

# 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: <b>4</b>								
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR      FIRST      MI Mr.      Dustin	<b>OFFICE USE ONLY</b> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> Date Received  <div style="writing-mode: vertical-rl; transform: rotate(180deg); font-weight: bold;">2023 JUL -5 AM 9:13</div> </div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> Date Hand-delivered or Date Postmarked </div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> Receipt #..      Amount \$ </div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> Date Processed </div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> Date Imaged </div>									
	NICKNAME      LAST      SUFFIX Marshall										
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  Change of Address	ADDRESS / PO BOX;      APT / SUITE #;      CITY;      STATE;      ZIP CODE 6464 Mimosa Lane      Dallas      TX      75230										
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE      PHONE NUMBER      EXTENSION ( 972 )      428-3447										
6 CAMPAIGN TREASURER NAME	MS / MRS / MR      FIRST      MI Mr.      Jack										
	NICKNAME      LAST      SUFFIX Lowe										
7 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);      APT / SUITE #;      CITY;      STATE;      ZIP CODE 8808 Farquhar Circle      Dallas      TX      75209										
8 CAMPAIGN TREASURER PHONE	AREA CODE      PHONE NUMBER      EXTENSION ( 214 )      202-6586										
9 REPORT TYPE	<div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"><input type="checkbox"/> January 15</div> <div style="width: 50%;"><input type="checkbox"/> 30th day before election</div> <div style="width: 50%;"><input type="checkbox"/> Runoff</div> <div style="width: 50%;"><input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)</div> <div style="width: 50%;"><input checked="" type="checkbox"/> July 15</div> <div style="width: 50%;"><input type="checkbox"/> 8th day before election</div> <div style="width: 50%;"><input type="checkbox"/> Exceeded Modified Reporting Limit</div> <div style="width: 50%;"><input checked="" type="checkbox"/> Final Report (Attach C/OH - FR)</div> </div>										
10 PERIOD COVERED	Month      Day      Year      THROUGH      Month      Day      Year 01      /      1      /      23      THROUGH      06      /      30      /      23										
11 ELECTION	<div style="display: flex;"> <div style="flex: 1;"> ELECTION DATE  Month      Day      Year       /      / </div> <div style="flex: 2;"> ELECTION TYPE  <div style="display: flex; justify-content: space-between;"> <span>Primary</span> <span>Runoff</span> <span>Other Description</span> </div> <div style="display: flex; justify-content: space-between;"> <span>General</span> <span>Special</span> <span></span> </div> </div> </div>										
12 OFFICE	OFFICE HELD (if any) <b>DISD Board of Trustees District 2</b>	13 OFFICE SOUGHT (if known)									
14 NOTICE FROM POLITICAL COMMITTEE(S)  Additional Pages	<div style="border: 1px solid black; padding: 5px;"> <p style="font-size: small; margin: 0;">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.</p> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%; border: 1px solid black; padding: 2px;">COMMITTEE TYPE</td> <td style="border: 1px solid black; padding: 2px;">COMMITTEE NAME</td> </tr> <tr> <td style="border: 1px solid black; padding: 2px;">GENERAL</td> <td style="border: 1px solid black; padding: 2px;">COMMITTEE ADDRESS</td> </tr> <tr> <td style="border: 1px solid black; padding: 2px;">SPECIFIC</td> <td style="border: 1px solid black; padding: 2px;">COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td style="border: 1px solid black; padding: 2px;"></td> <td style="border: 1px solid black; padding: 2px;">COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table> </div>			COMMITTEE TYPE	COMMITTEE NAME	GENERAL	COMMITTEE ADDRESS	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME		COMMITTEE CAMPAIGN TREASURER ADDRESS
COMMITTEE TYPE	COMMITTEE NAME										
GENERAL	COMMITTEE ADDRESS										
SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME										
	COMMITTEE CAMPAIGN TREASURER ADDRESS										

GO TO PAGE 2

RECEIVED  
BOARD SECRETARY  
DALLAS, TX

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

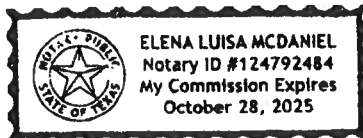
<b>15 C/OH NAME</b> Dustin Marshall		<b>16 Filer ID (Ethics Commission Filers)</b>
<b>17 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0.00
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 26,000.00
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 32,918.13
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

**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]*  
Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP / SEAL

Sworn to and subscribed before me by Dustin Marshall this the 5th day of July, 2023, to certify which, witness my hand and seal of office.

Elena Luisa McDaniel Elena Luisa McDaniel Executive Assistant  
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 Candidate/Officeholder (Declarant)

**SUBTOTALS - C/OH****FORM C/OH  
COVER SHEET PG 3****19 FILER NAME**

Dustin Marshall

**20 Filer ID (Ethics Commission Filers)****21 SCHEDULE SUBTOTALS  
NAME OF SCHEDULE****SUBTOTAL  
AMOUNT**

1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS

\$

2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

\$

3. SCHEDULE B: PLEDGED CONTRIBUTIONS

\$

4. SCHEDULE E: LOANS

\$

5. ☒ SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

\$ 26,000.00

6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS

\$

7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS

\$

8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD

\$

9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

\$

10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH

\$

11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

\$

12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED  
TO FILER

\$

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 1	<b>2</b> FILER NAME Dustin Marshall		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 01/27/2023	<b>5</b> Payee name Hillcrest High School Community Foundation			
<b>6</b> Amount (\$) 1,000.00	<b>7</b> Payee address;	City;	State;	Zip Code
	1901 N. Akard	Dallas	TX	75201
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Other		<b>(b)</b> Description Sponsor - Auction Event	
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>			
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH				
Candidate / Officeholder name Office sought Office held				
Date	Payee name			
02/17/2023	Sarah Weinberg Campaign			
Amount (\$)	Payee address;	City;	State;	Zip Code
25,000.00	PO Box 226163	Dallas	TX	75222
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other		Description Campaign Donation	
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH				
Candidate / Officeholder name Office sought Office held				
Date	Payee name			
Amount (\$)	Payee address;	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description		
		Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH				
Candidate / Officeholder name Office sought Office held				

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED