

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**FORM C/OH  
COVER SHEET PG 1**

The C/OH Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers)

2 Total pages filed:

18

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR

FIRST

MI

NICKNAME

LAST

SUFFIX

MARIAN

BROWN

**OFFICE USE ONLY**

Date Received

2020 OCT -5 PM 3:30  
FILED  
JULIA C. WATSON  
COUNTY CLERK  
DALLAS COUNTY, TEXAS

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

Change of Address

P.O. Box 851635

Mesquite Tx 75185

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(214) 458-6595

Date Hand-delivered or Date Postmarked

6 CAMPAIGN TREASURER NAME

MS / MRS / MR

FIRST

MI

NICKNAME

LAST

SUFFIX

Victor

Vital

Receipt #

Amount \$

Date Processed

Date Imaged

7 CAMPAIGN TREASURER ADDRESS

STREET ADDRESS (NO PO BOX PLEASE);

APT / SUITE #;

CITY;

STATE;

ZIP CODE

(Residence or Business)

2100 McKinney Ave

Dallas, Tx 75201

8 CAMPAIGN TREASURER PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(214) 258-4124

9 REPORT TYPE

January 15

30th day before election

Runoff

15th day after campaign treasurer appointment (Officeholder Only)

July 15

8th day before election

Exceeded \$500 limit

Final Report (Attach C/OH - FR)

10 PERIOD COVERED

Month Day Year

07 / 16 / 20

THROUGH

Month Day Year

10 / 03 / 20

11 ELECTION

ELECTION DATE

Month Day Year

11 / 03 / 20

Primary

Runoff

ELECTION TYPE

Other Description

General

Special

12 OFFICE

OFFICE HELD (if any)

Sheriff

13 OFFICE SOUGHT (if known)

Sheriff

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

14 C/OH NAME MARIAN BROWN 15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM POLITICAL COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

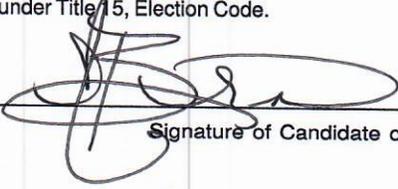
<input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC  <input type="checkbox"/> Additional Pages	COMMITTEE TYPE	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ <u>Ø</u>
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <u>25,678.00</u>
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ <u>Ø</u>
	4. TOTAL POLITICAL EXPENDITURES	\$ <u>7056.00</u>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ <u>4638.00</u>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>Ø</u>

18 AFFIDAVIT

AFFIX NOTARY STAMP / SEAL ABOVE

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

Sworn to and subscribed before me, by the said Marian Brown, this the 5th day of October, 2020, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Diana Lugo  
 Printed name of officer administering oath

Admin Asst.  
 Title of officer administering oath

# SUBTOTALS - C/OH

FORM C/OH  
COVER SHEET PG 3

19 FILER NAME <b>MARIAN BROWN</b>		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 10,201.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 15,377.00
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 6713.00
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 checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 343.00
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

The instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
3

2 FILER NAME  
MARIAN BROWN

3 Filer ID (Ethics Commission Filers)

4 Date: 08/26/20  
5 Full name of contributor: Paul Heller  
6 Contributor address; City; State; Zip Code: 13806 Wooded Creek Dallas, Tx

7 Amount of contribution (\$): 100.00

8 Principal occupation / Job title (See Instructions): unknown

9 Employer (See Instructions):

Date: 09/15/20  
Full name of contributor: Local Union 745  
Contributor address; City; State; Zip Code: 1710 Jonell Dallas, Tx

Amount of contribution (\$): 500.00

Principal occupation / Job title (See Instructions): N/A

Employer (See Instructions):

Date: 09/15/20  
Full name of contributor: Toby Shook  
Contributor address; City; State; Zip Code: 2001 Bryan St Dallas, Tx

Amount of contribution (\$): 750.00

Principal occupation / Job title (See Instructions): attorney

Employer (See Instructions): self

Date: 09/20/20  
Full name of contributor: MARK Vasquez  
Contributor address; City; State; Zip Code:

Amount of contribution (\$): 100.00

Principal occupation / Job title (See Instructions): unknown

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>2/3</b>
2 FILER NAME <b>MARIAN BROWN</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>09/20/20</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Terry Barker</b>	7 Amount of contribution (\$) <b>\$500.00</b>
6 Contributor address; City; State; Zip Code <b>Coppell, Tx</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>09/20/20</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Victor Vital</b>	Amount of contribution (\$) <b>\$1000.00</b>
Contributor address; City; State; Zip Code <b>2100 McKinney Ave Dallas, Tx</b>		
Principal occupation / Job title (See Instructions) <b>Attorney</b>		Employer (See Instructions) <b>self</b>
Date <b>09/20/20</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Russell Wilson</b>	Amount of contribution (\$) <b>\$1000.00</b>
Contributor address; City; State; Zip Code <b>Pacific Ave, Dallas, Tx</b>		
Principal occupation / Job title (See Instructions) <b>attorney</b>		Employer (See Instructions) <b>self</b>
Date <b>09/20/20</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Shaun Rabb</b>	Amount of contribution (\$) <b>25.00</b>
Contributor address; City; State; Zip Code <b>Box 851635 Mesquite Tx</b>		
Principal occupation / Job title (See Instructions) <b>Journalist</b>		Employer (See Instructions) <b>FOX TV</b>

**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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 3
2 FILER NAME MARIAN BROWN		3 Filer ID (Ethics Commission Filers)
4 Date 09/23/20	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Communications Workers Am.	7 Amount of contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code 1408 N. Washington, Dallas, TX		
8 Principal occupation / Job title (See Instructions) N/A		9 Employer (See Instructions) -

Date 09/23/20	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaun Rabb	Amount of contribution (\$) \$1,300.00
Contributor address; City; State; Zip Code P.O. Box 851635 Mesquite, TX		
Principal occupation / Job title (See Instructions) Journalist		Employer (See Instructions) FOX TV

Date 09/26/20	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tennell Atkins	Amount of contribution (\$) \$250.00
Contributor address; City; State; Zip Code 2717 Meadowstone, Dallas, TX		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 10/03/20	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaun Rabb	Amount of contribution (\$) \$3,776.00
Contributor address; City; State; Zip Code Box 851635 Mesquite, TX		
Principal occupation / Job title (See Instructions) Journalist		Employer (See Instructions) FOX TV

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**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2: 1/8

2 FILER NAME  
MARIAN BROWN

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$

5 Date

08/01/20

6 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Shaun Rabb

7 Contributor address; City; State; Zip Code

P.O. Box 851635 Mesquite, TX

8 Amount of Contribution \$

500.00

9 In-kind contribution description

Fees

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Journalist

11 Employer (FOR NON-JUDICIAL) (See Instructions)

FOX TV

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date

09/10/20

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Shaun Rabb

Contributor address; City; State; Zip Code

P.O. Box 851635 Mesquite, TX

Amount of Contribution \$

500.00

In-kind contribution description

Fees

Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Journalist

Employer (FOR NON-JUDICIAL) (See Instructions)

FOX TV

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

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

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

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2: 2/8

2 FILER NAME  
MARIAN BROWN

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$

5 Date  
09/19/20

6 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Shaun Rabb

8 Amount of Contribution \$

9 In-kind contribution description  
500.00 advertise

7 Contributor address; City; State; Zip Code  
P O Box 851635 Mesquite, Tx

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)  
Journalist

11 Employer (FOR NON-JUDICIAL) (See Instructions)  
Fox TV

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date  
09/22/20

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Shaun Rabb

Amount of Contribution \$

In-kind contribution description  
1745.00 advertising

Contributor address; City; State; Zip Code  
P O Box 851635 Mesquite Tx

Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)  
Journalist

Employer (FOR NON-JUDICIAL) (See Instructions)  
Fox TV

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2: 3/8

2 FILER NAME  
MARIAN BROWN

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$

5 Date  
09/12/20

6 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Shaun Rabb

7 Contributor address; City; State; Zip Code  
PO Box 851635 Mesquite TX

8 Amount of Contribution \$  
216.00

9 In-kind contribution description  
Food/Bev.

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)  
Journalist

11 Employer (FOR NON-JUDICIAL) (See Instructions)

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date  
10/03/20

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Shaun Rabb

Contributor address; City; State; Zip Code  
PO Box 851635 Mesquite, TX

Amount of Contribution \$  
500.00

In-kind contribution description  
fees

Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)  
Journalist

Employer (FOR NON-JUDICIAL) (See Instructions)  
Fox TV

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2: 4/8

2 FILER NAME  
MARIAN BROWN

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$

5 Date  
08/24/20

6 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Shaun Rabb

7 Contributor address; City; State; Zip Code  
P O Box 851635 Mesquite, Tx.

8 Amount of Contribution \$ 1745.00 9 In-kind contribution description  
Advertising  
 Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)  
Journalist

11 Employer (FOR NON-JUDICIAL) (See Instructions)  
FOX TV

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date  
09/29/20

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Shaun Rabb

Contributor address; City; State; Zip Code  
P O Box 851635 Mesquite Tx

Amount of Contribution \$ 7071.43 In-kind contribution description  
advertising  
 Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)  
Journalist

Employer (FOR NON-JUDICIAL) (See Instructions)  
FOX TV

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2: *5/8*

2 FILER NAME  
*MARIAN BROWN*

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$

5 Date

*09/26/30*

6 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

*Shaun Rabb*

8 Amount of Contribution \$

*400.00*

9 In-kind contribution description

*polling*

7 Contributor address; City; State; Zip Code

*P O Box 851635 Mesquite TX*

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

*Journalist*

11 Employer (FOR NON-JUDICIAL) (See Instructions)

*FOX TV*

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date

*09/26/30*

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

*Shaun Rabb*

Amount of Contribution \$

*100.00*

In-kind contribution description

*Labor*

Contributor address; City; State; Zip Code

*P O Box 851635 Mesquite TX*

Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

*Journalist*

Employer (FOR NON-JUDICIAL) (See Instructions)

*FOX TV*

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

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

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

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2: *6/8*

2 FILER NAME

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$

5 Date

*10/03/20*

6 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

*Shaun Rabb*

7 Contributor address; City; State; Zip Code

*P O Box 851635 Mesquite, TX*

8 Amount of Contribution \$

*200.00*

9 In-kind contribution description

*polling*

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

*Journalist*

11 Employer (FOR NON-JUDICIAL) (See Instructions)

*FOX TV*

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date

*09/19/20*

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

*Shaun Rabb*

Contributor address; City; State; Zip Code

*P O Box 851635 Mesquite TX*

Amount of Contribution \$

*100.00*

In-kind contribution description

*Labor*

Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

*Journalist*

Employer (FOR NON-JUDICIAL) (See Instructions)

*FOX TV*

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

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

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

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2: 7/8

2 FILER NAME  
MARIAN BROWN

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS \$

5 Date  
09/20/20

6 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Bennie Green

7 Contributor address; City; State; Zip Code  
109 Charles Desoto, Tx

8 Amount of Contribution \$ : 9 In-kind contribution description  
400.00 : Advertising  
 Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)  
Business owner

11 Employer (FOR NON-JUDICIAL) (See Instructions)  
Self

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date  
09/07/20

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
KB Media

Contributor address; City; State; Zip Code  
2030 S. Forum Grand Prairie Tx

Amount of Contribution \$ : In-kind contribution description  
500.00 : Fees  
 Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)  
Info Tech

Employer (FOR NON-JUDICIAL) (See Instructions)  
self

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

The instruction Guide explains how to complete this form.

1 Total pages Schedule A2: 8

2 FILER NAME

MARIAN BROWN

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$

5 Date

09/10/20

6 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

M. T. Caesar

7 Contributor address; City; State; Zip Code

1500 Cobblestone Desoto Tx

8 Amount of Contribution \$

400.00

9 In-kind contribution description

Advertising

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Business owner

11 Employer (FOR NON-JUDICIAL) (See Instructions)

self

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date

09/19/20

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Dottie Ney

Contributor address; City; State; Zip Code

542 N. MAIN St Duncanville, Tx

Amount of Contribution \$

500.00

In-kind contribution description

advertising

Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Business owner

Employer (FOR NON-JUDICIAL) (See Instructions)

self

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

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

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

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### 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: <b>Y3</b>	2 FILER NAME <b>MARIAN BROWN</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>08-26-20</b>	5 Payee name <b>Tractor Supply</b>
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6 Amount (\$) <b>117.00</b>	7 Payee address; City; State; Zip Code <b>Bettine Mesquite Tx</b>
--------------------------------	--

8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>polling</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
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>08-26-20</b>	Payee name <b>Patterson Signs</b>
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Amount (\$) <b>188.00</b>	Payee address; City; State; Zip Code <b>Irving, TX</b>
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>polling</b>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>09-12-20</b>	Payee name <b>Ecolatina</b>
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Amount (\$) <b>600.00</b>	Payee address; City; State; Zip Code <b>2330 W. DAVIS Dallas, TX</b>
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>advertising</b>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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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**

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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 Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Credit Card Payment  | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |

The instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <b>2/3</b>	2 FILER NAME <b>MARIAN BROWN</b>	3 Filer ID (Ethics Commission Filers)
4 Date <b>09-23-20</b>	5 Payee name <b>Reilly Echols</b>	
6 Amount (\$) <b>1288.18</b>	7 Payee address; City; State; Zip Code <b>1710 S. Harwood, Dallas, TX</b>	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Printing</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

9 Complete **ONLY** if direct expenditure to benefit C/OH

Candidate / Officeholder name	Office sought	Office held
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Date <b>09-29-20</b>	Payee name <b>DCDP</b>	
Amount (\$) <b>4000.00</b>	Payee address; City; State; Zip Code <b>1414 N. Washington, Dallas, TX</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>PRINTING</b>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete **ONLY** if direct expenditure to benefit C/OH

Candidate / Officeholder name	Office sought	Office held
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Date <b>10-03-20</b>	Payee name <b>Authur Hernandez</b>	
Amount (\$) <b>486.00</b>	Payee address; City; State; Zip Code <b>2320 W. Davis Dallas, TX</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>printing</b>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete **ONLY** if direct expenditure to benefit C/OH

Candidate , Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <b>3</b>	2 FILER NAME <b>MARIAN BROWN</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>09-01-20</b>	5 Payee name <b>Bank of America</b>
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6 Amount (\$) <b>16.95</b>	7 Payee address; City; State; Zip Code <b>Mesquite, Tx</b>
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Bank fee</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
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>10-01-20</b>	Payee name <b>BANK of America</b>
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Amount (\$) <b>16.95</b>	Payee address; City; State; Zip Code <b>Mesquite, Tx</b>
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Bank Fee</b>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

### 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.

<b>1</b> Total pages Schedule G: <i>1</i>	<b>2</b> FILER NAME <i>MARIAN BROWN</i>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <i>08-25-20</i>	<b>5</b> Payee name <i>Tractor Supply</i>	
<b>6</b> Amount (\$) <i>117.00</i> <input type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code <i>Beltline Mesquite, TX</i>	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) <i>polling</i>	<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
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought                      Office held

Date <i>08-07-20</i>	Payee name <i>AT+T</i>	
Amount (\$) <i>113.00</i> <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <i>Box 537101 Atlanta, GA.</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>office</i>	(b) Description <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 <i>09-07-20</i>	Payee name <i>AT+T</i>	
Amount (\$) <i>113.00</i> <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <i>Box 537101 Atlanta, GA.</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>office</i>	(b) Description <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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