

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)

2 Total pages filed: **11**

3 COMMITTEE NAME

GREAT SCHOOLS, GREAT CITY GPAC

OFFICE USE ONLY

Date Received

RECEIVED

APR 25 2025

FWISD - Legal Services

Date Hand-delivered or Date Postmarked

Hand-delivered

Receipt #

Amount \$

Date Processed

Date Imaged

4 COMMITTEE
ADDRESS

☐ Change of Address

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

**6341 Klamath Road
Fort Worth, TX 76116**

5 CAMPAIGN
TREASURER
NAME

MS / MRS / MR

FIRST

MI

JUDY

G

NICKNAME

LAST

SUFFIX

NEEDHAM

6 CAMPAIGN
TREASURER
STREET ADDRESS
(Residence or Business)

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

same as above

7 CAMPAIGN
TREASURER
MAILING ADDRESS

☐ Change of Address

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

same as above

8 CAMPAIGN
TREASURER
PHONE

AREA CODE PHONE NUMBER EXTENSION

(817) 223-0882

9 REPORT TYPE

☐

January 15

☐

30th day before election

☐

Dissolution Report (Attach PAC-DR)

☐

July 15

☒

8th day before election

☐

10th day after campaign treasurer
termination

☐

Runoff

10 PERIOD
COVERED

Month Day Year

3 / 25 / 25

THROUGH

Month Day Year

4 / 23 / 25

11 ELECTION

ELECTION DATE

Month Day Year

5 / 3 / 25

ELECTION TYPE

☐

Primary

☐

Runoff

☐

Other

☒

General

☐

Special

Description _____

GO TO PAGE 2

GENERAL-PURPOSE COMMITTEE PURPOSE AND TOTALS

FORM GPAC
COVER SHEET PG 2

12 COMMITTEE NAME GREAT SCHOOLS, GREAT CITY GPAC		13 Filer ID (Ethics Commission Filers)
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 Dr. Michael Ryan, Amanda Iman 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) <input type="checkbox"/> Check here if this report qualifies for the higher itemization threshold	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 14,030
	EXPENDITURE TOTALS	
	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 3,923.14
	CONTRIBUTION BALANCE	
5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 12,061.86	
OUTSTANDING LOAN TOTALS		
6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 11,500	

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.

Signature of Campaign Treasurer (Declarant)

Please complete either option below:

(1) Affidavit

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

OR

(2) Unsworn Declaration

My name is **JUDY NEEDHAM**, and my date of birth is **07/08/1941**
My address is **6341 Klamath Road**, **Ft. Worth, TX 76116 USA**
(street) (city) (state) (zip code) (country)
Executed in **Tarrant** County, State of **Texas**, on the **25th** day of **April**, 20 **25**
(month) (year)

Judy Needham
Signature of Campaign Treasurer (Declarant)

SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3

17 COMMITTEE NAME		18 Filer ID (Ethics Commission Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT	
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 14,030	
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 MADE FROM POLITICAL CONTRIBUTIONS	\$ 3,923.14	
11. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
12. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$	
13. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
14. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$	
15. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 7
2 FILER NAME GREAT SCHOOLS, GREAT CITY GPAC		3 Filer ID (Ethics Commission Filers)
4 Date 3/13/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Students for the Future	7 Amount of contribution (\$) \$5000
6 Contributor address; City; State; Zip Code 801 Overlook Prosper TX 75078		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 4/1/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ann and Tim McKinney	Amount of contribution (\$) \$100
Contributor address; City; State; Zip Code 1509 Northcrest Ct. Ft. Worth TX 76107		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/1/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephanie Harvey	Amount of contribution (\$) \$250
Contributor address; City; State; Zip Code 4900 Wedbridge Apt 43 Fort Worth TX 76116		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/1/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeff King	Amount of contribution (\$) \$100
Contributor address; City; State; Zip Code 2317 Stadium Dr, Ft. Worth TX 76109		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME GREAT SCHOOLS, GREAT CITY GPAC		3 Filer ID (Ethics Commission Filers)
4 Date 4/1/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Carla B. Brown	7 Amount of contribution (\$) \$200
6 Contributor address; City; State; Zip Code 1212 S. Adams, Ft. Worth, TX 76104		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 4/1/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Joan and Tom Rogers	Amount of contribution (\$) \$200
Contributor address; City; State; Zip Code 3034 Tanglewood Pk. W, Ft. Worth TX 76109		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/1/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Students for the Future	Amount of contribution (\$) \$2,500
Contributor address; City; State; Zip Code 801 Overlook, Prosper, TX 75078		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/1/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Kitty and Jim Loyless	Amount of contribution (\$) \$200
Contributor address; City; State; Zip Code 2911 Sixth Ave., Ft. Worth, TX 76110		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Great Schools, Great City GPAC		3 Filer ID (Ethics Commission Filers)
4 Date 4/1/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Gail W. Rawl	7 Amount of contribution (\$) \$500
6 Contributor address; City; State; Zip Code 4 Westover Rd. Fort Worth TX 76107		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 4/1/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Linda and John Maddox	Amount of contribution (\$) \$100
Contributor address; City; State; Zip Code 2120 Ridgmar Blvd, #14, Ft. Worth TX 76116		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/1/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Karen and Larry Antin	Amount of contribution (\$) \$100
Contributor address; City; State; Zip Code 7020 Castle Creek Ct., Ft Worth TX 76132		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/1/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Zelime and Tim Ward	Amount of contribution (\$) \$200
Contributor address; City; State; Zip Code 3601 Monticello Dr., Ft Worth TX 76107		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 7
2 FILER NAME Great Schools, Great City GPAC		3 Filer ID (Ethics Commission Filers)
4 Date 4/1/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Patricia Bill Meadows	7 Amount of contribution (\$) \$200
6 Contributor address; City; State; Zip Code 121 Rivercrest Dr, Ft Worth, TX 76107		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 4/1/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Judy G. Needham	Amount of contribution (\$) \$150
Contributor address; City; State; Zip Code 6341 Klamath Rd Ft. Worth TX 76116		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/14/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Barbara Williams	Amount of contribution (\$) \$200
Contributor address; City; State; Zip Code 408 Virginia Place, Ft. Worth, TX 76107		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/14/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Mr. and Mrs. Ray Dickerson	Amount of contribution (\$) \$100
Contributor address; City; State; Zip Code 5755 Clearfork Main St. Ft Worth, TX 76109		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME GREAT SCHOOLS, GREAT CITY GPAC		3 Filer ID (Ethics Commission Filers)
4 Date 4/14/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: JAYE BROWNING	7 Amount of contribution (\$) \$25
6 Contributor address; City; State; Zip Code 3800 MONTICELLO, FT WORTH, TX 76107		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 4/14/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: MRS. JEAN W. ROACH	Amount of contribution (\$) \$500
Contributor address; City; State; Zip Code 5755 Clearfork Main Street FORT WORTH TX 76109		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/14/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: DANA H. FREESE	Amount of contribution (\$) \$100
Contributor address; City; State; Zip Code 112 Rivercrest Dr., Ft. Worth, TX 76107		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/14/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Nancy and John Mc Clane	Amount of contribution (\$) \$200
Contributor address; City; State; Zip Code 1600 Texas St. #2406, Ft. Worth, TX 76102		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 7
2 FILER NAME GREAT SCHOOLS, GREAT CITY GPAC		3 Filer ID (Ethics Commission Filers)
4 Date 4/14/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Marsha M. Wright	7 Amount of contribution (\$) \$100
6 Contributor address; City; State; Zip Code 1605 Ashland, Ft Worth, TX 76107		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 4/14/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Nancy + Vernon Bryant	Amount of contribution (\$) \$100
Contributor address; City; State; Zip Code 4455 Camp Bowie, #124, Ft. Worth, TX 76107		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/14/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Pat and Harold Muckleroy	Amount of contribution (\$) \$200
Contributor address; City; State; Zip Code 3455 Ranch View Ct., Ft. Worth, TX 76109		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/14/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Bessie and Mike Mierciz	Amount of contribution (\$) \$100
Contributor address; City; State; Zip Code 1600 Calhoun Ave Ft Worth TX 76107		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 7
2 FILER NAME GREAT SCHOOLS. GREAT CITY PAC		3 Filer ID (Ethics Commission Filers)
4 Date 4/15/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haydn Cutler	7 Amount of contribution (\$) \$2,500
6 Contributor address; City; State; Zip Code 3825 Camp Bowie, Ft. Worth, TX 76116		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/15/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rozanne and Billy Rosenthal	Amount of contribution (\$) \$500
Contributor address; City; State; Zip Code 1239 Lady Oaks Lane, Fort Worth, TX 76107		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/14/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ian Curry	Amount of contribution (\$) \$100
Contributor address; City; State; Zip Code 6125 Plum Valley Place, Ft. Worth, TX 76116		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
	Contributor address; City; State; Zip Code	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

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: 1		2 FILER NAME Great Schools, Great City GPAC		3 Filer ID (Ethics Commission Filers)	
4 Date 4/25/25		5 Payee name Catalyst Advisors Group LLC			
6 Amount (\$) \$1,485.14		7 Payee address: City; State; Zip Code 1108 Lavaca St 140-506 Austin TX 78701			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fundraising Expense		(b) Description For 5 Board Seats		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 3/18/25		Payee name Dr. Michael Ryan			
Amount (\$) \$2,000		Payee address: City; State; Zip Code 5248 Agave Way, Benbrook, TX 76126			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contribution		Description For FW/5 D DISTRICT 7		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 3/13/25		Payee name U.S. Postal Service			
Amount (\$) \$438		Payee address: City; State; Zip Code 3020 S. Cherry Lane Fort Worth, TX 76116			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Expense for fund-raising		Description for solicitation letter to 300		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED