

**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: 2
3 COMMITTEE NAME GREAT Schools, Great City SPAC		OFFICE USE ONLY	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address 6387 Camp Bowie Blvd, Ste B RMB #334 FORT WORTH, TX 76116		Date Received RECEIVED MAR 05 2021	
5 CAMPAIGN TREASURER NAME JUDY NEEDHAM	MS / MRS / MR JUDY	FIRST JUDY	MI G
	NICKNAME NEEDHAM	LAST	SUFFIX
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business) 6341 Klamath Road, Fort Worth, TX 76116		Date Hand-delivered / Date Postmarked Board of Education	
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address SAME		Date Processed 3-5-2021	
8 CAMPAIGN TREASURER PHONE (817) 732-0181		Date Imaged 3-5-2021	
9 REPORT TYPE <input checked="" type="checkbox"/> January 15 <input type="checkbox"/> July 15		<input type="checkbox"/> 30th day before election <input type="checkbox"/> 8th day before election <input type="checkbox"/> Runoff	
10 PERIOD COVERED 7 / 1 / 2020 THROUGH 12 / 31 / 2020		<input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Dissolution Report (Attached PAC-FR) <input type="checkbox"/> 10th day after campaign treasurer termination	
11 ELECTION 5 / 1 / 21		ELECTION TYPE <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Runoff <input type="checkbox"/> Special Description _____	

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**SPECIFIC-PURPOSE COMMITTEE REPORT:
PURPOSE AND TOTALS**

**FORM SPAC
COVER SHEET PG 2**

12 COMMITTEE NAME GREAT SCHOOLS, GREAT CITY SPAC 13 Filer ID (Ethics Commission Filers)

14 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.) <input type="checkbox"/> SUPPORT (Candidate or Measure) <input type="checkbox"/> OPPOSE (Candidate or Measure) <input type="checkbox"/> ASSIST (Officeholder)	<input type="checkbox"/> CANDIDATE	CANDIDATE/OFFICEHOLDER NAME
	<input type="checkbox"/> OFFICEHOLDER	OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)
	<input type="checkbox"/> MEASURE	BALLOT IDENTIFICATION/#
		ELECTION DATE Month Day Year / /
		DESCRIPTION

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	
EXPENDITURE TOTALS	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0
	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$
CONTRIBUTION BALANCE	4. TOTAL POLITICAL EXPENDITURES	\$ 0
	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

16 SIGNATURE 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.



Judy B. Needham
Signature of Campaign Treasurer (Declarant)

(1) Please complete either option below:

Sworn to and subscribed before me, by the said Judy B. Needham, this the 5th day of March, 2021, to certify which, witness my hand and seal of office.

Laura Litton Laura Litton Admin. Asst.
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____.

My address is _____ (street), _____ (city), _____ (state), _____ (zip code)(country)

Executed in _____ County, State of _____, on the _____ day of _____, 20____ (month) (year)

Signature of Campaign Treasurer (Declarant)