CORRECTION AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER DAILY PRE-ELECTION REPORT

FORM COR-DAILY-C C/OH

Filer ID (Ethics Co	mmission Filers)	2 Total pages filed: 7		OFFIC	CE USE ONLY
CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR MT. NICKNAME	FIRST Mark LAST Hill	I	nectiv	1 0 2023
DATE ORIGINAL REPORT FILED	Month 04 / 0	Day Yoar 06 / 2023			ered or Date Postmark
EXPLANATION C	F CORRECTION			Receipt #	Amount \$
Revision to inc	lude contributor ac	ldresses to Schedule A	1 of the	Date Processed	
previously filed	30 Day Campaign	Finance Report.		Date Imaged	
AFFIDAVIT		I swear correcte	or affirm, unde	er penalty of perjun	y, that this
AFFIDAVIT	DONNA M. DANII	correcte	or affirm, unde	er penalty of perjunand correct.	y, that this
AFFIDAVIT		ELS f Texas 3-2025	d report is true	er penalty of perjunand correct.	
AFFIX NOTARY STAM	DONNA M. DANII Notary Public, State o Comm. Expires 04-13 Notary ID 122496	ELS f Texas 3-2025	d report is true	and correct.	
AFFIX NOTARY STAM	DONNA M. DANII Notary Public, State o Comm. Expires 04-13 Notary ID 122496	ELS f Texas 3-2025	d report is true	and correct.	der
AFFIX NOTARY STAM	DONNA M. DANII Notary Public, State o Comm. Expires 04-13 Notary ID 122496	ELS f Texas 3-2025	Signature of	and correct. Candidate or Officehold	

Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections

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	
2 FILER NAME MARK HIL	_L				3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of contribution (\$)	
02/16/2023	6 Contributor address;	City; State; Zip Code		Zip Code	195.24
	10141 CALVERY CT.	FRISCO) TX	75035	.00121
8 Principal occu	pation / Job title (See Instructions)		9 Employ	yer (See Instruct	ions)
Date	Full name of contributor PAIGE HOES	out-of-state PAC	C (ID#:		Amount of contribution (\$)
02/22/2023	Contributor address;	City;	State;	Zip Code	48.25
	2701 PATTON DR ME	MELISSA TX 75454		75454	10.20
Principal occup	pation / Job title (See Instructions)		Employ	yer (See Instruct	ions)
Date	Full name of contributor out-of-state PAC (ID#:) Amour			Amount of contribution (\$)	
02/20/2003	JAMES HARPER		115 05		
	Contributor address; City; State; Zip Code 2905 CATTLE BARON DR LITTLE ELM TX 75068			145.05	
Principal occur	pation / Job title (See Instructions)	IN CIT ICC I	1	yer (See Instruct	lone
, mopul seed	sandir 7000 tillo (000 mattections)		Limple	yer (Oee manuci	
Date	Full name of contributor	out-of-state PAG	C (ID#:		Amount of contribution (\$)
03/06/2023	JAMES PIKL Contributor address;	City	Ctata:	7 - C-d-	250.00
(1)	505 ANGLETON CT.	City;		75071	250.00
Principal occup	pation / Job title (See Instructions)			yer (See Instruct	ions)
7	ATTACH ADDITIO	NAI CODIES	UE This so	HEDIII E AS N	EEDED
	If contributor is out-of-state PAC, p	Simunamananana - Sizara di		경기 경기를 보고 있다면 맛이 맛이 없는데 가지 않는데	

SCHEDULE A1

The	Instruction Guide explains how to complete this	1 Total pages Schedule A1: 5	
2 FILER NAME MARK HILL			3 Filer ID (Ethics Commission Filers)
4 Date 03/08/2023	5 Full name of contributor out-of-state PAC MICHAEL ARTHUR 6 Contributor address; City: 15600 BIG HORN TRL. FRISCO	State; Zip Code	7 Amount of contribution (\$) 970.70
B Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ons)
Date	Full name of contributor out-of-state PAC (IDII:) MEGAN NGUYEN-TRINH		Amount of contribution (\$) 500.00
03/08/2023	Contributor address; City; 12055 KINGSVILLE DR. FRISC		
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor out-of-state PAC (ID#:)		Amount of contribution (\$)
03/11/2023	Contributor address; City; 8649 SCOTT CIR. FRISCO	State; Zip Code	51.38
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor out-of-state PAC (ID#:) PADMA SRINIVASAN		Amount of contribution (\$)
03/11/2023	Contributor address; City; 13271 KETTLE CAMP RD, FRISCO	State; Zip Code TX 75035	51.38
	THE COUNTY OF THE PROPERTY OF	Employer (See Instruct	

SCHEDULE A1

The	Instruction Guide explains how to complete this	1 Total pages Schedule A1: 5	
2 FILER NAME MARK HILL			3 Filer ID (Ethics Commission Filers)
4 Date 03/13/2023	5 Full name of contributor out-of-state PAC DARYL W. MCCONNELL 6 Contributor address; City; 15741 BIG HORN TRL. FRISCO	7 Amount of contribution (\$) 50.00	
B Principal occup	pation / Job title (See Instructions)	9 Employer (See Instruction	ons)
Date 03/15/2023	Full name of contributor out-of-state PAC JOSH CHANDLER Contributor address; City; 12 COWBOYS WAY FRISCO	State; Zip Code	Amount of contribution (\$) 1,000.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ons)
Date 03/17/2023	Full name of contributor out-of-state PAC (ID#:) MICHAEL SIMMONS Contributor address; City; State; Zip Code 2929 CATTLE BARON DR. LITTLE ELM TX 75068		Amount of contribution (\$) 102.75
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ons)
Date 03/19/2023	Full name of contributor SHANA WORTHAM Contributor address; City; 591 AMISTAD DR. PROSPER	State; Zlp Code	Amount of contribution (\$) 51.38
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
rancipal occup		Employer (See instruction	ons)

SCHEDULE A1

	Instruction Guide explains how to complete this form.	1 lotal pages Schedule A1: 5
FILER NAME MARK HII		3 Filer ID (Ethics Commission Filers)
Date	5 Full name of contributor out-of-state PAC (ID#: JOSHUA INGRAM	7 Amount of contribution (\$)
3/19/2023	6 Contributor address; City; State	Zip Code 102.75
	7113 EDWARDS RD. DENTON TX	76208
Principal occu	pation / Job title (See Instructions) 9 Em	ployer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
3/25/2023	ERIN MILLER	6120
	Contributor address; City; State 1817 TUMBLEGRASSRD. FRISCO	
Principal occu	The substitution of the su	ployer (See Instructions)
Dale	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
3/26/2023	JUDY ADAMS	F00.00
1312012023	Contributor address; City; State	zip Code 500.00
	8810 COLEMAN BLVD. FRISCO TX	75034
Principal occu	pation / Job title (See Instructions) Em	ployer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
03/28/2023	MICHAEL STEVENS	F4 00
00/20/2020		51.38
	6842 BARNES DR FRISCO T.	X 75034
Principal occu	pation / Job title (See Instructions) En	ployer (See Instructions)

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

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The	Instruction Guide explains how to complete this f	1 Total pages Schedule A1: 5			
2 FILER NAME MARK HIL	_L	3 Filer ID (Ethics Commission Filers)			
4 Date 03/28/2023	ROBERT ALLEN	State; Zip Code	7 Amount of contribution (\$) 102.75		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)		
Date	Acceptation and the Company of the C	(ID#:)	Amount of contribution (\$)		
	Contributor address; City;				
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)		
Date	Full name of contributor out-of-state PAC (ID#:		Amount of contribution (\$)		
	Contributor address; City;	State; Zip Code			
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	lions)		
Date	Full name of contributor out-of-state PAC ((ID#:)	Amount of contribution (\$)		
	Contributor address; City;	State; Zip Code			
Principal occup	pation / Job title (See Instructions)	Employer (See Instruc	tions)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.					