

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: 22
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR MR	FIRST MARCUS	MI L
	NICKNAME	LAST Turner	SUFFIX Jr
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX: P.O Box 852444	APT / SUITE #: RICHARDSON TX	STATE: ZIP CODE 75085
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE (214)	PHONE NUMBER 604-4228	EXTENSION
6 CAMPAIGN TREASURER NAME	MS / MRS / MR Ms	FIRST LASHAUNDA	MI
	NICKNAME	LAST JONES	SUFFIX
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1350 N. GREENVILLE AVE, APT 1130 RICHARDSON TX 75081		
8 CAMPAIGN TREASURER PHONE	AREA CODE (972)	PHONE NUMBER 916 1094	EXTENSION N/A
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month / Day / Year THROUGH Month / Day / Year		
11 ELECTION	ELECTION DATE Month / Day / Year 3 / 1 / 2021	ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known) DALLAS COUNTY CLERK	
14 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	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.		
	COMMITTEE TYPE	COMMITTEE NAME	
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS	
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	

GO TO PAGE 2

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ELECTIONS DEPARTMENT
2022 JAN 14 PM 3:01

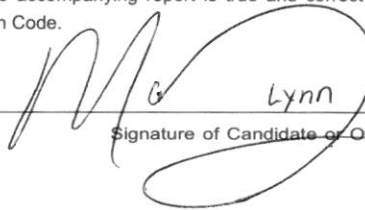
**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

RECEIVED FOR FILING
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ELECTIONS DEPARTMENT
**FORM C/OH
COVER SHEET PG 2**

15 C/OH NAME MARCUS Turner Jr 2022 JAN 14 PM 3:01 16 Filer ID (Ethics Commission Filers)

17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 3,037.67
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 2930.70
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 106.97
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

18 SIGNATURE 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.

 Lynn Turner Jr
Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP/SEAL

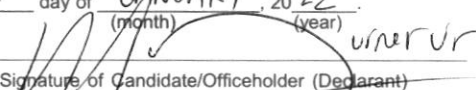
Sworn to and subscribed before me by _____ this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

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

OR

(2) Unsworn Declaration

My name is MARCUS Turner Jr, and my date of birth is 8-13-1988.
My address is 1350 N. GREENVILLE AVE APT 1130, RICHARSON, TX, 75081, U.S.
(street) (city) (state) (zip code) (country)
Executed in DALLAS County, State of TX, on the 14 day of JANUARY, 2022.
(month) (year)

 Turner Jr
Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

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ELECTIONS DEPARTMENT

**FORM C/OH
COVER SHEET PG 3**

19 FILER NAME

MARCUS Turner Jr

2022 JAN 14 PM 3: 02

Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE

SUBTOTAL
AMOUNT

1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 3,037.67
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 E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 2930.70
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 type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
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

If the requested information is not applicable, **DO NOT** include this page in the report.

2022 JAN 14 PM 3:02

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 14
2 FILER NAME MARCUS Turner Jr		3 Filer ID (Ethics Commission Filers)
4 Date 7/23/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ED RAMIREZ	7 Amount of contribution (\$) 10.71
6 Contributor address; City; State; Zip Code 7537 GAYLEN DR. DALLAS TX 75217		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 7/25/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DENISECIA TALABI	Amount of contribution (\$) 34.00
Contributor address; City; State; Zip Code 915 DESCO LANE GRAND PRAIRIE TX 75051		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 7/25/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRINA GIBSON	Amount of contribution (\$) 500
Contributor address; City; State; Zip Code 10362 WHITE ELM ROAD DALLAS TX 75243		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 7/23/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAWNA Turner	Amount of contribution (\$) 104.15
Contributor address; City; State; Zip Code 1110 YUKON BLVD WAXAHACHIE TX 75167		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

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ELECTIONS DEPARTMENT
SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME MARCUS Turner Jr		3 Filer ID (Ethics Commission Filers)
4 Date 7/30/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KIMBERLY DICKERSON	7 Amount of contribution (\$) 25.00
6 Contributor address; City; State; Zip Code 3031 CRIMSON CLOVER DR LANCASTER TX 75124		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 7/30/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COURTNEY WEST	Amount of contribution (\$) 10.70
Contributor address; City; State; Zip Code 2255 ARKANSAS LANE GRAND PRAIRIE TX 75052		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 7/31/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADRENNIA HARRIS	Amount of contribution (\$) 26.27
Contributor address; City; State; Zip Code 1736 RIDGEVIEW STREET MESQUITE TX 75149		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 7/31/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRINA GIBSON	Amount of contribution (\$) 100
Contributor address; City; State; Zip Code 10362 WHITEELM ROAD DALLAS TX 75243		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS ELECTIONS DEPARTMENT **SCHEDULE A1**

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2 FILER NAME MARCUS Turner		3 Filer ID (Ethics Commission Filers)
4 Date 7/31/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JILLIAN TOWNSEND	7 Amount of contribution (\$) 52.23
6 Contributor address; City; State; Zip Code 2944 CELIAN STREET GRAND PRAIRIE TX 75052		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 8/6/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARLENIA BOULIGNY	Amount of contribution (\$) 52.23
Contributor address; City; State; Zip Code 1620 JOHN SMITH DRIVE IRVING TX 75061		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 8/6/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAWNA TURNER	Amount of contribution (\$) 104.15
Contributor address; City; State; Zip Code 1110 YUKON BLVD WAXAHACHIE TX 75087		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 8/7/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASSANDRA COLEMAN	Amount of contribution (\$) 52.23
Contributor address; City; State; Zip Code 215 HARTLEY LANE RED OAK TX 75154		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

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SCHEDULE A1

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2 FILER NAME MARCUS TURNER JR.		3 Filer ID (Ethics Commission Filers)
4 Date 8/9/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARLA LEVELS	7 Amount of contribution (\$) 40
6 Contributor address; City; State; Zip Code 2503 BOBWHITE BOULEVARD MESQUITE TX 75149		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 8/14/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEATRICE GREEN	Amount of contribution (\$) 50
Contributor address; City; State; Zip Code 836 VINCE LANE DESOTO TX 75115		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 8/11/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DERRICK MORGAN	Amount of contribution (\$) 20
Contributor address; City; State; Zip Code 2510 CROSSBRANCH GLENN HEIGHTS TX 75154		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 8/16/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOSEPH HILL	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 13240 FIDDLERS TRL FORT WORTH TX 76244		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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2 FILER NAME MARCUS Turner Jr		3 Filer ID (Ethics Commission Filers)
4 Date 9/9/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRINA GIBSON	7 Amount of contribution (\$) 250
6 Contributor address; City; State; Zip Code 10362 WHITE ELM ROAD DALLAS TX 75243		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 9/7/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOE GILL	Amount of contribution (\$) 50
Contributor address; City; State; Zip Code 1277 ESSEX DR DESOTO TX 75115		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 9/19/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARL DAVIS	Amount of contribution (\$) 78.19
Contributor address; City; State; Zip Code 2012 BENTWOOD DR GLENN HEIGHTS TX 75154		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 9/19/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRISTI SERRANO	Amount of contribution (\$) 10
Contributor address; City; State; Zip Code 3346 NORTH HAYEN ROAD DALLAS TX 75229		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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2 FILER NAME MARCUS TURNER JR		3 Filer ID (Ethics Commission Filers)
4 Date 9/19/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALVIN DOOLITTLE	7 Amount of contribution (\$) 26
6 Contributor address; City; State; Zip Code 5005 GALLERIA DRIVE FARMERS BRANCH TX 75244		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 9/19/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEITHUS ROBERT	Amount of contribution (\$) 10
Contributor address; City; State; Zip Code 1212 SOUTH CLARK ROAD CEDAR HILL TX 75154		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 9/19/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HATTILENA GOOCH	Amount of contribution (\$) 10.70
Contributor address; City; State; Zip Code 609 DOE CREEK TRAIL GLENN HEIGHTS TX 75154		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 9/19/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENDRICK BARRETT	Amount of contribution (\$) 10
Contributor address; City; State; Zip Code 1444 QUARTET DRIVE DALLAS TX 75241		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date 9/19/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JIBRIL RASHEED	7 Amount of contribution (\$) 15
6 Contributor address; City; State; Zip Code 1714 ABERDEEN DRIVE ARLINGTON TX 76015		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 9/19/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MIRANDA LAWS	Amount of contribution (\$) 5.50
Contributor address; City; State; Zip Code SEWELL DRIVE LANCASTER TX 75146		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 9/19/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARLON BUSH	Amount of contribution (\$) 26.27
Contributor address; City; State; Zip Code 4811 DUNCANVILLE ROAD DALLAS TX 75236		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 9/19/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DARIUS WILLIAMS	Amount of contribution (\$) 26.27
Contributor address; City; State; Zip Code 211 WINTERS EDGE DRIVE RED OAK TX 75154		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

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ELECTIONS DEPARTMENT
SCHEDULE A1

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2 FILER NAME MARCUS TURNER JR		3 Filer ID (Ethics Commission Filers)
4 Date 9/19/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TROY TYSON	7 Amount of contribution (\$) 52.23
6 Contributor address; City; State; Zip Code 7702 FALLEN ANTLER PLACE ARLINGTON TX 76002		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 9/19/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANNY DUN	Amount of contribution (\$) 52.23
Contributor address; City; State; Zip Code 835 KIRNWOOD DR DALLAS TX 75232		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 9/19/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEILA TURNER	Amount of contribution (\$) 20.00
Contributor address; City; State; Zip Code 835 KIRNWOOD DR DALLAS TX 75232		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 9/19/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLEV SMITH	Amount of contribution (\$) 20.00
Contributor address; City; State; Zip Code 419 NEW CASTLE DRIVE DESOTO TX 75115		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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2 FILER NAME MARCUS TURNER JR		3 Filer ID (Ethics Commission Filers)
4 Date 9/19/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARLENIA BOULIGNY	7 Amount of contribution (\$) 18.00
6 Contributor address; City; State; Zip Code 1620 JOHN SMITH DRIVE IRVING TX 75061		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 9/19/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDGAR JAMES BURNS	Amount of contribution (\$) 25.00
Contributor address; City; State; Zip Code 825 TWIN CREEK DESOTO TX 75115		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 9/19/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHARLES DOTSY	Amount of contribution (\$) 25.00
Contributor address; City; State; Zip Code 1641 RUSSELL GLEN DALLAS TX 75232		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 9/19/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHANNON THOMAS	Amount of contribution (\$) 40
Contributor address; City; State; Zip Code 1509 LUCILLE DRIVE MESQUITE TX 75149		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

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2 FILER NAME MARCUS TURNER JR		3 Filer ID (Ethics Commission Filers)
4 Date 9/19/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COURTLAND BROWN	7 Amount of contribution (\$) 25.00
6 Contributor address; City; State; Zip Code 510 RENEE LANE DESOTO TX 75115		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 9/19/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEREK SMITH	Amount of contribution (\$) 25.00
Contributor address; City; State; Zip Code 1714 OVERLOOK DRIVE LANCASTER TX 75146		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 9/19/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADRENNIA HARRIS	Amount of contribution (\$) 20
Contributor address; City; State; Zip Code 1736 RIDGEVIEW STREET MESQUITE TX 75149		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 9/19/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRAYLON MORRISON	Amount of contribution (\$) 40
Contributor address; City; State; Zip Code 713 WAYNE LEE DRIVE LANCASTER TX 75146		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

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2 FILER NAME MARCUS Turner Jr		3 Filer ID (Ethics Commission Filers)
4 Date 9/19/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JEFFREY BOOKER	7 Amount of contribution (\$) 50
6 Contributor address; City; State; Zip Code 418 FOX TRAIL COURT WAXAHACHIE TX 75167		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 9/19/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHRIS HALL	Amount of contribution (\$) 25.00
Contributor address; City; State; Zip Code 1011 YUKON DRIVE WAXAHACHIE TX 75167		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 9/19/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHRISTOL TURNER	Amount of contribution (\$) 100
Contributor address; City; State; Zip Code 1120 BRANDYSTATION ROAD GRAND PRAIRIE TX 75052		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 9/18/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORBY BUSH	Amount of contribution (\$) 50
Contributor address; City; State; Zip Code 1701 STONEBRIDGE DRIVE DESOTO TX 75115		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

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2 FILER NAME MARCUS TURNER JR		3 Filer ID (Ethics Commission Filers)
4 Date 9/25/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DENISECIA TALABI	7 Amount of contribution (\$) 33.54
6 Contributor address; City; State; Zip Code 915 DESCO LANE GRAND PRAIRIE TX 75051 APT 7104		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 9/25/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JENNY MOMAN	Amount of contribution (\$) 100
Contributor address; City; State; Zip Code 4144 NORTH CENTRAL EXPRESSWAY DALLAS TX 75204		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MESURON BROWN	Amount of contribution (\$) 25
Contributor address; City; State; Zip Code 9407 SASSAFRAS DRIVE DALLAS TX 75217		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/25/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DENISECIA TALABI	Amount of contribution (\$) 33.54
Contributor address; City; State; Zip Code 915 DESCO LANE GRAND PRAIRIE TX 75051 APT 7104		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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

MONETARY POLITICAL CONTRIBUTIONS

RECEIVED FOR FILING
DALLAS COUNTY
ELECTIONS DEPARTMENT
SCHEDULE A1

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2022 JAN 14 PM 3: 02

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date 11/16/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANIEL WEYANDT	7 Amount of contribution (\$) 26.27
6 Contributor address; City; State; Zip Code 3103 BARTON ROAD CARROLLTON TX 75007		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/29/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRINA GIBSON	Amount of contribution (\$) 104.15
Contributor address; City; State; Zip Code 10362 WHITE ELM ROAD DALLAS TX 75243		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/30/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATTY DOTSY	Amount of contribution (\$) 104.15
Contributor address; City; State; Zip Code 1641 RUSSELL GLENN DALLAS TX 75232		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
	Contributor address; City; State; Zip Code	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

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ELECTIONS DEPARTMENT
SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME MARCUS TURNER JR		3 Filer ID (Ethics Commission Filers)
4 Date 12/25/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TISHAUNA JONES	7 Amount of contribution (\$) 104.15
6 Contributor address; City; State; Zip Code 2322 GREENFIELD CIRCLE GARLAND TX 75040		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/30/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TERRICA ODUM	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code H850 MONFORT DRIVE, SUITE 280 DALLAS TX 75254		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 9/20/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITNEY TURNER	Amount of contribution (\$) 20.00
Contributor address; City; State; Zip Code 2629 S. GRAND PENINSULA DR APT 1016 GRAND PRAIRIE TX 75054		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

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DALLAS COUNTY
SCHEDULE F1
ELECTIONS DEPARTMENT

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2022 JAN 14 PM 3:02

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: 5	2 FILER NAME MARCUS TURNER JR	3 Filer ID (Ethics Commission Filers)
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4 Date 8-30-2021	5 Payee name EDWARD RAMIREZ
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6 Amount (\$) 283.75	7 Payee address; City; State; Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	(b) Description GRAPHIC DESIGN WEBSITE
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 9-22-2021	Payee name ROCKY CARTER
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Amount (\$) 250.00	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	Description PHOTOGRAPHY/VIDEOGRAPHY
	<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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Date 9-30-2021	Payee name CUSTOM BLING
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Amount (\$) 60.00	Payee address; City; State; Zip Code 712 N HAMPTON RD #140 DESOTO TX 75115
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	Description CAMPAIGN MASK/SHIRT
	<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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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

RECEIVED FOR FILING
SCHEDULE F1
ELECTIONS DEPARTMENT

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2022 JAN 14 PM 3: 03

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:		2 FILER NAME MARCUS TURNER JR		3 Filer ID (Ethics Commission Filers)	
4 Date 10/21/2021		5 Payee name SIGNS FOR CHEAP			
6 Amount (\$) \$114.78		7 Payee address; City; State; Zip Code			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE		(b) Description YARD SIGNS		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10/21/2021		Payee name IS SPORTS			
Amount (\$) \$129.90		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE		Description SHIRTS/MASK		
	<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 10/25/2021		Payee name TARGET			
Amount (\$) 500		Payee address; City; State; Zip Code 16731 COIT RD DAWAS TX 75248			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE		Description CANNON REBEL		
	<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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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

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DALLAS SCHEDULE F1
ELECTIONS DEPARTMENT

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2022 JAN 14 PM 3:03

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:	2 FILER NAME MARCUS Turner Jr	3 Filer ID (Ethics Commission Filers)
4 Date 10/16/2021	5 Payee name EDWARD RAMIREZ	
6 Amount (\$) 284	7 Payee address; City; State; Zip Code 7537 GAYGLEN DRIVE DALLAS TX 75227	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) ADVERTISING	(b) Description GRAPHIC DESIGN WEBSITE FEATURE
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/16/2021	Payee name LAKE HIGHLANDS	
Amount (\$) \$100	Payee address; City; State; Zip Code P.O Box 180598 DALLAS TX 75218	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) EVENT EXPENSE	Description LH CHILI SUPPER
	<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 10/21/2021	Payee name IS SPORTS	
Amount (\$) 129.90	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) ADVERTISING	Description SHIRT / MASK
	<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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ELECTIONS DEPARTMENT

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EXPENDITURE CATEGORIES FOR BOX 8(a)

2022 JAN 14 PM 3:03

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:		2 FILER NAME MARCUS TURNER		3 Filer ID (Ethics Commission Filers)	
4 Date 11/15/2021		5 Payee name ED RAMIREZ			
6 Amount (\$) 171.81		7 Payee address; City; State; Zip Code 7531 GAYGLEN DRIVE DALLAS TX 75227			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE		(b) Description YARD SIGNS		
	<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	
Date 11/8/2021		Payee name ED RAMIREZ			
Amount (\$) 246.81		Payee address; City; State; Zip Code 7531 GAYGLEN DRIVE DALLAS TX 75227			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE		Description YARD SIGNS AND DESIGN		
	<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	
Date 10/29/2021		Payee name ED RAMIREZ			
Amount (\$) 209.84		Payee address; City; State; Zip Code 7531 GAYGLEN DRIVE DALLAS TX 75227			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE		Description BUSINESS SIGNS		
	<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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SCHEDULE F1
ELECTIONS DEPARTMENT

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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 | | | |

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1 Total pages Schedule F1:	2 FILER NAME MARCUS TURNER JR	3 Filer ID (Ethics Commission Filers)
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4 Date 12/13/2021	5 Payee name EDWARD RAMIREZ
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6 Amount (\$) 75	7 Payee address; 7537 GAYLEN DRIVE DALLAS TX 75227	City;	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	(b) Description DIGITAL FLYER
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12/14/2021	Payee name ED RAMIREZ
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Amount (\$) 172.97	Payee address; 7537 GAYLEN DRIVE DALLAS TX 75227	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	Description DIGITAL FLYER/GRAPHICS
	<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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Date	Payee name
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Amount (\$)	Payee address;	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	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

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