

# SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM SPAC  
COVER SHEET PG 1

<b>The SPAC Instruction Guide explains how to complete this form.</b>		<b>1</b> Filer ID (Ethics Commission Filers) 00087441	<b>2</b> Total pages filed: 10
<b>3</b> COMMITTEE NAME Vote FOR Crowley ISD		<b>OFFICE USE ONLY</b>	
		Date Received <b>ELECTRONICALLY FILED</b> 07/15/2023	
<b>4</b> COMMITTEE ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 5309 McPherson Blvd., Ste. 150 Bx 189 Fort Worth, TX 76123		
	Date Hand-delivered or Date Postmarked		
	Receipt #	Amount	
	Date Processed		
		Date Imaged	
<b>5</b> CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mrs. Denise		
	NICKNAME LAST SUFFIX Turner		
<b>6</b> CAMPAIGN TREASURER STREET ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 5108 Cedar Brush Drive Fort Worth, TX 76123		
<b>7</b> CAMPAIGN TREASURER MAILING ADDRESS  <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 53009 McPherson Blvd., Ste. 150 Bx 189 Fort Worth, TX 76123		
<b>8</b> CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (410) 925-2285		
<b>9</b> REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Exceeded modified reporting limit <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input checked="" type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> Runoff <input type="checkbox"/> 10th day after campaign treasurer termination		
<b>10</b> PERIOD COVERED	Month Day Year      THROUGH      Month Day Year 04/27/2023      07/15/2023		
<b>11</b> ELECTION	ELECTION DATE Month Day Year 05/06/2023	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	

**GO TO PAGE 2**

# SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **SPAC**  
COVER SHEET PG 2

<b>12 COMMITTEE NAME</b> Vote FOR Crowley ISD		<b>13 Filer ID</b> (Ethics Commission Filers) 00087441																			
<b>14 COMMITTEE PURPOSE</b>  (Attach lists on plain paper to complete this report if necessary.)  <input checked="" type="checkbox"/> <b>SUPPORT</b> (Candidate or Measure)  <input type="checkbox"/> <b>OPPOSE</b> (Candidate or Measure)  <input type="checkbox"/> <b>ASSIST</b> (Officeholder)	<input type="checkbox"/> Candidate  <input type="checkbox"/> Officeholder	<b>CANDIDATE / OFFICEHOLDER NAME</b>  <hr/> <b>OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)</b>  <hr/> <b>BALLOT IDENTIFICATION / #</b> 0087441 <table style="float: right; margin-left: 20px;"> <tr> <td colspan="3"><b>ELECTION DATE</b></td> </tr> <tr> <td>Month</td> <td>Day</td> <td>Year</td> </tr> <tr> <td colspan="3">05/06/2023</td> </tr> </table> <hr/> <b>DESCRIPTION</b> VOTE FOR CROWLEY ISD BOND PROP A, B, C	<b>ELECTION DATE</b>			Month	Day	Year	05/06/2023												
	<b>ELECTION DATE</b>																				
	Month	Day	Year																		
05/06/2023																					
<input checked="" type="checkbox"/> Measure	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:70%;"><b>15 CONTRIBUTION TOTALS</b></td> <td style="width:30%; text-align: right;"><b>\$ 0.00</b></td> </tr> <tr> <td style="border-top: 1px solid black;"><b>1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY), UNLESS ITEMIZED</b></td> <td style="border-top: 1px solid black; text-align: right;">\$ 0.00</td> </tr> <tr> <td style="border-top: 1px solid black;"><b>2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)</b></td> <td style="border-top: 1px solid black; text-align: right;">\$ 45,000.00</td> </tr> <tr> <td style="border-top: 1px solid black;"><b>EXPENDITURE TOTALS</b></td> <td style="border-top: 1px solid black; text-align: right;"><b>\$ 0.00</b></td> </tr> <tr> <td style="border-top: 1px solid black;"><b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b></td> <td style="border-top: 1px solid black; text-align: right;">\$ 0.00</td> </tr> <tr> <td style="border-top: 1px solid black;"><b>4. TOTAL POLITICAL EXPENDITURES</b></td> <td style="border-top: 1px solid black; text-align: right;">\$ 36,591.08</td> </tr> <tr> <td style="border-top: 1px solid black;"><b>CONTRIBUTION BALANCE</b></td> <td style="border-top: 1px solid black; text-align: right;"><b>\$ 0.00</b></td> </tr> <tr> <td style="border-top: 1px solid black;"><b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b></td> <td style="border-top: 1px solid black; text-align: right;">\$ 0.00</td> </tr> <tr> <td style="border-top: 1px solid black;"><b>OUTSTANDING LOAN TOTALS</b></td> <td style="border-top: 1px solid black; text-align: right;"><b>\$ 0.00</b></td> </tr> <tr> <td style="border-top: 1px solid black;"><b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b></td> <td style="border-top: 1px solid black; text-align: right;">\$ 0.00</td> </tr> </table>	<b>15 CONTRIBUTION TOTALS</b>	<b>\$ 0.00</b>	<b>1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY), UNLESS ITEMIZED</b>	\$ 0.00	<b>2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)</b>	\$ 45,000.00	<b>EXPENDITURE TOTALS</b>	<b>\$ 0.00</b>	<b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>	\$ 0.00	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 36,591.08	<b>CONTRIBUTION BALANCE</b>	<b>\$ 0.00</b>	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 0.00	<b>OUTSTANDING LOAN TOTALS</b>	<b>\$ 0.00</b>	<b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 0.00
<b>15 CONTRIBUTION TOTALS</b>	<b>\$ 0.00</b>																				
<b>1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY), UNLESS ITEMIZED</b>	\$ 0.00																				
<b>2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)</b>	\$ 45,000.00																				
<b>EXPENDITURE TOTALS</b>	<b>\$ 0.00</b>																				
<b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>	\$ 0.00																				
<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 36,591.08																				
<b>CONTRIBUTION BALANCE</b>	<b>\$ 0.00</b>																				
<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 0.00																				
<b>OUTSTANDING LOAN TOTALS</b>	<b>\$ 0.00</b>																				
<b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 0.00																				

**16 AFFIDAVIT**

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.

\_\_\_\_\_  
 Mrs. Denise Turner  
 Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

\_\_\_\_\_  
 Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath

# SUBTOTALS - SPAC

<b>17 COMMITTEE NAME</b> Vote FOR Crowley ISD	<b>18 Filer ID</b> (Ethics Commission Filers) 00087441
--------------------------------------------------	-----------------------------------------------------------

<b>19 SCHEDULE SUBTOTALS</b>		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1. <input checked="" type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 45,000.00
2. <input type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3. <input type="checkbox"/>	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. <input type="checkbox"/>	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5. <input type="checkbox"/>	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6. <input type="checkbox"/>	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
7. <input type="checkbox"/>	SCHEDULE E: LOANS	\$
8. <input checked="" type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 36,591.08
9. <input type="checkbox"/>	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
10. <input type="checkbox"/>	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
11. <input type="checkbox"/>	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
12. <input type="checkbox"/>	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
13. <input checked="" type="checkbox"/>	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 21,340.54
14. <input type="checkbox"/>	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/3 Rpt: 4/10
<b>2</b> FILER NAME Vote FOR Crowley ISD		<b>3</b> Filer ID (Ethics Commission Filers) 00087441
<b>4</b> Date 05/03/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) BASDEN STEEL CORPORATION	<b>7</b> Amount of Contribution (\$) \$3,000.00
<b>6</b> Contributor address; City; State; Zip Code  BURLESON, TX 76097		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 05/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) CORE CONSTRUCTION SERVICES OF TX INC	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code  FRISCO, TX 75070		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) HAMMETT EXCAVATION, INC.	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code  DODD CITY, TX 75438		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) KELLAND & COMPANY PAINTING, LLC	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code  DALLAS, TX 76133		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) L.A. FUESS PARTNERS STRUCTURAL ENGINEERS	Amount of Contribution (\$) \$6,000.00
Contributor address; City; State; Zip Code  DALLAS, TX 75219		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/3 Rpt: 5/10
<b>2</b> FILER NAME Vote FOR Crowley ISD		<b>3</b> Filer ID (Ethics Commission Filers) 00087441
<b>4</b> Date 05/03/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) MUNOZ FLOORING SOLUTIONS, INC. <hr/> <b>6</b> Contributor address; City; State; Zip Code  DALLAS, TX 75220-1502	<b>7</b> Amount of Contribution (\$)  \$2,500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 05/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) PRECISION DEMOLITION, LP <hr/> Contributor address; City; State; Zip Code  LEWISVILLE, TX 75057-4406	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) PROGRESSIVE SERVICES INC <hr/> Contributor address; City; State; Zip Code  DUNCANVILLE, TX 75137	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) RAM CONCRETE & ASPHALT, LLC <hr/> Contributor address; City; State; Zip Code  LEWISVILLE, TX 75057	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) RWB CONSULTING ENGINEERS <hr/> Contributor address; City; State; Zip Code  DALLAS, TX 75243	Amount of Contribution (\$)  \$2,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/3 Rpt: 6/10
<b>2</b> FILER NAME Vote FOR Crowley ISD		<b>3</b> Filer ID (Ethics Commission Filers) 00087441
<b>4</b> Date 05/03/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) STEELE & FREEMAN, INC CONSTRUCTION FUND <hr/> <b>6</b> Contributor address; City; State; Zip Code  FORT WORTH, TX 76131	<b>7</b> Amount of Contribution (\$)  \$10,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 05/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) WADE V. & MRS. NICOLE S., BLAKE (Mr.) <hr/> Contributor address; City; State; Zip Code  FRISCO, TX 75035-7671	Amount of Contribution (\$)  \$2,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) WILLIS COMMERCIAL PAINTING, LLC <hr/> Contributor address; City; State; Zip Code  WHITE SETTLEMENT, TX 76108	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**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.

<b>1</b> Total pages Schedule F1: Sch: 1/2 Rpt: 7/10	<b>2</b> FILER NAME Vote FOR Crowley ISD	<b>3</b> Filer ID (Ethics Commission Filers) 00087441
---------------------------------------------------------	---------------------------------------------	----------------------------------------------------------

<b>4</b> Date 05/06/2023	<b>5</b> Payee name BOO-RAY'S OF NEW ORLEANS
-----------------------------	-------------------------------------------------

<b>6</b> Amount (\$) \$1,022.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 315 E. MAIN STREET President-Summer Creek South HOA CROWLEY, TX 76123
-----------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ELECTION NIGHT RESULTS COMMUNITY EVENT
---------------------------------	------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---------------------------------------------------------------------	-----------------------------	---------------	-------------

Date 05/05/2023	Payee name FNA SHIRTS, SIGNS, AND MORE
--------------------	-------------------------------------------

Amount (\$) \$351.81  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1700 FM 1187  CROWLEY, TX 76036
------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 25 PAC T-SHIRTS VOTE FOR CROWLEY ISD
-------------------------------	------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

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

Date 05/04/2023	Payee name KC STRATEGIES, LLC
--------------------	----------------------------------

Amount (\$) \$7,610.92  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3571 FAR WEST BLVD  AUSTIN, TX 78731
--------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Polling Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MMS TEXT ON 05/05 & 05/06 TO CELL #S IN CISD
-------------------------------	--------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

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

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**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.

<b>1</b> Total pages Schedule F1: Sch: 2/2 Rpt: 8/10	<b>2</b> FILER NAME Vote FOR Crowley ISD	<b>3</b> Filer ID (Ethics Commission Filers) 00087441
---------------------------------------------------------	---------------------------------------------	----------------------------------------------------------

<b>4</b> Date 05/05/2023	<b>5</b> Payee name PRO PUBLIC EDUCATION
-----------------------------	---------------------------------------------

<b>6</b> Amount (\$) \$26,356.35  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 3101 W 6TH STREET SUITE 470771 FORT WORTH, TX 76147
------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense BOND HANDOUT, 18X24 SIGNS, 4X4 ROAD SIGNS, SOCIAL MEDIA GRAPHIC, MAILER # 1 &
---------------------------------	------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---------------------------------------------------------------------	-----------------------------	---------------	-------------

Date 05/16/2023	Payee name SOLOSOMBRA
--------------------	--------------------------

Amount (\$) \$1,250.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2525 SUNSET AVENUE  DALLAS, TX 75211
--------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PLACE, REMOVE AND DISPOSE OF 25 LARGE 4 X 4 SIGNS
---------------------------------	------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

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

--	--	--	--



# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 1/1 Rpt: 9/10	2 FILER NAME Vote FOR Crowley ISD	3 Filer ID (Ethics Commission Filers) 00087441
4 Date 06/30/2023	5 Payee name CASA MANANA	
6 Amount (\$)  5,000.00	7 Payee Address; City; State; Zip 3101 WEST LANCASTER AVENUE C/O JESSICA WALSH FORT WORTH, TX 76107	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) DONATION TO NON-PROFIT	(b) Description (See instructions regarding type of information required.) DONATION MADE TO YOUTH EDUCATION PROGRAM AT CASA MANANA THEATRE
Date 07/14/2023	Payee name COMO LION HEART INC	
Amount (\$)  1,000.00	Payee Address; City; State; Zip 4660 HORNE STREET  FORT WORTH, TX 76107	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) DONATION MADE TO NON PROFIT ORGANIZATION	(b) Description (See instructions regarding type of information required.) DONATION MADE TO YOUTH EDUCATION PROGRAM TO COMO LION HEART, INC.
Date 07/14/2023	Payee name FORT WORTH FIREFIGHTERS CHARITIES	
Amount (\$)  15,340.54	Payee Address; City; State; Zip 3855 TULSA WAY  FORT WORTH, TX 76107	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) DONATION MADE TO NON PROFIT ORGANIZATION	(b) Description (See instructions regarding type of information required.) DONATION MADE TO SUPPORT FW FIREFIGHTERS.

**POLITICAL COMMITTEE  
AFFIDAVIT OF DISSOLUTION**

**FORM PAC-DR**

10 of 10

The Instruction Guide explains how to complete this form. **\*\*Complete only if "Report Type" on page 1 is marked "Dissolution" \*\***

1 COMMITTEE NAME Vote FOR Crowley ISD	2 Filer ID (Ethics Commission Filers) 00087441
------------------------------------------	---------------------------------------------------

**3 Affidavit of Dissolution**

I, the undersigned campaign treasurer, do not expect the occurrence of any further reportable activity by this political committee for this or any other campaign or election for which reporting under the Election Code is required. I declare that all of the information required to be reported by me has been reported. I understand that designating a report as a dissolution report terminates the appointment of campaign treasurer. I further understand that a political committee may not make or authorize political expenditures or accept political contributions without having an appointment of campaign treasurer on file.

Mrs. Denise Turner  
\_\_\_\_\_  
Signature of Campaign Treasurer

**DO NOT SIGN UNLESS POLITICAL COMMITTEE IS TO BE DISSOLVED**

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

\_\_\_\_\_  
Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath