# 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: 18

**OFFICE USE ONLY**

Date Received
RECEIVED
MAR 28 2024
By 2:45pm

Date Hand-delivered or Date Postmarked

Receipt # | Amount $

Date Processed

Date Imaged

**3** CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR | FIRST | MI
Dawn

NICKNAME | LAST | SUFFIX
Champagne

**4** CANDIDATE / OFFICEHOLDER MAILING ADDRESS
Change of Address

ADDRESS / PO BOX; | APT / SUITE #; | CITY; | STATE; | ZIP CODE
21410 Sand Bunker Circle | Katy, TX 77450

**5** CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE | PHONE NUMBER | EXTENSION
( 832 ) 549-2059

**6** CAMPAIGN TREASURER NAME

MS / MRS / MR | FIRST | MI
Brett

NICKNAME | LAST | SUFFIX
Champagne

**7** CAMPAIGN TREASURER ADDRESS
(Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE); | APT / SUITE #; | CITY; | STATE; | ZIP CODE
21410 Sand Bunker Circle | Katy, TX 77450

**8** CAMPAIGN TREASURER PHONE

AREA CODE | PHONE NUMBER | EXTENSION
( 832 ) 549-2071

**9** REPORT TYPE

- [ ] January 15
- [X] 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 | | Month | Day | Year |
|---|---|---|---|---|---|---|---|
| | 01 | 15 | 2024 | THROUGH | 03 | 28 | 2024 |

**11** ELECTION

ELECTION DATE: Month 05 / Day 04 / Year 2024

ELECTION TYPE: [X] Primary [ ] Runoff [ ] Other Description; [X] General [ ] Special

**12** OFFICE

OFFICE HELD (if any): KISD Board of Trustees, Position 7

**13** OFFICE SOUGHT (if known): KISD Board of Trustees, Position 7

**14** NOTICE FROM POLITICAL COMMITTEE(S)

Additional Pages

**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
[X] GENERAL
[ ] SPECIFIC

COMMITTEE NAME: Friends of Dawn Champagne

COMMITTEE ADDRESS: 21410 Sand Bunker Circle, Katy, TX 77450

COMMITTEE CAMPAIGN TREASURER NAME: Brett Champagne

COMMITTEE CAMPAIGN TREASURER ADDRESS: 21410 Sand Bunker Circle, Katy, TX 77450

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**FORM C/OH**
**COVER SHEET PG 2**

| | | | |
|---|---|---|---|
| **15** C/OH NAME | Dawn Champagne | | **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) | $ 0 |
| | 2. | **TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | $ 3388.08 |
| EXPENDITURE TOTALS | 3. | TOTAL UNITEMIZED POLITICAL EXPENDITURE. | $ 0 |
| | 4. | **TOTAL POLITICAL EXPENDITURES** | $ 3224.59 |
| CONTRIBUTION BALANCE | 5. | TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD | $ 1607.38 |
| OUTSTANDING LOAN TOTALS | 6. | TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | $ 1000.00 |

**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.

Dawn Champagne
Signature of Candidate or Officeholder

## Please complete either option below:

**(1) Affidavit**

NOTARY PUBLIC STATE OF TEXAS
ELLEN P. HEBERT
Notary Public, State of Texas
Comm. Expires 05-15-2025
Notary ID 3660871

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Dawn Champagne this the 28th day of March, 20 24, to certify which, witness my hand and seal of office.

Ellen P. Hebert — Ellen P. Hebert — Notary

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 | 20 Filer ID (Ethics Commission Filers) |
|---|---|
| Dawn Champagne | |

| 21 SCHEDULE SUBTOTALS NAME OF SCHEDULE | | SUBTOTAL AMOUNT |
|---|---|---|
| 1. | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | $ 3287.08 |
| 2. | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | $ 101.00 |
| 3. | SCHEDULE B: PLEDGED CONTRIBUTIONS | $ 0 |
| 4. | SCHEDULE E: LOANS | $ 0 |
| 5. | SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS | $ 3224.59 |
| 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 | $ 150.00 |

# 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: 9

2 FILER NAME: Dawn Champagne

3 Filer ID (Ethics Commission Filers)

| 4 Date | 5 Full name of contributor (out-of-state PAC (ID#:_____)) | 6 Contributor address; City; State; Zip Code | 7 Amount of contribution ($) |
|---|---|---|---|
| 3/3/2024 | Doug Mohn | 22030 Windmill Bluff Katy TX 77450 | $250 |

| 8 Principal occupation / Job title (See Instructions) | 9 Employer (See Instructions) |
|---|---|
| | |

| Date | Full name of contributor (out-of-state PAC (ID#:_____)) | Contributor address; City; State; Zip Code | Amount of contribution ($) |
|---|---|---|---|
| 3/3/2024 | Audralyn Allen | 4306 Stonecroft Katy TX 77450 | $20 |

| 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 ($) |
|---|---|---|---|
| 3/3/2024 | Thelma Fundore | 1106 Falling Water Katy TX 77450 | $25 |

| 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 ($) |
|---|---|---|---|
| 3/4/2024 | Richard Bauer | 9949 Hunter's Run College Station TX 77845 | $500 |

| Principal occupation / Job title (See Instructions) | 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**

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**1** Total pages Schedule A1: 9

**2** FILER NAME: Dawn Champagne

**3** Filer ID (Ethics Commission Filers)

| 4 Date | 5 Full name of contributor (out-of-state PAC (ID#:_____)) | 6 Contributor address; City; State; Zip Code | 7 Amount of contribution ($) | 8 Principal occupation / Job title (See Instructions) | 9 Employer (See Instructions) |
|---|---|---|---|---|---|
| 2/24/2024 | Brenda Shaver | 1711 Oceana Ct Katy TX 77450 | $100 | | |
| 2/24/2024 | Meghan Palmer | 2022 Winding Hollow Dr Katy TX 77450 | $23 | | |
| 2/24/2024 | Cheryl Hollabaugh | 1807 Hollow Wind Dr Katy TX 77450 | $100 | | |
| 2/24/2024 | Denise Pyron | 411 Governor's Place Katy TX 77450 | $20 | | |

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# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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1 Total pages Schedule A1: 9

2 FILER NAME: Dawn Champagne

3 Filer ID (Ethics Commission Filers):

| 4 Date | 5 Full name of contributor (out-of-state PAC (ID#:_____)) / 6 Contributor address; City; State; Zip Code | 7 Amount of contribution ($) |
|---|---|---|
| 2/24/2024 | Mitzi Cross<br>24922 Almond Orchard Ln Katy TX 77450 | $100 |

8 Principal occupation / Job title (See Instructions):

9 Employer (See Instructions):

| Date | Full name of contributor (out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code | Amount of contribution ($) |
|---|---|---|
| 2/24/202 | Emily Groh<br>214 Sand Bunker Circle Katy TX 77450 | $20 |

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 ($) |
|---|---|---|
| 2/24/2024 | Eve Schaefer<br>4119 Garden Branch Ct. Katy TX 77450 | $100 |

Principal occupation / Job title (See Instructions): Church staff member

Employer (See Instructions):

| Date | Full name of contributor (out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code | Amount of contribution ($) |
|---|---|---|
| 2/24/2024 | Rebecca Trahan<br>3714 Acacia Wood Way Katy TX 77450 | $100 |

Principal occupation / Job title (See Instructions):

Employer (See Instructions):

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# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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**1** Total pages Schedule A1: 9

**2** FILER NAME: Dawn Champagne

**3** Filer ID (Ethics Commission Filers)

| 4 Date | 5 Full name of contributor (out-of-state PAC (ID#:_____)) | 6 Contributor address; City; State; Zip Code | 7 Amount of contribution ($) |
|---|---|---|---|
| 2/24/2024 | Raquel Estrada Smith | 2306 Enchanted Park Katy TX 77450 | $20 |

| 8 Principal occupation / Job title (See Instructions) | 9 Employer (See Instructions) |
|---|---|
| | |

| Date | Full name of contributor (out-of-state PAC (ID#:_____)) | Contributor address; City; State; Zip Code | Amount of contribution ($) |
|---|---|---|---|
| 2/24/2024 | Paul Dunk | 1814 Bule Sage Katy TX 77450 | $100 |

| Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
|---|---|
| Teacher | Katy ISD |

| Date | Full name of contributor (out-of-state PAC (ID#:_____)) | Contributor address; City; State; Zip Code | Amount of contribution ($) |
|---|---|---|---|
| 2/24/2024 | Beverly Pennington | 198 Highland Terrace League City TX 77573 | $100 |

| 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 ($) |
|---|---|---|---|
| 2/26/2024 | Cassie Parks | 145 Magnolia Ln Fort Worth TX 76114 | $120 |

| Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
|---|---|
| | |

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# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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**1** Total pages Schedule A1: 9

**2** FILER NAME: Dawn Champagne

**3** Filer ID (Ethics Commission Filers)

| 4 Date | 5 Full name of contributor (out-of-state PAC (ID#:_____)) | 6 Contributor address; City; State; Zip Code | 7 Amount of contribution ($) |
|---|---|---|---|
| 2/24/2024 | Bryan Brown | 21211 Kelliwodd Greens Katy TX 77450 | $40 |

| 8 Principal occupation / Job title (See Instructions) | 9 Employer (See Instructions) |
|---|---|
| | |

| Date | Full name of contributor (out-of-state PAC (ID#:_____)) | Contributor address; City; State; Zip Code | Amount of contribution ($) |
|---|---|---|---|
| 2/26/2024 | Christianna Woods | 907 Red Cedar Houston TX 77094 | $200 |

| 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 ($) |
|---|---|---|---|
| 2/26/2024 | Shelley Keating | 28 Hollingers Island Katy TX 77450 | $100 |

| 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 ($) |
|---|---|---|---|
| 3/4/2024 | Deborah Stovall | 5727 Brennan Ridge Katy TX 77450 | $20 |

| Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
|---|---|
| | |

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# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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**1** Total pages Schedule A1: 9

**2** FILER NAME: Dawn Champagne

**3** Filer ID (Ethics Commission Filers)

| 4 Date | 5 Full name of contributor (out-of-state PAC (ID#:_____)) | 6 Contributor address; City; State; Zip Code | 7 Amount of contribution ($) |
|---|---|---|---|
| 2/26/2024 | David Frishman | 5723 Hwy Blvd Katy TX 77450 | $50 |

| 8 Principal occupation / Job title (See Instructions) | 9 Employer (See Instructions) |
|---|---|
| | |

| Date | Full name of contributor (out-of-state PAC (ID#:_____)) | Contributor address; City; State; Zip Code | Amount of contribution ($) |
|---|---|---|---|
| 2/29/2024 | HC Grimet | PO Box 418 Pattison TX 77466 | $100 |

| 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 ($) |
|---|---|---|---|
| 2/29/2024 | Chancie Davis | 1711 Oceana Ct Katy TX 77450 | $100 |

| 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 ($) |
|---|---|---|---|
| 3/3/2024 | La Rhonda Johnson | 1938 Myrna Ln Katy TX 77450 | $20 |

| Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
|---|---|
| | |

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# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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1 Total pages Schedule A1: 9

2 FILER NAME: Dawn Champagne

3 Filer ID (Ethics Commission Filers)

| 4 Date | 5 Full name of contributor (out-of-state PAC (ID#:_____)) | 6 Contributor address; City; State; Zip Code | 7 Amount of contribution ($) |
|---|---|---|---|
| 3/8/2024 | Kelsey Gibson | 610 Brenwick Ct. Katy TX 77450 | $100 |

| 8 Principal occupation / Job title (See Instructions) | 9 Employer (See Instructions) |
|---|---|
| | |

| Date | Full name of contributor (out-of-state PAC (ID#:_____)) | Contributor address; City; State; Zip Code | Amount of contribution ($) |
|---|---|---|---|
| 3/9/2024 | Kristen Lindsey | 631 Aldersgate Ct. Katy TX 77450 | $20 |

| 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 ($) |
|---|---|---|---|
| 3/11/2024 | Becky Kusko | 1207 Emerald Green Houston TX 77094 | $100 |

| 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 ($) |
|---|---|---|---|
| 3/11/2024 | Ann Weiss | 22107 Deforest Ridge Katy TX 77450 | $200 |

| Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
|---|---|
| | |

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# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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**1** Total pages Schedule A1: 9

**2** FILER NAME: Dawn Champagne

**3** Filer ID (Ethics Commission Filers)

| 4 Date | 5 Full name of contributor (out-of-state PAC (ID#:_____)) | 6 Contributor address; City; State; Zip Code | 7 Amount of contribution ($) |
|---|---|---|---|
| 3/8/2024 | Katrina Wilhite | 2051 Arrowfield Katy TX 77450 | $100 |

| 8 Principal occupation / Job title (See Instructions) | 9 Employer (See Instructions) |
|---|---|
| | |

| Date | Full name of contributor (out-of-state PAC (ID#:_____)) | Contributor address; City; State; Zip Code | Amount of contribution ($) |
|---|---|---|---|
| 3/21/2024 | Sarah Perkins | 20635 Castle Bend Katy TX 77450 | $100 |

| 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 ($) |
|---|---|---|---|
| 3/18/2024 | Natalie Hart | 1715 Fieldbriar Ct Katy TX 77450 | $20 |

| 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 ($) |
|---|---|---|---|
| 3/21/2024 | Merrilyn Stockton | 27943 Bradford Ridge Katy TX 77450 | $100 |

| Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
|---|---|
| | |

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# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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1 Total pages Schedule A1: 9

2 FILER NAME: Dawn Champagne

3 Filer ID (Ethics Commission Filers)

| 4 Date | 5 Full name of contributor (out-of-state PAC (ID#:_____)) | 7 Amount of contribution ($) |
|---|---|---|
| 3/21/2024 | Anonymous<br>6 Contributor address; City; State; Zip Code | $99 |
| 8 Principal occupation / Job title (See Instructions) | 9 Employer (See Instructions) | |

| Date | Full name of contributor (out-of-state PAC (ID#:_____)) | Amount of contribution ($) |
|---|---|---|
| 3/21/2024 | Sylvia Pursley<br>Contributor address; City; State; Zip Code<br>4606 Kelliwood Manor Katy TX 77450 | $100 |
| Principal occupation / Job title (See Instructions) | Employer (See Instructions) | |

| Date | Full name of contributor (out-of-state PAC (ID#:_____)) | Amount of contribution ($) |
|---|---|---|
| 3/21/2024 | Jackie Ashby<br>Contributor address; City; State; Zip Code<br>19707 Horseshoe Lake Dr. Katy TX 77450 | $20.08 |
| Principal occupation / Job title (See Instructions) | Employer (See Instructions) | |

| Date | Full name of contributor (out-of-state PAC (ID#:_____)) | Amount of contribution ($) |
|---|---|---|
| | Contributor address; City; State; Zip Code | |
| Principal occupation / Job title (See Instructions) | Employer (See Instructions) | |

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

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 A2: 1 |
| 2 FILER NAME: Dawn Champagne | 3 Filer ID (Ethics Commission Filers) |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS | $ |

| 5 Date | 6 Full name of contributor ☐ out-of-state PAC (ID#:_____) | 8 Amount of Contribution $ | 9 In-kind contribution description |
|---|---|---|---|
| 3/23/2024 | KEEP-Katy Educational Excellence Partners | $101.00 | Push Cards |
| | 7 Contributor address; City; State; Zip Code: 5554 S. Peek Rd Katy TX 77450 | Check if travel outside of Texas. Complete Schedule T. | |

| | |
|---|---|
| 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) | 11 Employer (FOR NON-JUDICIAL) (See Instructions) |
| 12 Contributor's principal occupation (FOR JUDICIAL) | 13 Contributor's job title (FOR JUDICIAL) (See Instructions) |
| 14 Contributor's employer/law firm (FOR JUDICIAL) | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) | Amount of Contribution $ | In-kind contribution description |
|---|---|---|---|
| | Contributor address; City; State; Zip Code | Check if travel outside of Texas. Complete Schedule T. | |

| | |
|---|---|
| Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) | Employer (FOR NON-JUDICIAL) (See Instructions) |
| Contributor's principal occupation (FOR JUDICIAL) | Contributor's job title (FOR JUDICIAL) (See Instructions) |
| Contributor's employer/law firm (FOR JUDICIAL) | Law firm of contributor's spouse (if any) (FOR JUDICIAL) |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | |

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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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
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 F1: | 2 FILER NAME | 3 Filer ID (Ethics Commission Filers) |
|---|---|---|
| 4 | Dawn Champagne | |

| 4 Date | 5 Payee name |
|---|---|
| 1/3/2024 | Office Depot |

| 6 Amount ($) | 7 Payee address; | City; | State; | Zip Code |
|---|---|---|---|---|
| $30.30 | 415 S. Fry Rd. | Katy, TX 77450 | | |

| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Advertising | Labels |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austin, TX, officeholder living expense |

| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | Office held |
|---|---|---|---|
| | | | |

| Date | Payee name |
|---|---|
| 2/23/2024 | Kroger |

| Amount ($) | Payee address; | City; | State; | Zip Code |
|---|---|---|---|---|
| $47.75 | 22150 Westheimber Parkway | Katy | TX | 77450 |

| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) | Description |
|---|---|---|
| | Food/Beverage Expense | Kick-off Party |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austin, TX, officeholder living expense |

| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | Office held |
|---|---|---|---|
| | | | |

| Date | Payee name |
|---|---|
| 2/22/2024 | Kroger |

| Amount ($) | Payee address; | City; | State; | Zip Code |
|---|---|---|---|---|
| $61.08 | 22150 Westheimber Parkway | Katy | TX | 77450 |

| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) | Description |
|---|---|---|
| | Food/Beverage Expense | Kick-off Party |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austin, TX, officeholder living expense |

| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | Office held |
|---|---|---|---|
| | | | |

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

# 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
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 F1: | 2 FILER NAME | 3 Filer ID (Ethics Commission Filers) |
|---|---|---|
| 4 | Dawn Champagne | |

| 4 Date | 5 Payee name |
|---|---|
| 3/8/2024 | NBD Graphics |

| 6 Amount ($) | 7 Payee address; | City; | State; | Zip Code |
|---|---|---|---|---|
| $331.25 | 917 S. Mason Road | Katy | TX | 77450 |

| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Advertising | T-shirts |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austin, TX, officeholder living expense |

| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | Office held |
|---|---|---|---|
| | | | |

| Date | Payee name |
|---|---|
| 2/19/2024 | NBD Graphics |

| Amount ($) | Payee address; | City; | State; | Zip Code |
|---|---|---|---|---|
| $216.50 | 917 S. Mason Road | Katy | TX | 77450 |

| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) | Description |
|---|---|---|
| | Advertising | Push Cards |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austin, TX, officeholder living expense |

| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | Office held |
|---|---|---|---|
| | | | |

| Date | Payee name |
|---|---|
| 3/4/2024 | NBD Graphics |

| Amount ($) | Payee address; | City; | State; | Zip Code |
|---|---|---|---|---|
| $924.29 | 917 S. Mason Road | Katy | TX | 77450 |

| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) | Description |
|---|---|---|
| | Advertising | Yard Signs |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austin, TX, officeholder living expense |

| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | Office held |
|---|---|---|---|
| | | | |

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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
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 F1: | 2 FILER NAME | 3 Filer ID (Ethics Commission Filers) |
|---|---|---|
| 4 | Dawn Champagne | |

| 4 Date | 5 Payee name |
|---|---|
| 2/13/2024 | The Katy Area Chamber of Commerce |

| 6 Amount ($) | 7 Payee address; | City; | State; | Zip Code |
|---|---|---|---|---|
| $300 | 814 East Ave | Katy | TX | 77493 |

**8 PURPOSE OF EXPENDITURE**

| (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|
| Event Expense | Chili Cook-off Booth |

(c) Check if travel outside of Texas. Complete Schedule T. | Check if Austin, TX, officeholder living expense

**9** Complete ONLY if direct expenditure to benefit C/OH — Candidate / Officeholder name | Office sought | Office held

---

| Date | Payee name |
|---|---|
| 3/18/2024 | NBD Graphics |

| Amount ($) | Payee address; | City; | State; | Zip Code |
|---|---|---|---|---|
| $431.92 | 917 S. Mason Rd. | Katy | TX | 77450 |

**PURPOSE OF EXPENDITURE**

| Category (See Categories listed at the top of this schedule) | Description |
|---|---|
| Advertising | Yard Signs |

Check if travel outside of Texas. Complete Schedule T. | Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH — Candidate / Officeholder name | Office sought | Office held

---

| Date | Payee name |
|---|---|
| 3/25/2024 | NBD Graphics |

| Amount ($) | Payee address; | City; | State; | Zip Code |
|---|---|---|---|---|
| $612.63 | 917 S. Mason Rd. | Katy | TX | 77450 |

**PURPOSE OF EXPENDITURE**

| Category (See Categories listed at the top of this schedule) | Description |
|---|---|
| Advertising | Yard Signs |

Check if travel outside of Texas. Complete Schedule T. | Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH — Candidate / Officeholder name | Office sought | Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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**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 F1: | 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
|---|---|---|---|---|
| 4 | Dawn Champagne | | | |
| **4** Date | **5** Payee name | | | |
| 3/24/2024 | Lowe's Home Center | | | |
| **6** Amount ($) | **7** Payee address; | City; | State; | Zip Code |
| $268.87 | 19935 Katy Freeway | Katy | TX | 77450 |
| **8** PURPOSE OF EXPENDITURE | **(a)** Category (See Categories listed at the top of this schedule) | **(b)** Description | | |
| | Advertising | Stakes for Yard Signs | | |
| | **(c)** Check if travel outside of Texas. Complete Schedule T. | Check if Austin, TX, officeholder living expense | | |
| **9** Complete ONLY 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. | Check if Austin, TX, officeholder living expense | | |
| Complete ONLY 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. | Check if Austin, TX, officeholder living expense | | |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | | Office held |

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# INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

**SCHEDULE K**

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 K: 1

**2** FILER NAME: Dawn Champagne

**3** Filer ID (Ethics Commission Filers)

| 4 Date | 5 Name of person from whom amount is received | 8 Amount ($) |
|---|---|---|
| 2/28/2023 | Rebecca Fox | $150 |
| | 6 Address of person from whom amount is received; City; State; Zip Code: 2302 Blue Jay Ln Fulshear TX 77494 | |
| | 7 Purpose for which amount is received: Reimbursement half cost of shared Chili-Cook Off Booth | Check if political contribution returned to filer |

| Date | Name of person from whom amount is received | Amount ($) |
|---|---|---|
| | Address of person from whom amount is received; City; State; Zip Code | |
| | Purpose for which amount is received | Check if political contribution returned to filer |

| Date | Name of person from whom amount is received | Amount ($) |
|---|---|---|
| | Address of person from whom amount is received; City; State; Zip Code | |
| | Purpose for which amount is received | Check if political contribution returned to filer |

| Date | Name of person from whom amount is received | Amount ($) |
|---|---|---|
| | Address of person from whom amount is received; City; State; Zip Code | |
| | Purpose for which amount is received | Check if political contribution returned to filer |

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