	E / OFFICEHOLDER I FINANCE REPORT			FORM C/OH COVER SHEET PG 1
The C/OH Instruction C	Guide explains how to complete this	s form. 1 Filer ID		2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRS Dust		MI	OFFICE USE ONLY Date Received
	NICKNAME LAST Mars		SUFFIX()/	RECEIVED RD SERVICES ALLAS ISD
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUIT 6464 Mimosa Lane	E#; CITY;	ZIP CODE	Date Hand-delivered or Oate Postmarked
Change of Address	Dallas, TX 75230			Date Processed
5 CAMPAIGN	MC (MDC (MD			Date Imaged
TREASURER NAME	MS/MRS/MR FIRST		MI	
	NICKNAME LAST	we.	SUFFIX	
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX P	LEASE); APT/SU		STATE; ZIP CODE
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUM  202			
8 REPORT TYPE		day before election Rund	eded \$500 limit	15th day after campaign treasurer appointment (officeholder only) Final Report (Attach C/OH-FR)
9 PERIOD COVERED	Month Day Year 01/01/2018	THROUGH	Month Day 06/30/2018	Year
10 ELECTION	ELECTION DATE Month Day Year	El Primary General	ECTION TYPE  Runoff  Special	Other
11 OFFICE	OFFICE HELD (if any) ISD Board of Trustees District 2 I		OFFICE SOUGHT (i	f known)
Forms provided by Tox		GO TO PAGE 2		

## CANDIDATE / OFFICEHOLDER REPORT:

## FORM C/OH

SUPPORT	& TOTALS		COVE	<b>R SHEET PG 2</b> 2 of 7
13 C / OH NAME	Marshall, Dustin		14 Filer ID	
15 NOTICE FROM POLITICAL COMMITTEE(S)	ures made by political cor the candidate's or officent n only if they receive noti	older's knowledge or		
Additional Pages				
	GENERAL	COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	ss	
16 CONTRIBUTION TOTALS	TOTAL POLITIC LOANS, OR GU.	 AL CONTRIBUTIONS OF \$50 OR LESS (OTHER ' ARANTEES OF LOANS), UNLESS ITEMIZED	THAN PLEDGES,	\$ 0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	S)	\$ 3,000.00
EXPENDITURE TOTALS	3. TOTAL POLITIC	AL EXPENDITURES OF \$100 OR LESS, UNLESS	ITEMIZED	<b>s</b> 0.00
	4. TOTAL POLITIC	CAL EXPENDITURES		\$ 3,000.00
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 1,593.76
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 0.00
17 AFFADAVIT	LINDA MARIE SMITH NOTARY PUBLIC STATE OF TEXAS MY COMM. EXP. 01/09/2021 NOTARY ID# 703155-2	I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.  Signature of	II information required to	be reported by me
	Cribed before me, by the s	7 -11 -1 1	, this the0	day
Signature of office	Care Attacher administering	Surda Marie Smith	Title of officer a	A Public

#### SUBTOTALS - C/OH

# FORM C/OH COVER SHEET PG 3

					3 of 7				
	ER NAM arshall,								
-	20 SCHEDULE SUBTOTALS								
		SCHEDULE			SUBTOTAL AMOUNT				
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	3,000.00				
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00				
3.	Х	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	0.00				
4.	X	SCHEDULE E: LOANS		\$	0.00				
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	3,000.00					
6.	X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	0.00					
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	\$						
8.	х	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00				
9.	X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	0.00					
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (	OF C/OH	\$					
11,		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$					
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS FOR TO FILER	RETURNED	\$					

FILER NAME Marshall, Du  Date 01/22/2018	5 Full name of contributor out-of-state PAC ( Williams, Todd  6 Contributor address; City; State; Zip Code 3889 Maple Ave	ID#:	1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/7 3 Filer ID 7 Amount of Contribution (\$)
Marshall, Du 4 Date 01/22/2018	5 Full name of contributor out-of-state PAC ( Williams, Todd  6 Contributor address; City; State; Zip Code 3889 Maple Ave		3 Filer ID
4 Date 01/22/2018	<ul> <li>Full name of contributor  out-of-state PAC (Williams, Todd</li> <li>Contributor address; City; State; Zip Code 3889 Maple Ave</li> </ul>		_) 7 Amount of Contribution (\$)
Principal occur	3889 Maple Ave		\$3,000.0
Principal occur	Suite 350 Dallas, TX 75214		
,	pation / Job title (See Instructions)	9 Employer (See Instru	ctions)

PLEC	OGED CONTRIBUTIONS		SCHEDULE B		
TH	ne Instruction Guide explains how to complete	1 Total pages Schedule B: Sch: 1/1 Rpt: 5/7			
2 FILER NA			3 Filer ID	_	
Marshall,	Dustin	kimmie@hazelshotshot.com			
	OF UNITEMIZED PLEDGES	\$ 0.0	0		
5 Date	6 Full name of pledgor out-of-state PAC (ID#:		8 Amount of 9 In-kind description pledge (\$) (If applicable)		
	7 Pledgor Address; City; State; Zip Code			T	
10 Principal o	ccupation / Job title (See Instructions)	1 Employer (See Instruc		1.5	
		, p , a . ( = 0 m.d. d.	odding)		
orma provide					

LOANS			SCHEDULE	E
The Instruction Guide explains how to complete this	ges Schedule E: 1 Rpt: 6/7			
2 FILER NAME Marshall, Dustin		3 Filer ID		
4 TOTAL OF UNITEMIZED LOANS			\$	0.00
5 Date of loan 7 Name of lender out-of-state P.	AC (ID#:	)	9 Loan Amount (\$)	
6 Is lender a 8 Lender address; City; State; financial institution?	Zip Code		10 Interest Rate	
			11 Maturity Date	
12 Principal occupation / Job title (See Instructions)	13 Employer (See Instructions	5)		
14 Description of Collateral None	15 Check if personal funds we	ere deposited	l into political account (See Instructions)	
16 GUARANTOR 17 Name of guarantor INFORMATION			19 Amount Guaranteed	(\$)
not applicable 18 Guarantor address; City; State;	Zip Code			
20 Principal occupation	21 Employer (See Instructions	5)		

#### POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

	CONTRIBUTIONS										
_	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 Office Overhead/Rental Expense Food/Beverage Expense Gift/Awards/Mennals Expense Legal Services Called Expense The Instruction Guide explains how to complete this form.			ent/Reimbursement d/Rental Expense se se/Contract Labor		ise		
1	Total pages Schedule F1:	2	FILER NAM	1E					3	Filer ID	
	Sch: 1/1 Rpt: 7/7		Marshall, I	Dustin							
4	Date 02/19/2018	5	Payee nam Remingtor	e n Research Group							
	Amount (\$) \$3,000.00		Suite 85	ess; City: Briarcliff Pkwy ty, MO 64116	State	; Zip Co	ode				
8	PURPOSE OF EXPENDITURE	(a)	Category ( Market Re	See Categories listed at thi Search	e top of this sch	nedule)	(b)		, TX	ide of Texas, Complete Schedule T, officeholder living expense h	5
9	Complete ONLY if direct expenditure to benefit C/O	1	Candidate/O	fficeholder name	(	Office sou	ught			Office held	