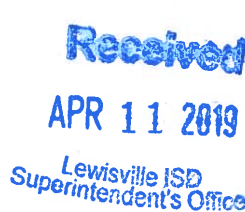


# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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:                                                                                                                                                                                                                                                                                                                        |
| 3 CANDIDATE / OFFICEHOLDER NAME                                                              | <div style="display: flex; justify-content: space-between;"> <div>MS / MRS / MR<br/><b>MS.</b><br/>NICKNAME</div> <div>FIRST<br/><b>JENNY</b><br/>LAST</div> <div>MI<br/><b>S</b><br/>SUFFIX</div> </div> <p style="text-align: center; margin-top: 10px;"><b>PROZNIK</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                       | <b>OFFICE USE ONLY</b><br><br>Date Received<br><br><br><br>Date Hand-delivered or Date Postmarked<br><br><div style="display: flex; justify-content: space-between;"> <div>Receipt #</div> <div>Amount \$</div> </div> Date Processed<br><br>Date Imaged |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS<br><br><input type="checkbox"/> Change of Address | <div style="display: flex; justify-content: space-between;"> <div>ADDRESS / PO BOX;</div> <div>APT / SUITE #;</div> <div>CITY;</div> <div>STATE;</div> <div>ZIP CODE</div> </div> <p><b>4578 MIRA VISTA FASEO TX 75034</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                       |                                                                                                                                                                                                                                                                                                                                             |
| 5 CANDIDATE / OFFICEHOLDER PHONE                                                             | <div style="display: flex; justify-content: space-between;"> <div>AREA CODE</div> <div>PHONE NUMBER</div> <div>EXTENSION</div> </div> <p><b>(214) 727-0762</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                       |                                                                                                                                                                                                                                                                                                                                             |
| 6 CAMPAIGN TREASURER NAME                                                                    | <div style="display: flex; justify-content: space-between;"> <div>MS / MRS / MR<br/><b>MR.</b><br/>NICKNAME</div> <div>FIRST<br/><b>BEIT</b><br/>LAST</div> <div>MI<br/><b>M</b><br/>SUFFIX</div> </div> <p style="text-align: center; margin-top: 10px;"><b>Stoek</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                       |                                                                                                                                                                                                                                                                                                                                             |
| 7 CAMPAIGN TREASURER ADDRESS<br><br>(Residence or Business)                                  | <div style="display: flex; justify-content: space-between;"> <div>STREET ADDRESS (NO PO BOX PLEASE);</div> <div>APT / SUITE #;</div> <div>CITY;</div> <div>STATE;</div> <div>ZIP CODE</div> </div> <p><b>3701 Acton Flower Mound TX 75022</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                       |                                                                                                                                                                                                                                                                                                                                             |
| 8 CAMPAIGN TREASURER PHONE                                                                   | <div style="display: flex; justify-content: space-between;"> <div>AREA CODE</div> <div>PHONE NUMBER</div> <div>EXTENSION</div> </div> <p><b>(214) 476-2417</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                       |                                                                                                                                                                                                                                                                                                                                             |
| 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 checked="" 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 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 \$500 limit</div> <div style="width: 50%;"><input type="checkbox"/> Final Report (Attach C/OH - FR)</div> </div> |                                       |                                                                                                                                                                                                                                                                                                                                             |
| 10 PERIOD COVERED                                                                            | <div style="display: flex; justify-content: space-between;"> <div> Month      Day      Year<br/> <b>12 / 31 / 16</b> </div> <div>THROUGH</div> <div> Month      Day      Year<br/> <b>04 / 04 / 19</b> </div> </div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                       |                                                                                                                                                                                                                                                                                                                                             |
| 11 ELECTION                                                                                  | <div style="display: flex; justify-content: space-between;"> <div> ELECTION DATE<br/> Month      Day      Year<br/> <b>05 / 04 / 19</b> </div> <div> ELECTION TYPE<br/> <input type="checkbox"/> Primary    <input type="checkbox"/> Runoff    <input type="checkbox"/> Other Description<br/> <input checked="" type="checkbox"/> General    <input type="checkbox"/> Special </div> </div>                                                                                                                                                                                                                                                                                                                                      |                                       |                                                                                                                                                                                                                                                                                                                                             |
| 12 OFFICE                                                                                    | <div style="display: flex; justify-content: space-between;"> <div> OFFICE HELD (if any)<br/> <b>LISD BOARD OF TRUSTEES</b><br/> <b>PLACE 5</b> </div> <div> OFFICE SOUGHT (if known) </div> </div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                       |                                                                                                                                                                                                                                                                                                                                             |

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

14 C/OH NAME JENNY S. PROZNIK

15 Filer ID (Ethics Commission Filers)

16 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

17 CONTRIBUTION  
TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ -0-

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

\$ -0-

EXPENDITURE  
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS,  
UNLESS ITEMIZED

\$ -0-

4. TOTAL POLITICAL EXPENDITURES

\$ -0-

CONTRIBUTION  
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY  
OF REPORTING PERIOD

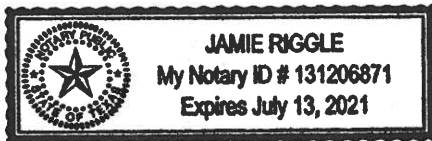
\$ -0-

OUTSTANDING  
LOAN TOTALS

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

\$ -0-

18 AFFIDAVIT



AFFIX NOTARY STAMP / SEAL ABOVE

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

Sworn to and subscribed before me, by the said Jenny Proznik, this the 11th  
day of April, 20 19, to certify which, witness my hand and seal of office.

*[Signature]*

Signature of officer administering oath

Jamie Riggle

Printed name of officer administering oath

Notary Public

Title of officer administering oath