CAND DATE / OFF CEHOLDER CAMPAIGN FI ANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers)

2 Total pages filed: 7

3 CANDIDATE / OFFICEHOLDER NAME

FIRST: BRIAN | MI: J

NICKNAME | SUFFIX

OFFICE USE ONLY

Date Received

RECEIVED
JUL 15 2022
Board of Education

4 CANDIDATE / OFFICEHOLDER

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

[redacted]

☐ Change of Address

5 CANDIDATE / AREA CODE PHONE NUMBER EXTENSION Date Hand-delivered or Date Postmarked

[redacted]

OFFICEHOLDER PHONE (682) 277-701

6 CAMPAIGN TREASURER

MS / MRS / MR: MR | FIRST: BRIAN | MI: J

Receipt # Amount $

Date Processed

CAND DATE / OFF CEHOLDER

FORM C/OH
COVER SHEET PG 2

[redacted]

TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) OR

$

15 C/OH NAME

3. TOTAL UNITEMIZED POLITICAL EXPENDITURE $

J DIXON

17 CONTRIBUTION TOTALS

$

CONTRIBUTIONS MADE ELECTRONICALL

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY

2. **TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) 1,069.92

EXPENDITURE TOTALS

TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

4. **TOTAL POLITICAL EXPENDITURES** $ 2,405.61

CONTRIBUTION BALANCE

OF REPORTING PERIOD $ -109.00

[redacted]

OUTSTANDING 6 $

[redacted]

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.

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by this the _____ day of

20 _____, to certify which, witness my hand and seal of office.

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

[redacted]

$ 350.00

2

3. ☐ $

$

6. $

$

8. $

$

$

10 $

$

12 $

[redacted]

SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS $ 719.92

SCHEDULE B: PLEDGED CONTRIBUTIONS

4. SCHEDULE E: LOANS

5 SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS $ 2405.61

SCHEDULE F2: UNPAID INCURRED OBLIGATIONS

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: 1
2 FILER NAME: BRIAN J DIXON	3 Filer ID (Ethics Commission Filers)

4 Date	5 Full name of contributor / out-of-state PAC (ID#)	7 Amount of contribution ($)
6/13/2022	Elizabeth Aguirre	100.00
	6 Contributor address; City; State; Zip Code: 642 Spinnaker Loop Kyle TX 78640	

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Physician	BSW

Date | Full name of contributor / out-of-state PAC | Amount of contribution ($)

7/12/20 | ES Marshall

Contributor address; City; State; Zip Code: 4200 Shelton Drive Fort Worth TX 76116

[redacted]

out-of-state PAC (ID#)

City; State; Zip Code

[redacted]

out-of-state PAC (ID#

City;

Date | Full name of contributor | Amount of contribution ($)

Contributor address;

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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 A2: 1

2 FILER NAME BRIAN J DIXON

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS $ 719.92

5 Date

1/14/2022 FOCUS ON STANISLAUS PAC 719.92

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

11 Employer (FOR NON-JUDICIAL) (See Instructions)

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

Contribution $ description

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date

Amount of Contribution $ In-kind contribution

Contributor address;

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

POLITICAL EXPENDITURES MADE

SCHEDULE F1

Accounting/Banking
Consulting Expense
Contributions/Donations Made By

EXPENDITURE CATEGORIES FOR BOX 8(a)

The Instruction Guide explains how to complete this form.

2 FILER NAME

4 Date 7/15 22

5 Payee name

Credit Card Payment

1,409.00 P.O. Box 1648 Austin TX 78767

City

PURPOSE OF EXPENDITURE

June

(c)

Office sought

Date

7/15/2022 Amount

1340 Cross St 1770

Gift/Awards/Memorials Expense
Legal Services
Printing Expense
Salaries/Wages/Contract Labor
Travel Out Of District
Other (enter a category not listed above)

Description

PURPOSE OF EXPENDITURE

Fees

Payee name

7/15/2022 MURPHY MARCA

922.00 P.O. Box 1648 Austin

Zip Code

78767

Description

PURPOSE OF EXPENDITURE

Advertising

EV Text Messages

CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

The Instruction Guide explains how to complete this form.

2 Filer ID (Ethics Commission Filers)

3 SIGNATURE

I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer a