

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE 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:

6

3 CANDIDATE /  
OFFICEHOLDER  
NAME

MS / MRS / MR

FIRST

MI

MRS

DENISE

NICKNAME

LAST

SUFFIX

MORRISON

4 CANDIDATE /  
OFFICEHOLDER  
MAILING  
ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

22819 TRAILWOOD LN TOMBALL TX  
77375

☐ Change of Address

5 CANDIDATE/  
OFFICEHOLDER  
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(281)

744-5638

6 CAMPAIGN  
TREASURER  
NAME

MS / MRS / MR

FIRST

MI

MRS

DENISE

NICKNAME

LAST

SUFFIX

MORRISON

7 CAMPAIGN  
TREASURER  
ADDRESS

STREET ADDRESS (NO PO BOX PLEASE);

APT / SUITE #;

CITY;

STATE;

ZIP CODE

22819 TRAILWOOD LN

TOMBALL

TX 77375

(Residence or Business)

8 CAMPAIGN  
TREASURER  
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(281)

744-5638

9 REPORT TYPE

☐ January 15

☐ 30th day before election

☐ Runoff

☐ 15th day after campaign  
treasurer appointment  
(Officeholder Only)

☐ July 15

☒ 8th day before election

☐ Exceeded Modified  
Reporting Limit

☐ Final Report (Attach C/OH - FR)

10 PERIOD  
COVERED

Month

Day

Year

10

/

07

/

2021

THROUGH

Month

Day

Year

10

/

24

/

2021

11 ELECTION

ELECTION DATE

Month

Day

Year

11

/

2

/

2021

ELECTION TYPE

☐ Primary

☐ Runoff

☐ Other  
Description

☒ General

☐ Special

ISD

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

KLEIN ISD Position 4

14 NOTICE FROM  
POLITICAL  
COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE

COMMITTEE NAME

☐ GENERAL

COMMITTEE ADDRESS

☐ SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ Additional Pages

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

15 C/OH NAME

16 Filer ID (Ethics Commission Filers)

17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ .00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ .00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 289.01
	4. TOTAL POLITICAL EXPENDITURES	\$ 289.01
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

18 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 Candidate or Officeholder

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.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

OR

## (2) Unsworn Declaration

My name is DENISE MORRISON, and my date of birth is Sept 23, 1960.

My address is 22819 TRAILWOOD LN, TOMBALL, TX, 77375, USA.  
(street) (city) (state) (zip code) (country)

Executed in HARRIS County, State of TEXAS, on the 25th day of October, 20 21.  
(month) (year)

Denise Morrison

Signature of Candidate/Officeholder (Declarant)



**SUBTOTALS - C/OH****FORM C/OH  
COVER SHEET PG 3****19** FILER NAME**20** Filer ID (Ethics Commission Filers)**21** SCHEDULE SUBTOTALS  
NAME OF SCHEDULESUBTOTAL  
AMOUNT

1.	<input type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$
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 E: LOANS	\$
5.	<input type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
6.	<input type="checkbox"/>	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/>	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input checked="" type="checkbox"/>	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 103.83
9.	<input checked="" type="checkbox"/>	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 185.18
10.	<input type="checkbox"/>	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/>	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/>	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# EXPENDITURES MADE BY CREDIT CARD

## SCHEDULE F4

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

### EXPENDITURE CATEGORIES FOR BOX 10(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	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: <div style="font-size: 1.2em; font-family: cursive;">1 of 1</div>	<b>2</b> FILER NAME <div style="font-size: 1.2em; font-family: cursive;">DENISE MORRISON</div>	<b>3</b> Filer ID (Ethics Commission Filers)				
<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ <div style="font-size: 1.2em; font-family: cursive;">103.83</div>				
<b>5</b> Date <div style="font-size: 1.2em; font-family: cursive;">10-7-2021</div>	<b>6</b> Payee name <div style="font-size: 1.2em; font-family: cursive;">Office Depot (Wells Fargo CC)</div>					
<b>7</b> Amount (\$) <div style="font-size: 1.2em; font-family: cursive;">\$17.31</div>	<b>8</b> Payee address; City; State; Zip Code <div style="font-size: 1.2em; font-family: cursive;">14424 Fm 2920 Rd Tomball Tx 77377</div>					
<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political					
<b>10</b> PURPOSE OF EXPENDITURE	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; vertical-align: top;"> <b>(a)</b> Category (See Categories listed at the top of this schedule)  <div style="font-size: 1.2em; font-family: cursive;">Advertising</div> </td> <td style="width:50%; vertical-align: top;"> <b>(b)</b> Description  <div style="font-size: 1.2em; font-family: cursive;">stickers for Yard Signs</div> </td> </tr> <tr> <td colspan="2" style="vertical-align: top;"> <b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.      <input type="checkbox"/> Check if Austin, TX, officeholder living expense                 </td> </tr> </table>		<b>(a)</b> Category (See Categories listed at the top of this schedule) <div style="font-size: 1.2em; font-family: cursive;">Advertising</div>	<b>(b)</b> Description <div style="font-size: 1.2em; font-family: cursive;">stickers for Yard Signs</div>	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
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<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense						
<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH <table style="width:100%;"> <tr> <td style="width:50%;">Candidate / Officeholder name <div style="font-size: 1.2em; font-family: cursive;">DENISE MORRISON</div></td> <td style="width:50%;">Office sought <div style="font-size: 1.2em; font-family: cursive;">Klein ISD Board of Trustee Pos 4</div></td> </tr> <tr> <td colspan="2" style="text-align: right;">Office held</td> </tr> </table>			Candidate / Officeholder name <div style="font-size: 1.2em; font-family: cursive;">DENISE MORRISON</div>	Office sought <div style="font-size: 1.2em; font-family: cursive;">Klein ISD Board of Trustee Pos 4</div>	Office held	
Candidate / Officeholder name <div style="font-size: 1.2em; font-family: cursive;">DENISE MORRISON</div>	Office sought <div style="font-size: 1.2em; font-family: cursive;">Klein ISD Board of Trustee Pos 4</div>					
Office held						
<b>Date</b> <div style="font-size: 1.2em; font-family: cursive;">10-14-2021</div>	<b>Payee name</b> <div style="font-size: 1.2em; font-family: cursive;">Amazon (Chase Card)</div>					
<b>Amount (\$)</b> <div style="font-size: 1.2em; font-family: cursive;">\$86.52</div>	<b>Payee address; City; State; Zip Code</b> <div style="font-size: 1.2em; font-family: cursive;">Amazon.com</div>					
<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political					
<b>PURPOSE OF EXPENDITURE</b>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; vertical-align: top;"> <b>Category</b> (See Categories listed at the top of this schedule)  <div style="font-size: 1.2em; font-family: cursive;">Advertising</div> </td> <td style="width:50%; vertical-align: top;"> <b>Description</b>  <div style="font-size: 1.2em; font-family: cursive;">Printer Ink Jumbo Perforated Post Cards</div> </td> </tr> <tr> <td colspan="2" style="vertical-align: top;"> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.      <input type="checkbox"/> Check if Austin, TX, officeholder living expense                 </td> </tr> </table>		<b>Category</b> (See Categories listed at the top of this schedule) <div style="font-size: 1.2em; font-family: cursive;">Advertising</div>	<b>Description</b> <div style="font-size: 1.2em; font-family: cursive;">Printer Ink Jumbo Perforated Post Cards</div>	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>Category</b> (See Categories listed at the top of this schedule) <div style="font-size: 1.2em; font-family: cursive;">Advertising</div>	<b>Description</b> <div style="font-size: 1.2em; font-family: cursive;">Printer Ink Jumbo Perforated Post Cards</div>					
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense						
<b>Complete ONLY if direct expenditure to benefit C/OH</b> <table style="width:100%;"> <tr> <td style="width:50%;">Candidate / Officeholder name <div style="font-size: 1.2em; font-family: cursive;">DENISE MORRISON</div></td> <td style="width:50%;">Office sought <div style="font-size: 1.2em; font-family: cursive;">Klein ISD Board of Trustee Pos 4</div></td> </tr> <tr> <td colspan="2" style="text-align: right;">Office held</td> </tr> </table>			Candidate / Officeholder name <div style="font-size: 1.2em; font-family: cursive;">DENISE MORRISON</div>	Office sought <div style="font-size: 1.2em; font-family: cursive;">Klein ISD Board of Trustee Pos 4</div>	Office held	
Candidate / Officeholder name <div style="font-size: 1.2em; font-family: cursive;">DENISE MORRISON</div>	Office sought <div style="font-size: 1.2em; font-family: cursive;">Klein ISD Board of Trustee Pos 4</div>					
Office held						
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED						



# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

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

### 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	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: <b>1 of 2</b>	2 FILER NAME <b>DENISE MORRISON</b>	3 Filer ID (Ethics Commission Filers)
4 Date <b>10-14-2021</b>	5 Payee name <b>Office Depot</b>	
6 Amount (\$) <b>\$43.49</b> <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code <b>14424 Fm 2920 Rd Tomball Tx 77377</b>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <b>Advertising</b>	(b) Description <b>Flier Copies</b>
	(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	Candidate / Officeholder name Office sought Office held <b>DENISE MORRISON Klein ISD Board of Trustee Pos 4</b>	
Date <b>10-15-2021</b>	Payee name <b>Office Depot</b>	
Amount (\$) <b>\$45.98</b> <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <b>14424 Fm 2920 Rd Tomball Tx 77377</b>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Advertising</b>	Description <b><del>Flier Copies</del> Printer Paper</b>
	<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	Candidate / Officeholder name Office sought Office held <b>DENISE MORRISON Klein ISD Board of Trustee Pos 4</b>	
Date <b>10-19-2021</b>	Payee name <b>Office Depot</b>	
Amount (\$) <b>\$31.91</b> <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <b>14424 Fm 2920 Rd Tomball Tx 77377</b>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Advertising</b>	Description <b>Flier Copies</b>
	<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	Candidate / Officeholder name Office sought Office held <b>DENISE MORRISON Klein Board of Trustee Pos 4</b>	

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# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

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 G: <b>2 of 2</b>	2 FILER NAME <b>DENISE MORRISON</b>	3 Filer ID (Ethics Commission Filers)
4 Date <b>10-24-2021</b>	5 Payee name <b>WAL-MART</b>	
6 Amount (\$) <b>\$63.80</b> <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code <b>21150 Kuykendahl Rd Spring Tx 77379</b>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <b>Advertising</b>	(b) Description <b>Printer Ink</b>
	(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 ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name: <b>DENISE MORRISON</b> Office sought: <b>Klein ISD Board of Trustee Pos 4</b> Office held:		
Date	Payee name	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Candidate / Officeholder name Office sought Office held		
Complete ONLY if direct expenditure to benefit C/OH		
Date	Payee name	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Candidate / Officeholder name Office sought Office held		
Complete ONLY if direct expenditure to benefit C/OH		

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