin Contributor address; City; State; Zip Code Dallas, TX 75214	$25.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
clinical research monitor	self

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/28/2025	Pleasants, Chrystin Contributor address; City; State; Zip Code Dallas, TX 75214	$25.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
clinical research monitor	self

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/30/2025	Pleasants, Chrystin Contributor address; City; State; Zip Code Dallas, TX 75214	$25.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
clinical research monitor	self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 4/5 Rpt: 7/11

2 FILER NAME
Represent Texas

3 Filer ID (Ethics Commission Filers)
00084967

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____)	7 Amount of Contribution ($)
04/30/2025	Pleasants, Chrystin 6 Contributor address; City; State; Zip Code Dallas, TX 75214	$25.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
clinical research monitor	self

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
05/30/2025	Pleasants, Chrystin Contributor address; City; State; Zip Code Dallas, TX 75214	$25.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
clinical research monitor	self

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/23/2025	WELCH, TERRENCE Contributor address; City; State; Zip Code Dallas, TX 75230	$25.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Attorney	Brown & Hofmeister

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/23/2025	WELCH, TERRENCE Contributor address; City; State; Zip Code Dallas, TX 75230	$25.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Attorney	Brown & Hofmeister

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/23/2025	WELCH, TERRENCE Contributor address; City; State; Zip Code Dallas, TX 75230	$25.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Attorney	Brown & Hofmeister

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 5/5 Rpt: 8/11

2 FILER NAME
Represent Texas

3 Filer ID (Ethics Commission Filers)
00084967

4 Date	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____)	**7** Amount of Contribution ($)
04/23/2025	WELCH, TERRENCE **6** Contributor address; City; State; Zip Code Dallas, TX 75230	$25.00

8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)
Attorney	Brown & Hofmeister

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
05/23/2025	WELCH, TERRENCE Contributor address; City; State; Zip Code Dallas, TX 75230	$25.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Attorney	Brown & Hofmeister

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
06/23/2025	WELCH, TERRENCE Contributor address; City; State; Zip Code Dallas, TX 75230	$25.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Attorney	Brown & Hofmeister

PLEDGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.	**1** Total pages Schedule B: Sch: 1/1 Rpt: 9/11
2 FILER NAME Represent Texas	**3** Filer ID (Ethics Commission Filers) 00084967
4 TOTAL OF UNITEMIZED PLEDGES	**$** 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 travel outside of Texas. Complete Schedule T.	

10 Principal occupation / Job title (See Instructions)	**11** Employer (See Instructions)

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:
Sch: 1/1 Rpt: 10/11

2 FILER NAME
Represent Texas

3 Filer ID (Ethics Commission Filers)
00084967

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
☐ None

15 Check if personal funds were deposited into political account (See Instructions)
☐

16 GUARANTOR INFORMATION
☐ not applicable

17 Name of guarantor

18 Guarantor address; City; State; Zip Code

19 Amount Guaranteed ($)

20 Principal occupation

21 Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 1/1 Rpt: 11/11	Represent Texas	00084967

4 Date	5 Payee name
05/21/2025	Maverick County Democratic Party

6 Amount ($)	7 Payee address; City; State; Zip Code
$750.00 ☐ Expenditure from corporate funds	1299 Main St Eagle Pass, TX 78852

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Contributions/Donations Made By Candidate/Officeholder/Political Committee	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Donation

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

Date	Payee name
04/18/2025	Tarrant County Democratic Party

Amount ($)	Payee address; City; State; Zip Code
$500.00 ☐ Expenditure from corporate funds	685 John B Sias Memorial Parkway Ste. 400 Fort Worth, TX 76134

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Contributions/Donations Made By Candidate/Officeholder/Political Committee	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Donation

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