

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	MS / MRS / MR FIRST MI Mr. Marvin B	OFFICE USE ONLY Date Received APR 29 2022	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	NICKNAME LAST SUFFIX Lowe		
5 CANDIDATE / OFFICEHOLDER PHONE	ADDRESS / PO BOX, APT / SUITE #, CITY, STATE, ZIP CODE 11484 Wentworth Drive Frisco, TX 75035		
6 CAMPAIGN TREASURER NAME	AREA CODE PHONE NUMBER EXTENSION (972) 998-1160	Date Hand-delivered or Date Postmarked	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	MS / MRS / MR FIRST MI Mrs. Evelet	Receipt #	Amount \$
8 CAMPAIGN TREASURER PHONE	NICKNAME LAST SUFFIX Lowe	Date Processed	
9 REPORT TYPE	STREET ADDRESS (NO PO BOX PLEASE), APT / SUITE #, CITY, STATE, ZIP CODE 11484 Wentworth Drive Frisco, TX 75035	Date Imaged	
10 PERIOD COVERED	AREA CODE PHONE NUMBER EXTENSION (214) 604-9914	13 OFFICE SOUGHT (if known) FISD Board of Trustees, Place 2	
11 ELECTION	<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)	14 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	
12 OFFICE	OFFICE HELD (if any)	COMMITTEE TYPE COMMITTEE NAME	
13 OFFICE SOUGHT (if known)	ELECTION DATE Month Day Year 5 / 7 / 2022	<input type="checkbox"/> GENERAL	
14 NOTICE FROM POLITICAL COMMITTEE(S)	ELECTION TYPE <input checked="" type="checkbox"/> General <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description	COMMITTEE ADDRESS	
14 NOTICE FROM POLITICAL COMMITTEE(S)	COMMITTEE TYPE <input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME	
14 NOTICE FROM POLITICAL COMMITTEE(S)	COMMITTEE NAME	COMMITTEE CAMPAIGN TREASURER ADDRESS	
GO TO PAGE 2			

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME Marvin Lowe		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)	\$ 672.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 5,932.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE	\$ 989.46
	4. TOTAL POLITICAL EXPENDITURES	\$ 7,213.98
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 401.85
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 1,200.00

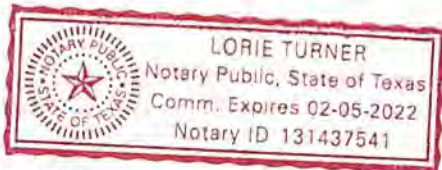
18 SIGNATURE I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP / SEAL

Sworn to and subscribed before me by Marvin B. Lowe this the 29 day of April

20 22 to certify which, witness my hand and seal of office.

Lorie Turner

Lorie Turner

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 Marvin Lowe		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 5,260.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 1,200.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 6,227.52
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

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: 2 of 8
2 FILER NAME Marvin Lowe		3 Filer ID (Ethics Commission Filers)
4 Date 4/9/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Marcia Weslocky 6 Contributor address; City; State; Zip Code 4101 Sicily Drive Frisco TX 75034	7 Amount of contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 4/9/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tami Rowe Contributor address; City; State; Zip Code 12818 Platt Drive Frisco TX 75035	Amount of contribution (\$) \$30.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/9/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Paige Remington Contributor address; City; State; Zip Code 11699 Capitan Lane Frisco TX 75034	Amount of contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/9/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stephani Reazor Contributor address; City; State; Zip Code 1524 Grove Drive Celina TX 75009	Amount of contribution (\$) \$25.00
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

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 2 of 8
2 FILER NAME Marvin Lowe		3 Filer ID (Ethics Commission Filers)
4 Date 4/9/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Marcia Weslocky 6 Contributor address; City; State; Zip Code 4101 Sicily Drive Frisco TX 75034	7 Amount of contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 4/9/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tami Rowe Contributor address; City; State; Zip Code 12818 Platt Drive Frisco TX 75035	Amount of contribution (\$) \$30.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/9/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Paige Remington Contributor address; City; State; Zip Code 11699 Capitan Lane Frisco TX 75034	Amount of contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/9/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stephani Reazor Contributor address; City; State; Zip Code 1524 Grove Drive Celina TX 75009	Amount of contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 3 of 8
2 FILER NAME Marvin Lowe		3 Filer ID (Ethics Commission Filers)
4 Date 4/9/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Audrey McGinnis 6 Contributor address; City; State; Zip Code 4029 Veneto Drive Frisco TX 75033	7 Amount of contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 4/9/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Michelle Milholland Contributor address; City; State; Zip Code 6050 Chamberlyne Dr. Frisco TX 75034	Amount of contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/9/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) John Davis Contributor address; City; State; Zip Code 7404 Seawood Drive Frisco TX 75035	Amount of contribution (\$) \$60.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/9/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stacy Higginbotham Contributor address; City; State; Zip Code 2255 Hague Drive Frisco TX 75033	Amount of contribution (\$) \$30.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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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: 4 of 8
2 FILER NAME Marvin Lowe		3 Filer ID (Ethics Commission Filers)
4 Date 4/10/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Chris Offner 6 Contributor address; City: State: Zip Code 13444 Torrington Drive Frisco TX 75035	7 Amount of contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 4/10/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Frank Harding Contributor address; City: State: Zip Code 2316 Shadabury Drive Little Elm TX 75068	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/10/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Seana Taylor Contributor address; City: State: Zip Code 12298 Kennedale Drive Frisco TX 75033	Amount of contribution (\$) \$30.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/10/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Melanie Royer Contributor address; City: State: Zip Code 5159 Stillwater Trail Frisco TX 75034	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

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 5 of 8
2 FILER NAME Marvin Lowe		3 Filer ID (Ethics Commission Filers)
4 Date 4/10/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Joseph Boduch 6 Contributor address; City; State; Zip Code 11125 Corsicana Drive Frisco TX 75035	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 4/10/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jackie Bell Contributor address; City; State; Zip Code 10984 Star Meadow Drive Frisco TX 75033	Amount of contribution (\$) \$60.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/11/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Megan Brunson Contributor address; City; State; Zip Code 12472 Jack Pine Ct Frisco TX 75035	Amount of contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/11/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Holly Brousseau Contributor address; City; State; Zip Code 5516 Cape Cod Drive Frisco TX 75036	Amount of contribution (\$) \$25.00
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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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 6 of 8
2 FILER NAME Marvin Lowe		3 Filer ID (Ethics Commission Filers)
4 Date 4/15/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) James Jensen 6 Contributor address; City; State; Zip Code 5881 Versailles Avenue Frisco TX 75034	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 4/17/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Christopher Gilbert Contributor address; City; State; Zip Code 11306 Casa Grande Trail Frisco TX 75033	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/17/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mauri Way Contributor address; City; State; Zip Code 5749 Quebec Lane Plano TX 75024	Amount of contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/20/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sandy Sutton Contributor address; City; State; Zip Code 3900 Veneto Drive Frisco TX 75033	Amount of contribution (\$) \$25.00
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

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 7 of 8
2 FILER NAME Marvin Lowe		3 Filer ID (Ethics Commission Filers)
4 Date 4/21/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Michael Roy 6 Contributor address; City; State; Zip Code 120 Ovilla Creek Court Ovilla TX 75154	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 4/21/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Terry Malone Contributor address; City; State; Zip Code 8401 Shakespeare Lane FRISCO TX 75036	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/21/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Amy Mussat Contributor address; City; State; Zip Code 4153 Forest Park Lane Frisco TX 75033	Amount of contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/23/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) David Malechek Contributor address; City; State; Zip Code 8112 Ravenclyff Drive McKinney TX 75070	Amount of contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

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: 8 of 8
2 FILER NAME Marvin Lowe		3 Filer ID (Ethics Commission Filers)
4 Date 4/25/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) CARL FLOWERS 6 Contributor address; City; State; Zip Code 14713 Riverside Drive Little Elm TX 75068	7 Amount of contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> 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 <input type="checkbox"/> 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 <input type="checkbox"/> out-of-state PAC (ID# _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
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.		

LOANS

SCHEDULE E

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 E: 1 of 1
2 FILER NAME Marvin Lowe		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$ 1,200.00
5 Date of loan 4/16/2022	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____) Marvin B. Lowe	9 Loan Amount (\$) 1,200.00
6 Is lender a financial Institution? Y <input checked="" type="checkbox"/> N	8 Lender address: _____ City: _____ State: _____ Zip Code 11484 Wentworth Drive Frisco, TX 75035	10 Interest rate 0
		11 Maturity date 12/31/2022
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input checked="" type="checkbox"/> none		15 <input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address: _____ City: _____ State: _____ Zip Code	
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)
Date of loan	Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____)	Loan Amount (\$)
Is lender a financial Institution? Y <input type="checkbox"/> N	Lender address: _____ City: _____ State: _____ Zip Code	Interest rate
		Maturity date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral <input type="checkbox"/> none		<input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION <input type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address: _____ City: _____ State: _____ Zip Code	
Principal Occupation (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If lender is out-of-state PAC, please see Instruction guide for additional reporting requirements.

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.

1 Total pages Schedule F1: 1 of 2	2 FILER NAME Marvin Lowe	3 Filer ID (Ethics Commission Filers)
4 Date 4/29/2022	5 Payee name Axiom Strategies	
6 Amount (\$) 3,757.00	7 Payee address, City, State, Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Mailer
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 4/29/2022	Payee name First Graphic Services	
Amount (\$) \$554.24	Payee address, City, State, Zip Code 229 Garvon St, Garland, TX 75040	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	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 Office held
Date 4/7/2022	Payee name Vistaprint	
Amount (\$) \$301.11	Payee address, City, State, Zip Code 275 Wyman Street Waltham, MA 02451	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Shirts, Etc
	<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 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	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	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 2 of 2	2 FILER NAME Marvin Lowe	3 Filer ID (Ethics Commission Filers)
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4 Date 4/25/2022	5 Payee name First Graphics Services
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6 Amount (\$) \$285.78	7 Payee address; 229 Garvon St, Garland, TX 75040	City;	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Signs
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/22/2022	Payee name First Graphics Services
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Amount (\$) \$772.15	Payee address; 229 Garvon St, Garland, TX 75040	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	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	Office held
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Date 4/6/2022	Payee name First Graphics Services
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Amount (\$) \$554.24	Payee address; 229 Garvon St, Garland, TX 75040	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	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	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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:
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Scott Brooke	7 Amount of contribution (\$) \$25.00
4/3/2022	6 Contributor address; City; State; Zip Code 15581 Crown Cove Lane Frisco, TX 75035	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Vickie Costa	Amount of contribution (\$) \$50.00
4/6/2022	Contributor address; City; State; Zip Code 10521 Chablis Lane Frisco TX 75035	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mike Draper	Amount of contribution (\$) \$30.00
4/9/2022	Contributor address; City; State; Zip Code 6410 Birkdale Lane Frisco TX 75035	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kevin Ayres	Amount of contribution (\$) \$40.00
4/9/2022	Contributor address; City; State; Zip Code 6043 Star Mesa Dr. Frisco TX 75034	
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.		