SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM SPAC COVER SHEET PG 1

The SPAC Instruction Guide explains how to complete this form. 1 Filer ID (Ethics Commission Filers) 00084963 2 Total pages filed: 22										
3 COMMITTEE NAME		OFFICE USE ONLY								
Vote Yes Garland										
		Date Received ELECTRONICALLY FILED 12/27/2023								
4 COMMITTEE	ADDRESS / PO BOX; APT / SUITE #;	CITY;	STATE; ZIP CO	ODE						
ADDRESS	P O Box 460353				Date Hand-delivered or Date Postmarked					
Change of Address										
Change of Address	Garland, TX 75046				Receipt # Amount					
					Date Processed					
					Date Imaged					
5 CAMPAIGN	MS/MRS/MR FIRST				MI					
TREASURER	Mr. Ricky									
NAME										
	NICKNAME LAST				SUFFIX					
	McNeal				30111X					
	Mortear									
6 CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE	=).	APT / SUITE #;	CITY;	; STATE; ZIP CODE					
TREASURER	1813 Lantana Dr.	_),	Ar 17 30112 <i>#</i> ,	CITT,	, 31412, 21 0002					
STREET ADDRESS	1010 Lanana Dr.									
(Residence or Business)	Corlord TV 75046									
	Garland, TX 75046									
7 CAMPAIGN TREASURER	STREET OR PO BOX;		APT / SUITE #;	CITY;	; STATE; ZIP CODE					
MAILING	PO Box 460353									
ADDRESS										
Change of Address	Garland, TX 75046									
8 CAMPAIGN	AREA CODE PHONE NUMBER	EX	TENSION							
TREASURER PHONE	(214) 500-0184									
9 REPORT TYPE	January 15	30th da	ay before election		Exceeded modified reporting limit					
		8th day	before election		Dissolution (Attach PAC-DR)					
	X July 15	-								
		Runoff			10th day after campaign treasurer termination					
10 PERIOD	Month Day Year		Month	ı Da	ay Year					
COVERED	01/01/2023	THR	DUGH	06/30/	/2023					
11 ELECTION	ELECTION DATE		ELECTION TYPE							
		Primary	/ Runoff		Other					
	05/06/2023	Genera	l Special							
	GO TO PAGE 2									
Forms provided by Te	xas Ethics Commission www	.ethic	s.state.tx.us		Version V3.5.1.cb18382					

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM SPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers	3)		
Vote Yes Garland ISD			00084963				
14 COMMITTEE		CANDIDATE / OFFICEHOLDER NAME					
PURPOSE							
(Attach lists on plain							
paper to complete this	Candidate						
report if necessary.)	Officeholder	OFFICE SOUGHT (candidate) / OFFICE HELI	D (officeholder)				
X SUPPORT		BALLOT IDENTIFICATION / #	ELECTI	ON DATE			
(Candidate or Measure)		BALLOT IDENTIFICATION / #	Month	Day Year			
OPPOSE			05/06/2	,			
(Candidate or Measure)	—		00/00/2	-020			
ASSIST	X Measure	DESCRIPTION					
(Officeholder)		Proposition A - Safety Enhancement					
15 CONTRIBUTION TOTALS		RIBUTIONS OF \$50 OR LESS (OTHER THAN ES OF LOANS, OR CONTRIBUTIONS MADE	I PLEDGES,				
TOTALS	ELECTRONICALLY), UNI			\$ \$0.	.00		
	2. TOTAL POLITICAL CO						
		\$ \$137,200.	.00				
		S, LOANS, OR GUARANTEES OF LOANS)		+			
EXPENDITURE	IDITURE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES						
TOTALS				\$ \$0.	.00		
	4. TOTAL POLITICAL EX	(PENDITURES		\$ \$115,188.	65		
				φ φ115,100.	.05		
	5. TOTAL POLITICAL CONT	RIBUTIONS MAINTAINED AS OF THE LAST	DAY OF THE				
BALANCE	REPORTING PERIOD			\$ \$32,632.	.24		
L							
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMO DAY OF THE REPORTIN	UNT OF ALL OUTSTANDING LOANS AS OF T	HE LAST				
LOAN TOTALS	DAT OF THE REPORTIN	GPERIOD		\$\$0.	.00		
16 AFFIDAVIT					_		
		I swear, or affirm, under penalty of perju and correct and includes all information			;		
		Title 15, Election Code.					
		Mr. Rick	y McNeal				
		Signature of Car		er	-		
AFFIX NOTARY	STAMP / SEAL ABOVE	- 9					
Sworn to and subscribed	nis the	day					
of							
		-					
Signature of officer ad	ministering oath Drint	ed name of officer administering oath	Title of office	er administering oath	-		
Signature of onicer au		ca hame of one ca annulistening bath		a anninistering bath			

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE

FORM SPAC ADDENDUM

			Page 3 of 22				
12 COMMITTEE NAME			13 Filer ID (Ethics Commission Filers)				
Vote Yes Garland ISD			00084963				
14 COMMITTEE PURPOSE		CANDIDATE / OFFICE HOLDER NAME	1				
(Attach lists on plain paper to complete this							
report if necessary.) X SUPPORT (Candidate or Measure)		OFFICE SOUGHT (candidate) / OFFICE HEL	LD (officeholder)				
OPPOSE (Candidate or Measure)	X MEASURE	BALLOT IDENTIFICATION	ELECTION DATE MONTH DAY YEAR 05/06/2023				
ASSIST (Officeholders only) DESCRIPTION Proposition B - Multi-Program Activity Centers							
COMMITTEE PURPOSE		CANDIDATE / OFFICE HOLDER NAME					
(Attach lists on plain paper to complete this							
report if necessary.) X SUPPORT (Candidate or Measure)		OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)					
OPPOSE (Candidate or Measure)	X MEASURE	BALLOT IDENTIFICATION	ELECTION DATE MONTH DAY YEAR 05/06/2023				
ASSIST (Officeholders only)		DESCRIPTION Proposition C - Technology Device Refre	esh				

SUBTOTALS - SPAC	FORM SPAC	
	CC	OVER SHEET PG 3 4 of 22
17 COMMITTEE NAME Vote Yes Garland ISD	18 Filer ID 00084963	(Ethics Commission Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT	
1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 137,200.00	
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO	R	\$
5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA	ATION OR	\$
6. SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR C	ORGANIZATION	\$
7. SCHEDULE E: LOANS		\$
8. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 115,188.65	
9. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
10. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
11. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
12. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$
13. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	ONS	\$
14. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instr	uction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 1/7 Rpt: 5/22	
2 FILER NAM	=		3 Filer ID (Ethics Commission	on Filore)
	⊑ Garland ISD		00084963	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
4 Date 04/11/2023				\$1,500.00
	6 Contributor address; City; State; Zip Code			Ψ1,000.00
	ТХ			
8 Principal occ	cupation / Job title (See Instructions)	9 Employer (See Instructions)	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
04/28/2023				\$2,000.00
	Contributor address; City; State; Zip Code			
	Plano, TX 75093			
Principal occ	cupation / Job title (See Instructions)	Employer (See Instructions)	
Filicipal occ)	
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	
04/11/2023				\$3,000.00
0-11 = 1, = 0 = 1				ψ0,000.02
	Burleson, TX 76028			
Principal occ	cupation / Job title (See Instructions)	Employer (See Instructions)	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
04/11/2023	CORE Construction Services of TX, Inc.			\$5,000.00
	Contributor address; City; State; Zip Code			
	Frisco, TX 75033			
Principal occ	cupation / Job title (See Instructions)	Employer (See Instructions)	
1 1110104. 4.2.)	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
04/11/2023			Amount of Contribution (+)	\$1,000.00
	Contributor address; City; State; Zip Code			• •
	······································			
	Carrollton, TX 75006			
Principal occ	cupation / Job title (See Instructions)	Employer (See Instructions)	

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 2/7 Rpt: 6/22 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Vote Yes Garland ISD 00084963 5 Full name of contributor 4 Date out-of-state PAC (ID#: 7 Amount of Contribution (\$) 04/12/2023 Commit - Invoice 03232023 \$40,000.00 6 Contributor address; City; State; Zip Code TX 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 05/09/2023 Corgan Associates, INC. \$2,000.00 Contributor address; City; State; Zip Code Dallas, TX 75202 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date 05/09/2023 EMA Engineering & Consulting \$2,500.00 Contributor address; City; State; Zip Code Tyler, TX 75702 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 03/24/2023 \$5,000.00 Garland Chamber of Commerce Contributor address; City; State; Zip Code Garland, TX 75040 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#:_ \$5,000.00 04/28/2023 Glenn Partners (Patrick Glen) Contributor address; City; State; Zip Code Dallas, TX 75206 Principal occupation / Job title (See Instructions) Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 3/7 Rpt: 7/22 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Vote Yes Garland ISD 00084963 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 04/11/2023 Gold Smith Construction \$1,000.00 6 Contributor address; City; State; Zip Code Keller, TX 76244 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 04/11/2023 H & G Systems \$2,500.00 Contributor address; City; State; Zip Code Garland, TX 75042 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 04/25/2023 Harrison Komberg (Architect - Daniel Komberg) \$2,500.00 Contributor address; City; State; Zip Code Houston, TX 77098 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 04/25/2023 Harrison Komberg (Architect - James Harrison) \$2,500.00 Contributor address; City; State; Zip Code Houston, TX 77098 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 04/11/2023 \$1,000.00 Infinity Sound Contributor address; City; State; Zip Code Mansfield, TX 76063 Principal occupation / Job title (See Instructions) Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 4/7 Rpt: 8/22 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Vote Yes Garland ISD 00084963 Date 5 Full name of contributor 4 out-of-state PAC (ID#: 7 Amount of Contribution (\$) 04/11/2023 J & E Companies \$2,000.00 6 Contributor address; City; State; Zip Code Grand Prairie, TX 75050 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 04/11/2023 \$500.00 JDS Construction Contributor address; City; State; Zip Code Frisco, TX 75033 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 04/11/2023 Legacy Electrical Services \$2,000.00 Contributor address; City; State; Zip Code Carrollton, TX 75006 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 04/11/2023 **NEU Plumbing** \$1,500.00 Contributor address; City; State; Zip Code Pilot Point, TX 76258 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 04/11/2023 \$1,000.00 One Source Services Contributor address; City; State; Zip Code Plano, TX 75074 Principal occupation / Job title (See Instructions) Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 5/7 Rpt: 9/22 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Vote Yes Garland ISD 00084963 Date 4 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 04/28/2023 Orcutt Winslow (Erik Clinite) \$5,000.00 6 Contributor address; City; State; Zip Code Irving, TX 75039 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 05/09/2023 PBK, Inc. \$5,000.00 Contributor address; City; State; Zip Code Dallas, TX 75240 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 03/10/2023 Pfluger Architects, Inc. \$12,000.00 Contributor address; City; State; Zip Code Dallas, TX 75202 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 04/28/2023 \$5,000.00 Procedeo (Account Manager) Contributor address; City; State; Zip Code Ft. Worth, TX 76107 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 04/11/2023 \$2,000.00 **Progressive Services** Contributor address; City; State; Zip Code Phoenix, AZ 85009 Principal occupation / Job title (See Instructions) Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 6/7 Rpt: 10/22 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Vote Yes Garland ISD 00084963 5 Full name of contributor 4 Date out-of-state PAC (ID#: 7 Amount of Contribution (\$) 04/11/2023 **RPMX** Construction \$1,500.00 6 Contributor address; City; State; Zip Code McKinney, TX 75070 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 04/28/2023 RWB Consulting Engrs \$1,200.00 Contributor address; City; State; Zip Code Dallas, TX 75251 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#:_ 04/11/2023 SFS Security Fire Sys Inc \$1,000.00 Contributor address; City; State; Zip Code Coppell, TX 75019 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 03/30/2023 \$5,000.00 Stantec Consulting Contributor address; City; State; Zip Code Plano, TX 75024 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 04/11/2023 Versatile Industries \$2,500.00 Contributor address; City; State; Zip Code TX Principal occupation / Job title (See Instructions) Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 7/7 Rpt: 11/22 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Vote Yes Garland ISD 00084963 Amount of Contribution (\$) 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 03/17/2023 WRA Architects Inc. \$10,000.00 6 Contributor address; City; State; Zip Code Dallas, TX 75251 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 04/11/2023 \$1,500.00 Welch HVAC Contributor address; City; State; Zip Code Lewisville, TX 75057 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#:) 04/11/2023 Wright Construction \$2,000.00 Contributor address; City; State; Zip Code ТΧ Principal occupation / Job title (See Instructions) Employer (See Instructions)

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment						Travel in District Travel Out of Dis	quipment & Related Expense				
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commission Filers)	
	Sch: 1/11 Rpt: 12/22		Vote Yes Garlar	nd ISD					00084963		
4	Date	5	Payee name								
	04/25/2023		Anedot - Transmission Fee - D. Kornberg								
6	Amount (\$)	7	Payee address; City; State; Zip Code								
	\$100.30										
			ТХ								
8	PURPOSE OF	(a)	Category (See Cate	egories listed at the top	o of this sche	edule)	(b) Description				
	EXPENDITURE		Fees						ide of Texas. Com		
									, officeholder living mission fee.	expense	
							LIECTIONIC	uansi	mission iee.		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeho	der name	C	Dffice sou	ght		Office he	eld	
	Date		Payee name								
	04/28/2023		Anedot - Transn	nission Fee - E.	Clinite						
	Amount (\$)		Payee address;	City;	State [.]	Zip Co	de				
	\$200.30			eny,	etato,	p 00					
			ТХ								
	PURPOSE	(a)	Category (See Cate	egories listed at the top	o of this sche	edule)	(b) Descriptior				
	OF EXPENDITURE		Fees						ide of Texas. Com		
									, officeholder living	expense	
							Electronic	transi	mission fee.		
	Complete ONLY if direct		Candidate/Officeho	dor nomo		Office sou	vb+		Office he	Nd	
	expenditure to benefit C/OI		andidate/Onicend	del name	C	JIIICE SOU	JIIC		Once ne		
	Date		Payee name								
	04/25/2023		Anedot - Transn	nission Fee - J.	Harriso	n					
	Amount (\$)		Payee address;	City;	State;	Zip Co	de				
	\$100.30										
			ТХ								
	PURPOSE	(a)	Category (See Cate	egories listed at the top) of this sch	edule)	(b) Description				
	OF		Fees			ouuloy			ide of Texas. Com	plete Schedule T.	
	EXPENDITURE						Check if A	ustin, TX	, officeholder living	expense	
							Electronic	transı	mission Fee.		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeho	der name	C	Office sou	ght		Office he	eld	
-											

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment					Travel in District Travel Out of District	oment & Related Expense				
1	Total pages Schedule F1:	FILER NAME				3 Filer ID (E	Ethics Commission Filers)				
	Sch: 2/11 Rpt: 13/22	Vote Yes Garl	and ISD			00084963					
4	Date 04/28/2023	Payee name Anedot - Transmission Fee - M. Washington									
6	Amount (\$)	Payee address; City; State; Zip Code									
	\$200.30										
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Electronic transmission fee.											
9	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Office	nolder name	Office sou	ght	Office held					
	Date	Payee name									
	04/28/2023	Anedot - Trans	smission Fee - N. H	art							
	Amount (\$) \$48.30	Payee address;	City;	State; Zip Co	ode						
	PURPOSE OF EXPENDITURE	TX Category _{(See C} Fees	categories listed at the top of	this schedule)	Check if Austin	outside of Texas. Complete n, TX, officeholder living exp nnsmission fee.					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officel	nolder name	Office sou	ght	Office held					
	Date	Payee name									
	04/28/2023		smission Fee - T. C	ampbell							
	Amount (\$) \$80.30	Payee address;	City;	State; Zip Co	ode						
		ТХ									
	PURPOSE OF EXPENDITURE	Category _{(See C} Fees	categories listed at the top of	this schedule)	Check if Austin	outside of Texas. Complete n, TX, officeholder living exp nsmission fee.					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Office	nolder name	Office sou	ght	Office held					

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exp ittee Legal Services The Instruction Guid	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)								
1	Total pages Schedule F1:	ILER NAME			3 Filer ID (Ethics Commission Filers)						
	Sch: 3/11 Rpt: 14/22	ote Yes Garland ISD	00084963								
4	Date	Payee name									
	05/08/2023	BTG Strategies - Brian Tony									
6	Amount (\$)	ayee address; City;	State; Zip Co	le							
	\$5,250.00										
		x									
8	PURPOSE OF	ategory (See Categories listed at the t	op of this schedule)	(b) Description							
	EXPENDITURE	consulting Expense			outside of Texas. Complete Schedule T. , TX, officeholder living expense						
					sulting, strategic plan.						
9	Complete ONLY if direct expenditure to benefit C/OF	ndidate/Officeholder name	Office sou	ıht	Office held						
	Date	ayee name									
	05/06/2023	ntrinsic Smokehouse									
	Amount (\$)	ayee address; City;	State; Zip Co	le							
	\$1,082.50	09 W State St									
		Garland, TX 75040									
	PURPOSE OF EXPENDITURE	ategory (See Categories listed at the t ood/Beverage Expense	op of this schedule)	Check if Austin	outside of Texas. Complete Schedule T. , TX, officeholder living expense chnight celebration.						
	Complete ONLY if direct expenditure to benefit C/O	ndidate/Officeholder name	Office sou	Jht	Office held						
	Date	ayee name									
	05/10/2023	ntrinsic Smokehouse									
	Amount (\$)	ayee address; City;	State; Zip Co	le							
	\$700.00	09 W State St									
		Garland, TX 75040									
	PURPOSE OF EXPENDITURE	ategory (See Categories listed at the t ood/Beverage Expense	op of this schedule)		outside of Texas. Complete Schedule T.						
					, TX, officeholder living expense nt for Election-night celebration.						
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	ndidate/Officeholder name	Office sou	Jht	Office held						

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)			
	Sch: 4/11 Rpt: 15/22		Vote Yes Garland ISD 00084963								
4	Date	5	Payee name								
	04/07/2023		Mayes Media Group - Invoice	#4282							
6	Amount (\$)	7	Payee address; City; State; Zip Code								
	\$1,750.00		312 Creekwood Dr.								
			Sunnyvale, TX 75182								
8	PURPOSE	(a)	Category (See Categories listed at the	top of this sch	nedule)	(b) Description					
	OF EXPENDITURE		Consulting Expense					ide of Texas. Complete Schedule T.			
								, officeholder living expense			
						March Consu	lun	ig ree			
_	Osmalata ONII X if dina at		Deve di de te (Office de e la la recente		24						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name		Office sou	gnt		Office held			
	Date		Payee name								
	04/07/2023		Mayes Media Group - Invoice	e #4283							
	Amount (\$)		Payee address; City;	State	; Zip Co	de					
	\$1,750.00		312 Creekwood Dr.								
			Sunnyvale , TX 75182								
	PURPOSE OF	(a)	Category (See Categories listed at the	top of this sch	nedule)	(b) Description					
	EXPENDITURE		Consulting Expense					ide of Texas. Complete Schedule T. , officeholder living expense			
						April Consult					
						April Consult	ing				
_	Complete ONLY if direct		Candidate/Officeholder name) Dffice sou	sht		Office held			
	expenditure to benefit C/Oł			(It Office held					
_		i –									
	Date		Payee name								
	04/07/2023		Mayes Media Group - Invoice								
	Amount (\$)		Payee address; City;	State	; Zip Co	de					
	\$800.00		312 Creekwood Dr.								
			Sunnyvale, TX 75182								
	PURPOSE	(a)	Category (See Categories listed at the	top of this sch	nedule)	(b) Description					
	OF EXPENDITURE		Advertising Expense		,			ide of Texas. Complete Schedule T.			
	EXPENDITORE							, officeholder living expense			
						Logo Design	- C	creation.			
	Complete ONLY if direct		Candidate/Officeholder name	C	Office sou	ght		Office held			
	expenditure to benefit C/OI	1									

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explai	Office C Polling Printing Salaries	Overhe Expen Exper S/Wage	nse es/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)			
	Sch: 5/11 Rpt: 16/22		Vote Yes Garland ISD					00084963			
4	Date 04/07/2023	5	 Payee name Mayes Media Group - Invoice #4285 								
6	Amount (\$)	7	Payee address; City; State; Zip Code								
	\$2,250.00		312 Creekwood Dr.								
			Sunnyvale, TX 75182								
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this	schedule)	(b	Description		ide of Tourse, Operation Cohort de T			
	EXPENDITURE		Advertising Expense					ide of Texas. Complete Schedule T. , officeholder living expense			
								& Domain Registration.			
							.9				
9	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	Office so	ough	t		Office held			
	Date		Payee name								
	04/07/2023		Mayes Media Group - Invoice #4286	6							
	Amount (\$)		Payee address; City; Sta	ate; Zip (Code						
	\$2,002.63		312 Creekwood Dr.								
			Sunnyvale, TX 75182								
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this Consulting Expense	schedule)	(b		n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense - Creation			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office so	ough	t		Office held			
	Date		Payee name								
	04/07/2023		Mayes Media Group - Invoice #4299	Ð							
	Amount (\$)		Payee address; City; Sta	ate; Zip (Code						
	\$6,984.34		312 Creekwood Dr.								
			Sunnyvale, TX 75182								
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this Printing Expense	schedule)	(b		n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense gns.			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office so	ough	t		Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment					Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)			
	Sch: 6/11 Rpt: 17/22		Vote Yes Garland ISD					00084963			
4	Date	5	Payee name								
	04/07/2023		Mayes Media Group - Invoice #4322								
6	Amount (\$)	7	Payee address; City; State; Zip Code								
	\$17,500.00		312 CREEKWOOD DR								
			SUNNYVALE, TX 75182								
8	PURPOSE	(a)	Category (See Categories listed at the t	op of this sch	edule)	(b) Description					
	OF EXPENDITURE		Advertising Expense					ide of Texas. Complete Schedule T.			
							, TX,	, officeholder living expense			
						Digital ADs					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office sou	ght		Office held			
	Date		Payee name								
	04/07/2023		Mayes Media Group - Invoice	#4323							
	Amount (\$)		Payee address; City;	State:	; Zip Co	de					
	\$1,441.00		312 Creekwood Dr.	,	,						
	φ1,441.00										
			Sunnyvale, TX 75182								
	PURPOSE	(a)	Category (See Categories listed at the t	op of this sch	iedule)	(b) Description					
	OF EXPENDITURE		Printing Expense					ide of Texas. Complete Schedule T.			
							, IX,	, officeholder living expense			
						Printing.					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	C	Office sou	ght	Office held				
	Date		Payee name								
	04/25/2023		Mayes Media Group - Invoice	#4338							
	Amount (\$)		Payee address; City;	State;	; Zip Co	de					
	\$1,765.00		312 Creekwood Dr.								
			Sunnyvale, TX 75182								
	PURPOSE	(a)	Category (See Categories listed at the t	op of this sch	edule)	(b) Description					
	OF EXPENDITURE		Printing Expense					ide of Texas. Complete Schedule T.			
								, officeholder living expense			
						Yard Signs &	н	FIGHTES			
	_										
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office sou	ght		Office held			
	onpenditure to benefit C/OI	•									

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment					head/Rental Expense ense pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)			
	Sch: 7/11 Rpt: 18/22		Vote Yes Garland ISD					00084963			
4	Date	5	Payee name								
	04/25/2023		Mayes Media Group - Invoice #4339								
6	Amount (\$)	7	Payee address; City; State; Zip Code								
	\$10,427.72		312 Creekwood Dr.								
			Sunnyvale, TX 75182								
8	PURPOSE	(a)	Category (See Categories listed at the	top of this sch	nedule)	(b) Description					
	OF EXPENDITURE		Advertising Expense		····,		outs	ide of Texas. Complete Schedule T.			
	EXPENDITORE							, officeholder living expense			
						Designed Ma	ailei	r and Brochures			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office soug	Jht		Office held			
	Date		Payee name								
	04/25/2023		Mayes Media Group - Invoice	#4349							
	Amount (\$)		Payee address; City;	State;	; Zip Coo	de					
	\$7,613.25 312 Creekwood Dr.										
	+.,020.20										
			Sunnyvale, TX 75182								
	PURPOSE	(a)	Category (See Categories listed at the	top of this sch	nedule)	(b) Description					
	OF EXPENDITURE		Advertising Expense					ide of Texas. Complete Schedule T.			
								, officeholder living expense paper AD and placed AD in Dallas			
						Morning New		paper AD and placed AD in Dallas			
	Complete ONLY if direct		Candidate/Officeholder name		Office soug	-		Office held			
	expenditure to benefit C/Oł			C C	Juice soug	JIIL	It Office held				
_		-									
	Date		Payee name	#4050							
	04/25/2023		Mayes Media Group - Invoice	#4350							
	Amount (\$)		Payee address; City;	State;	; Zip Coo	de					
	\$7,840.99		312 Creekwood Dr,								
			Sunnyvale, TX 75182								
	PURPOSE	(a)	Category (See Categories listed at the	top of this sch	nedule)	(b) Description					
	OF EXPENDITURE		Printing Expense					ide of Texas. Complete Schedule T.			
								, officeholder living expense			
						Designed Ma	allel	r, Printing, Postage			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office soug	jht		Office held			
	experience to benefit 0/01	•									

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expe Gift/Awards/Memorial nmittee Legal Services The Instruction C	s Expense	Office Over Polling Exp Printing Ex Salaries/W	oense ages/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	2		· · · ·				Filer ID	(Ethics Commission Filers)
_	Sch: 8/11 Rpt: 19/22		Vote Yes Garland ISD					00084963	()
4	Date 04/25/2023	5	Payee name Mayes Media Group - Invo	ice #4351					
6	Amount (\$)	7	Payee address; City;	State	; Zip Co	le			
	\$9,625.64		312 Creekwood Dr.						
			Sunnyvale, TX 75182						
8	PURPOSE OF	(a)	Category (See Categories listed at	the top of this sch	nedule)	(b) Description			
	EXPENDITURE		Printing Expense					ide of Texas. Comp	
								, officeholder living	Mail Services, Postage
						Design Malle	:1 #4	z, Phinting &	Iviali Services, Poslaye
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	(Dffice souç	ht		Office he	ld
	Date		Payee name						
	04/25/2023		Mayes Media Group - Invo	ice #4352					
	Amount (\$)		Payee address; City;	State	; Zip Co	le			
	\$2,883.26 312 Creekwood Dr.								
	\$2,000.20								
			Sunnyvale, TX 75182						
	PURPOSE OF	(a)	Category (See Categories listed at	the top of this sch	nedule)	(b) Description			
	EXPENDITURE		Printing Expense					ide of Texas. Comp , officeholder living	
						Printing Yard			
						· · · · · · · · · · · · · · · · · · ·		g a	
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Officeholder name	C	Dffice sou	ht		Office he	ld
	Date Payee name								
	04/25/2023		Mayes Media Group - Invo	ice #4353					
	Amount (\$)		Payee address; City;		; Zip Co	le			
	\$585.00		312 Creekwood Dr.	Claro	, <u> </u>				
	+000100								
			Sunnyvale, TX 75182						
	PURPOSE OF	(a)	Category (See Categories listed at	the top of this sch	nedule)	(b) Description	eu	ide of Town - Or	alata Cabadula T
	EXPENDITURE		Advertising Expense					ide of Texas. Comp , officeholder living	
									utomated messages to
						voters.	uge		atomated messages to
-	Complete ONLV if direct	Ļ	Candidate/Officeholder name		Office soug	lht		Office he	ld
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF			(Surfe Sont	μπ		Unice he	au

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exp nmittee Legal Services The Instruction Guide		Office Over Polling Exp Printing Exp Salaries/Wa	ense Iges/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 9/11 Rpt: 20/22		Vote Yes Garland ISD					00084963
4	Date	5	Payee name					
	05/08/2023		Mayes Media Group - Invoice	#4361				
6	Amount (\$)	7	Payee address; City;	State;	; Zip Coo	е		
	\$1,779.11							
			Sunnyvale, TX 75182					
8	PURPOSE	(a)	Category (See Categories listed at the t	op of this sch	nedule)	b) Description		
	OF EXPENDITURE		Advertising Expense					ide of Texas. Complete Schedule T.
						Printing Door		, officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	C	Office soug	ht		Office held
	Date		Payee name					
	05/08/2023		Mayes Media Group - Invoice	#4365				
	Amount (\$)		Payee address; City;	State;	; Zip Coo	е		
	\$10,000.00 312 Creekwood Dr.							
			Sunnyvale, TX 75181					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the t Phone Bank Setup	op of this sch	iedule)	Check if Austin	n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense tup and call registry.
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office soug	ht		Office held
	Date Payee name							
	05/08/2023		Mayes Media Group - Invoice	#4366				
-	Amount (\$)		Payee address; City;	State;	; Zip Coo	е		
	\$1,350.00		312 Creekwood Dr.		•			
			Sunnyvale, TX 75182					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the t Advertising Expense	op of this sch	iedule)		n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense Newspaper
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name	C	Office soug	ht		Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense nmittee Legal Services The Instruction Guide exp	Off Po Pri Sa	fice Overh Iling Expe nting Expe Iaries/Wa	ense ges/Contract Labor	T T T	Transportation E Travel in District Travel Out of Dis	raising Expense quipment & Related Expense trict category not listed above)
1	Total pages Schedule F1:	2	FILER NAME	FILER NAME 3 Filer ID					(Ethics Commission Filers)
	Sch: 10/11 Rpt: 21/22		Vote Yes Garland ISD				-	0084963	· · ·
4	Date 05/08/2023	5	Payee name Mayes Media Group - Invoice #43	67					
6	Amount (\$)	7	Payee address; City;	State; Zi	ip Cod	9			
	\$2,000.00		312 Creekwood Dr.						
			Sunnyvale, TX 75182						
8	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Text messages - electronic text messages sent to voters. 						expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	Offic	e sougl	nt		Office he	ld
	Date		Payee name						
	05/08/2023		Mayes Media Group - Invoice #43	68					
	Amount (\$)		Payee address; City;	State; Zi	ip Cod	2			
	\$5,092.15		312 Creekwood Dr.	, _	P				
			Sunnyvale, TX 75182						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of t Printing Expense	his schedule	₂₎ (I	Check if Austin	, TX, of	fficeholder living	olete Schedule T. expense Rowlett, Sachse,
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Offic	e sougl	nt		Office he	ld
	Date Payee name								
	05/08/2023		Mayes Media Group - Invoice #43	69					
	Amount (\$) \$8,848.99		Payee address; City; 312 Creekwood Dr.	State; Zi	ip Cod	2			
			Sunnyvale, TX 75182						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of I Advertising Expense	his schedule	₂₎ (I		, TX, of	fficeholder living	olete Schedule T. expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	Offic	e sougl	nt		Office he	eld

EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reit Fees Office Overhead/Rent Food/Beverage Expense Polling Expense Git/Awards/Memorials Expense Salaries/Wages/Contr The Instruction Guide explains how to complete th	al Expense Transportation Equipment & Related Expense Travel in District Travel Out of District act Labor OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)					
	Sch: 11/11 Rpt: 22/22	Vote Yes Garland ISD	00084963					
4	Date 05/10/2023	Payee name Mayes Media Group - Invoice #4388						
6	Amount (\$)	Payee address; City; State; Zip Code						
Ū	\$435.00	312 Creekwood Dr. Sunnyvale, TX 75182						
		- -						
8	PURPOSE OF EXPENDITURE		cription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Ction day expenses.					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	andidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	05/10/2023	Mayes Media Group - Invoice #4393						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$1,115.00	312 Creekwood Dr.						
		Sunnyvale, TX 75182						
	PURPOSE OF EXPENDITURE		cription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense ction Day - Expenses.					
	Complete ONLY if direct expenditure to benefit C/O	andidate/Officeholder name Office sought	Office held					
-	Date Payee name							
	04/25/2023	Robinson, Bryan (Mr.)						
	Amount (\$) \$1,587.27	Payee address; City; State; Zip Code 810 MEADOW FLOWER						
		Garland, TX 75043						
	PURPOSE OF EXPENDITURE		cription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense mbursement for T-Posts					
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	andidate/Officeholder name Office sought	Office held					