

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**FORM C/OH COVER SHEET PG 1**

The C/OH Instruction Guide explains how to complete this form.		<b>1</b> Filer ID (Ethics Commission Filers)	<b>2</b> Total pages filed: <u>6</u>
<b>3</b> CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR <b>Mrs.</b>	FIRST <b>Marjorie</b>	MI <b>L</b>
	NICKNAME	LAST <b>Barnes</b>	SUFFIX
<b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS <small>Change of Address</small>	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <b>14340 Tanglewood Drive, Farmers Branch, TX 75234</b>		
<b>5</b> CANDIDATE / OFFICEHOLDER PHONE	AREA CODE <b>( 469 )</b>	PHONE NUMBER <b>878-4623</b>	EXTENSION
	MS / MRS / MR	FIRST	MI
<b>6</b> CAMPAIGN TREASURER NAME	NICKNAME	LAST	SUFFIX
	Date Received <b>Received</b> <b>APR 26 2024</b> Carrollton-Farmers Branch ISD Superintendent's Office <i>JKL</i>		
<b>7</b> CAMPAIGN TREASURER ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <b>14334 Tanglewood Drive, Farmers Branch, TX 75234</b>		
	AREA CODE <b>( 214 )</b>	PHONE NUMBER <b>802 878-7291</b>	EXTENSION
<b>9</b> REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)		
	<b>10</b> PERIOD COVERED		
Month Day Year <b>03 / 27 / 24</b>		THROUGH Month Day Year <b>04 / 24 / 24</b>	
<b>11</b> ELECTION	ELECTION DATE		ELECTION TYPE
	Month Day Year <b>05 / 04 / 24</b>	<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="checkbox"/> Runoff <input type="checkbox"/> Special <input checked="" type="checkbox"/> Other Description <b>municipal</b>
<b>12</b> OFFICE	OFFICE HELD (if any) <b>n/a</b>	<b>13</b> OFFICE SOUGHT (if known) <b>CFBISD School Board Trustee</b>	
<b>14</b> NOTICE FROM POLITICAL COMMITTEE(S)           <small>Additional Pages</small>	<b>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.</b>		
	COMMITTEE TYPE	COMMITTEE NAME	
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS	
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	

**GO TO PAGE 2**

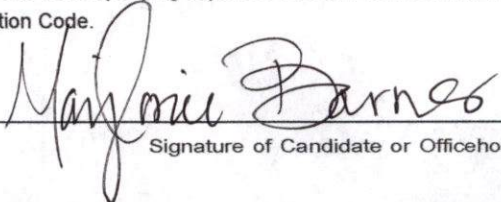


# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

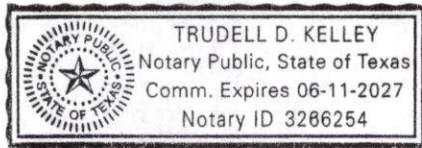
<b>15 C/OH NAME</b> Marjorie Barnes		<b>16 Filer ID</b> (Ethics Commission Filers)
<b>17 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 825.00
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 421.76
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 2227.58
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 1398.12

**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 Marjorie Barnes this the 26<sup>th</sup> day of April, 2024, to certify which, witness my hand and seal of office.

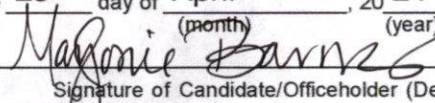
Trudell D. Kelley Trudell D. Kelley Notary  
 Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

**(2) Unsworn Declaration**

My name is Marjorie Barnes, and my date of birth is June 28, 1981.  
 My address is 14340 Tanglewood Drive, Farmers Branch TX 75234 USA.  
(street) (city) (state) (zip code) (country)

Executed in Dallas County, State of Texas, on the 25 day of April, 2024.  
(month) (year)

  
 \_\_\_\_\_  
 Signature of Candidate/Officeholder (Declarant)

**SUBTOTALS - C/OH****FORM C/OH  
COVER SHEET PG 3**

<b>19 FILER NAME</b> Marjorie Barnes		<b>20 Filer ID (Ethics Commission Filers)</b>
<b>21 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		<b>SUBTOTAL AMOUNT</b>
1	SCHEDULE A1 MONETARY POLITICAL CONTRIBUTIONS	\$ 825 00
2	SCHEDULE A2 NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0
3	SCHEDULE B PLEDGED CONTRIBUTIONS	\$ 0
4	SCHEDULE E LOANS	\$ 0
5	SCHEDULE F1 POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 421 76
6	SCHEDULE F2 UNPAID INCURRED OBLIGATIONS	\$ 0
7	SCHEDULE F3 PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
8	SCHEDULE F4 EXPENDITURES MADE BY CREDIT CARD	\$ 0
9	SCHEDULE G POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 0
10	SCHEDULE H PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0
11	SCHEDULE I NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
12	SCHEDULE K INTEREST CREDITS GAINS REFUNDS AND CONTRIBUTIONS RETURNED TO FILER	\$ 0

# 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 <b>2</b>
2 FILER NAME <b>Marjorie Barnes</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>04/01/24</b>	5 Full name of contributor out of state PAC (ID# _____) <b>Lindsay Orta</b> 6 Contributor address City State Zip Code <b>3430 Pebble Beach Dr Farmers Branch, TX 75234</b>	7 Amount of contribution (\$)  <b>25 00</b>
8 Principal occupation / Job title (See Instructions) <b>realtor</b>		9 Employer (See Instructions)
Date <b>04/09/24</b>	Full name of contributor out of state PAC (ID# _____) <b>Jason Davila</b> Contributor address City State Zip Code <b>2935 Marsann Lane, Farmers Branch, TX 75234</b>	Amount of contribution (\$)  <b>50 00</b>
Principal occupation / Job title (See Instructions) <b>consultant</b>		Employer (See Instructions)
Date <b>04/10/24</b>	Full name of contributor out of state PAC (ID# _____) <b>Sarah Berel - Harrop</b> Contributor address City State Zip Code <b>3047 Eric Lane, Farmers Branch TX 75234</b>	Amount of contribution (\$)  <b>500 00</b>
Principal occupation / Job title (See Instructions) <b>Intern Minister</b>		Employer (See Instructions)
Date <b>04/10/24</b>	Full name of contributor out of state PAC (ID# _____) <b>Sandra Swan</b> Contributor address City State Zip Code <b>1413 Cambridge Lane, Denton, TX 76209</b>	Amount of contribution (\$)  <b>100 00</b>
Principal occupation / Job title (See Instructions) <b>VP Education for Progressive Leaders Toastmasters Club</b>		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

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 <b>2</b>
2 FILER NAME <b>Marjorie Barnes</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>04/19/24</b>	5 Full name of contributor out of state PAC (ID# _____) <b>Marston Meador</b> 6 Contributor address City State Zip Code <b>3111 Glenmore Court, Carrollton, TX 75007</b>	7 Amount of contribution (\$) <b>100 00</b>
8 Principal occupation / Job title (See Instructions) <b>not employed</b>		9 Employer (See Instructions)
Date <b>04/03/24</b>	Full name of contributor out of state PAC (ID# _____) <b>Rosa Poetschke</b> Contributor address City State Zip Code <b>13131 Veronica Road, Farmers Branch, TX 75234</b>	Amount of contribution (\$) <b>50 00</b>
Principal occupation / Job title (See Instructions) <b>photographer</b>		Employer (See Instructions)
Date	Full name of contributor out of state PAC (ID# _____)  Contributor address City State Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor out of state PAC (ID# _____)  Contributor address City State Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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# 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   | 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<br>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

<b>1</b> Total pages Schedule F1 1	<b>2</b> FILER NAME Marjorie Barnes	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 04/04/24	<b>5</b> Payee name Staples	
<b>6</b> Amount (\$) 48 70	<b>7</b> Payee address 4400 Beltline Road, Addison, TX 75001 <span style="float:right">City State Zip Code</span>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description Push cards
	<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>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <span style="float:right">Office held</span>
Date 04/17/24	Payee name Staples	
Amount (\$) 119 06	Payee address 4400 Beltline Road, Addison TX 75001 <span style="float:right">City State Zip Code</span>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Printing Expense	Description push cards
	<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 <span style="float:right">Office held</span>
Date 04/22/24	Payee name Texas Trade Graphics	
Amount (\$) 254 00	Payee address 2935 Irving, Ste 201 Dallas, TX 75247 <span style="float:right">City State Zip Code</span>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description Signs
	<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 <span style="float:right">Office held</span>

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