

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: **6**

| | | |
|---|---|--|
| 3 CANDIDATE / OFFICEHOLDER NAME | MS / MRS / MR FIRST MI Mrs Denise L ----- NICKNAME LAST SUFFIX Brennan | OFFICE USE ONLY Date Received Date Hand-delivered or Date Postmarked Receipt # Amount \$ Date Processed Date Imaged BY: JOHN F. WARRREN COUNTY CLERK DALLAS COUNTY DEPUTY 2022 JAN 18 AM 11:53 FILED |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 30; Rowlett, Tx ; 75030 Change of Address | |
| 5 CANDIDATE / OFFICEHOLDER PHONE | AREA CODE PHONE NUMBER EXTENSION (817) 703-4857 | |
| 6 CAMPAIGN TREASURER NAME | MS / MRS / MR FIRST MI Mrs Mary T ----- NICKNAME LAST SUFFIX Brennan | |
| 7 CAMPAIGN TREASURER ADDRESS | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1810 Watermark Ln; Wylie, Tx; 75098 (Residence or Business) | |
| 8 CAMPAIGN TREASURER PHONE | AREA CODE PHONE NUMBER EXTENSION (972) 412-0346 | |
| 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 / 1 / 21 12 / 31 / 21 | |
| 11 ELECTION | ELECTION DATE Month Day Year 3 / 1 / 22 | ELECTION TYPE <input checked="" type="checkbox"/> Primary Runoff Other Description <input type="checkbox"/> General Special |
| 12 OFFICE | OFFICE HELD (if any) | 13 OFFICE SOUGHT (if known) Justice of the Peace, 2-2 |
| 14 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. | |
| Additional Pages | COMMITTEE TYPE GENERAL SPECIFIC | COMMITTEE NAME ----- COMMITTEE ADDRESS ----- COMMITTEE CAMPAIGN TREASURER NAME ----- COMMITTEE CAMPAIGN TREASURER ADDRESS ----- |

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

| | | | |
|---------------------------------------|---|---|----------|
| 15 C/OH NAME Denise Brennan | | 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) | \$ | 0.00 |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ | 0.00 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURE. | \$ | 0.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ | 1,293.38 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD | \$ | 0.00 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ | 1,293.38 |

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.

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 Denise Brennan, and my date of birth is 05/23/74.

My address is P.O.Box 30, Rowlett, Tx, 75030, USA.
(street) (city) (state) (zip code) (country)

Executed in Dallas County, State of Tx, on the 17th day of January, 2022.
(month) (year)

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

| | | |
|--|--|---|
| 19 FILER NAME Denise Brennan | | 20 Filer ID (Ethics Commission Filers) |
| 21 SCHEDULE SUBTOTALS NAME OF SCHEDULE | | SUBTOTAL AMOUNT |
| 1. | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ 0.00 |
| 2. | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ 0.00 |
| 3. | SCHEDULE B: PLEDGED CONTRIBUTIONS | \$ 0.00 |
| 4. | ■ SCHEDULE E: LOANS | \$ 1,293.38 |
| 5. | SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS | \$ 0.00 |
| 6. | SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ 0.00 |
| 7. | SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS | \$ 0.00 |
| 8. | SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ 0.00 |
| 9. | ■ SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS | \$ 1,293.38 |
| 10. | SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH | \$ 0.00 |
| 11. | SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS | \$ 0.00 |
| 12. | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ 0.00 |

LOANS

SCHEDULE E

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

| | | |
|--|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule E: <i>1 of 2</i> |
| 2 FILER NAME Denise Brennan | | 3 Filer ID (Ethics Commission Filers) |
| 4 TOTAL OF UNITEMIZED LOANS | | \$ |
| 5 Date of loan 12/13/2021 | 7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Self | 9 Loan Amount (\$) 1,000.00 |
| 6 Is lender a financial Institution? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N | 8 Lender address; City; State; Zip Code P.O. Box 30 Rowlett TX 75030 | 10 Interest rate 0.00 |
| | | 11 Maturity date |
| 12 Principal occupation / Job title (See Instructions) | | 13 Employer (See Instructions) |
| 14 Description of Collateral <input checked="" type="checkbox"/> none | | 15 Check if personal funds were deposited into political account (See Instructions) |
| 16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable | 17 Name of guarantor | 19 Amount Guaranteed (\$) |
| | 18 Guarantor address; City; State; Zip Code | |
| 20 Principal Occupation (See Instructions) | | 21 Employer (See Instructions) |
| Date of loan | Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) | Loan Amount (\$) |
| Is lender a financial Institution? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N | Lender address; City; State; Zip Code | Interest rate 0.00 |
| | | Maturity date |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Description of Collateral <input checked="" type="checkbox"/> none | | Check if personal funds were deposited into political account (See Instructions) |
| GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable | Name of guarantor | Amount Guaranteed (\$) |
| | Guarantor address; City; State; Zip Code | |
| Principal Occupation (See Instructions) | | Employer (See Instructions) |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

LOANS

SCHEDULE E

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

| | | |
|--|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule E <i>2 of 2</i> |
| 2 FILER NAME Denise Brennan | | 3 Filer ID (Ethics Commission Filers) |
| 4 TOTAL OF UNITEMIZED LOANS | | \$ |
| 5 Date of loan 12/27/2021 | 7 Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____) Self | 9 Loan Amount (\$) 67.00 |
| 6 Is lender a financial institution? Y <input type="checkbox"/> N <input checked="" type="checkbox"/> | 8 Lender address, City, State, Zip Code P.O. Box 30 Rowlett TX 75030 | 10 Interest rate 0.00 |
| | | 11 Maturity date |
| 12 Principal occupation / Job title (See instructions) | | 13 Employer (See instructions) |
| 14 Description of Collateral <input type="checkbox"/> none | | 15 Check if personal funds were deposited into political account (See instructions) |
| 16 GUARANTOR INFORMATION not applicable | 17 Name of guarantor N/A | 19 Amount Guaranteed (\$) |
| | 18 Guarantor address, City, State, Zip Code | |
| 20 Principal Occupation (See instructions) | | 21 Employer (See instructions) |
| Date of loan 12/27/2021 | Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____) Self | Loan Amount (\$) 226.38 |
| Is lender a financial institution? Y <input type="checkbox"/> N <input checked="" type="checkbox"/> | Lender address, City, State, Zip Code P.O. Box 30 Rowlett TX 75030 | Interest rate |
| | | Maturity date |
| Principal occupation / Job title (See instructions) | | Employer (See instructions) |
| Description of Collateral <input type="checkbox"/> none | | Check if personal funds were deposited into political account (See instructions) |
| GUARANTOR INFORMATION not applicable | Name of guarantor N/A | Amount Guaranteed (\$) |
| | Guarantor address, City, State, Zip Code | |
| Principal Occupation (See instructions) | | Employer (See instructions) |

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

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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

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 G: | 2 FILER NAME Denise Brennan | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 12/27/2021 | 5 Payee name USPS | |
| 6 Amount (\$) 67.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended | 7 Payee address; City; State; Zip Code 3416 Enterprise Dr Rowlett TX 75088 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Other | (b) Description Post office box |
| | (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 12/27/2021 | Payee name Go Daddy | |
| Amount (\$) 226.38 <input checked="" type="checkbox"/> Reimbursement from political contributions intended | Payee address; City; State; Zip Code 14455 N. Hayden Scottsdale AZ 85260 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Other | Description Website |
| | <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 12/13/2021 | Payee name Dallas County Democrats | |
| Amount (\$) 1,000.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended | Payee address; City; State; Zip Code 1414 N. Washington Ave Dallas TX 75204 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Fees | Description Filing Fee |
| | <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 |
| | Justice of the Peace, 2-2 | |

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