CANDIDATE / OFFICEHOLDER FORM C/OH **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** 1 Filer ID 2 Total pages filed: The C/OH Instruction Guide explains how to complete this form. CANDIDATE / MS / MRS / MR **FIRST** MI OFFICE USE ONLY OFFICEHOLDER Brandon NAME **NICKNAME** LAST **SUFFIX** Jones CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE Date Hand-delivered or Date Postmarked OFFICEHOLDER P.O. Box 292694 MAILING Receipt # Amount **ADDRESS** Change of Address Lewisville, TX 75029 Date Processed Date Imaged CAMPAIGN MS/MRS/MR FIRST MI **TREASURER** NAME **NICKNAME** LAST **SUFFIX** CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: ZIP CODE **TREASURER ADDRESS** (Residence or Business) CAMPAIGN AREA CODE EXTENSION PHONE NUMBER **TREASURER** PHONE REPORT **TYPE** 15th day after campaign treasurer appointment (officeholder only) January 15 30th day before election Runoff July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) reporting limit PERIOD Month Day Year Month Day Year COVERED 01/01/2022 **THROUGH** 03/28/2022 10 ELECTION **ELECTION DATE ELECTION TYPE** Month Other Primary Runoff Special General 11 OFFICE 12 OFFICE SOUGHT (if known) OFFICE HELD (if any) Lewisville City Council Place 4 **GO TO PAGE 2** Version V3.5.1.fc88a75c Forms provided by Texas Ethics Commission www.ethics.state.tx.us

CANDIDATE / OFFICEHOLDER REPORT:

FORM C/OH COVER SHEET PG 2

SUPPORT & TOTALS					
13 C / OH NAME	Jones, Brandon		14 Filer ID		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without d officeholders are required to report this informatio	the candidate's or officeh	older's knowledge or	
Additional Pages	COMMITTEE TYPE COMMITTEE NAME				
		COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS		
16 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)			\$ 0.00	
	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)			\$ 1,000.00	
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES			\$ 0.00	
	4. TOTAL POLITICAL EXPENDITURES			\$ 587.90	
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD			\$ 422.60	
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD			\$ 0.00	
Sworn to and subs	Wister	Prands Jores ertify which, witness my hand and seal of office.	andidate or Officeholde	day	
	cer administering	Printed name of officer administering	Title of officer a	administering oath	
Forms provided by Te	exas Ethics Commission	Julie Wowy ethics.state.tx.us	V	ersion V3.5.1.fc88a75d	

FORM C/OH **SUBTOTALS - C/OH COVER SHEET PG 3** 3 of 6 **18 FILER NAME** 19 Filer ID Jones, Brandon 20 SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE 1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS 1,000.00 SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ SCHEDULE B: PLEDGED CONTRIBUTIONS \$ SCHEDULE E: LOANS \$ SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 587.90 SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$ SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$ 10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH \$ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 12. TO FILER

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A				
The Instruction Guide explains how to complete th	is form.	1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/6		
FILER NAME Jones, Brandon		3 Filer ID		
Date 5 Full name of contributor out-of-state PAC (III) 03/01/2022 Jones, Phillip (Mr.)	Full name of contributor out-of-state PAC (ID#:) Jones, Phillip (Mr.) Contributor address; City; State; Zip Code 6419 S Langley			
Principal occupation / Job title (See Instructions)	9 Employer (See Instruction	ons)		
Retired Police Officer	Retired			

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 Comm

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

Printing Expense Salaries/Wages/Contract Labor Candidate/Officeholder/Political Committee
Credit Card Payment Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 1/2 Rpt: 5/6 Jones, Brandon 4 Date Payee name 01/31/2022 Frost Bank 6 Amount (\$) Payee address: City; State; Zip Code \$10.00 159 W Main St Lewisville, TX 75057 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/28/2022 Frost Bank Amount (\$) Payee address; City; State; Zip Code \$10.00 159 W Main St Lewisville, TX 75057 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Bank Fees Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/03/2022 Google Payee address; State; Zip Code Amount (\$) City; \$6.40 1600 Amphitheatre Parkway Mountain View, CA 94043 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense G-Suite Expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

Candidate/Officeholder/Political Credit Card Payment	Committee 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:	2 FILER NAME 3 Filer ID
Sch: 2/2 Rpt: 6/6	Jones, Brandon
	5 Payee name
02/02/2022	Google
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$6.40	1600 Amphitheatre Parkway

	Mountain View, CA 94043
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	G-Suite Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
experialities to belief 5/5/	
Date	Payee name
03/02/2022	Google
Amount (\$)	Payee address; City; State; Zip Code
\$6.40	1600 Amphitheatre Parkway
	Mountain View, CA 94043
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense G-Suite Expense
	G-Suite Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
03/25/2022	Just Yard Signs
Amount (\$)	Payee address; City; State; Zip Code
\$548.70	4880 A1 Distribution Court
Ψ540.10	4000 AT DISTIBUTION COURT
, , , , , , , , , , , , , , , , , , ,	Orlando, FL 32822
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	FeeS Check if travel outside of Texas. Complete Schedule T.
EAT EITH ONE	Check if Austin, TX, officeholder living expense
	Yard Signs
211111111111111111111111111111111111111	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
CAPOTIGINATE TO SOTION S. S.	
at a	