

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: 34 | | | | | | | | | | | | | | | | | | | |
| 3 CANDIDATE / OFFICEHOLDER NAME | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%; border-bottom: 1px dotted black;">MS / MRS / MR Mrs.</td> <td style="width:30%; border-bottom: 1px dotted black;">FIRST Beverly</td> <td style="width:40%; border-bottom: 1px dotted black;">MI Thrower</td> </tr> <tr> <td style="border-bottom: 1px dotted black;">NICKNAME Bev</td> <td style="border-bottom: 1px dotted black;">LAST Dixon</td> <td style="border-bottom: 1px dotted black;">SUFFIX</td> </tr> </table> | MS / MRS / MR Mrs. | FIRST Beverly | MI Thrower | NICKNAME Bev | LAST Dixon | SUFFIX | OFFICE USE ONLY | | | | | | | | | | | | | | |
| MS / MRS / MR Mrs. | FIRST Beverly | MI Thrower | | | | | | | | | | | | | | | | | | | | |
| NICKNAME Bev | LAST Dixon | SUFFIX | | | | | | | | | | | | | | | | | | | | |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">ADDRESS / PO BOX; 808 Forest Lakes Ct</td> <td style="width:10%;">APT / SUITE #;</td> <td style="width:10%;">CITY;</td> <td style="width:10%;">STATE;</td> <td style="width:30%;">ZIP CODE Keller, Texas 76248</td> </tr> </table> | ADDRESS / PO BOX; 808 Forest Lakes Ct | APT / SUITE #; | CITY; | STATE; | ZIP CODE Keller, Texas 76248 | Date Received | | | | | | | | | | | | | | | |
| ADDRESS / PO BOX; 808 Forest Lakes Ct | APT / SUITE #; | CITY; | STATE; | ZIP CODE Keller, Texas 76248 | | | | | | | | | | | | | | | | | | |
| 5 CANDIDATE / OFFICEHOLDER PHONE | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%;">AREA CODE (817)</td> <td style="width:40%;">PHONE NUMBER 562-2680</td> <td style="width:40%;">EXTENSION</td> </tr> </table> | AREA CODE (817) | PHONE NUMBER 562-2680 | EXTENSION | Date Hand-delivered or Date Postmarked | | | | | | | | | | | | | | | | | |
| AREA CODE (817) | PHONE NUMBER 562-2680 | EXTENSION | | | | | | | | | | | | | | | | | | | | |
| 6 CAMPAIGN TREASURER NAME | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%; border-bottom: 1px dotted black;">MS / MRS / MR Mr.</td> <td style="width:30%; border-bottom: 1px dotted black;">FIRST John</td> <td style="width:40%; border-bottom: 1px dotted black;">MI D</td> </tr> <tr> <td style="border-bottom: 1px dotted black;">NICKNAME</td> <td style="border-bottom: 1px dotted black;">LAST Dixon</td> <td style="border-bottom: 1px dotted black;">SUFFIX</td> </tr> </table> | MS / MRS / MR Mr. | FIRST John | MI D | NICKNAME | LAST Dixon | SUFFIX | Receipt # | Amount \$ | | | | | | | | | | | | | |
| MS / MRS / MR Mr. | FIRST John | MI D | | | | | | | | | | | | | | | | | | | | |
| NICKNAME | LAST Dixon | SUFFIX | | | | | | | | | | | | | | | | | | | | |
| 7 CAMPAIGN TREASURER ADDRESS (Residence or Business) | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">STREET ADDRESS (NO PO BOX PLEASE); 808 Forest Lakes Ct</td> <td style="width:10%;">APT / SUITE #;</td> <td style="width:10%;">CITY;</td> <td style="width:10%;">STATE;</td> <td style="width:20%;">ZIP CODE Keller, Texas 76248</td> </tr> </table> | | | STREET ADDRESS (NO PO BOX PLEASE); 808 Forest Lakes Ct | APT / SUITE #; | CITY; | STATE; | ZIP CODE Keller, Texas 76248 | | | | | | | | | | | | | | |
| STREET ADDRESS (NO PO BOX PLEASE); 808 Forest Lakes Ct | APT / SUITE #; | CITY; | STATE; | ZIP CODE Keller, Texas 76248 | | | | | | | | | | | | | | | | | | |
| 8 CAMPAIGN TREASURER PHONE | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%;">AREA CODE (817)</td> <td style="width:40%;">PHONE NUMBER 562-2680</td> <td style="width:40%;">EXTENSION</td> </tr> </table> | | | AREA CODE (817) | PHONE NUMBER 562-2680 | EXTENSION | | | | | | | | | | | | | | | | |
| AREA CODE (817) | PHONE NUMBER 562-2680 | EXTENSION | | | | | | | | | | | | | | | | | | | | |
| 9 REPORT TYPE | <table style="width:100%; border-collapse: collapse;"> <tr> <td><input type="checkbox"/> January 15</td> <td><input checked="" type="checkbox"/> 30th day before election</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)</td> </tr> <tr> <td><input type="checkbox"/> July 15</td> <td><input type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> Exceeded Modified Reporting Limit</td> <td><input type="checkbox"/> Final Report (Attach C/OH - FR)</td> </tr> </table> | | | <input type="checkbox"/> January 15 | <input checked="" 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) | | | | | | | | | | | |
| <input type="checkbox"/> January 15 | <input checked="" 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 | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;">Month</td> <td style="width:5%;">Day</td> <td style="width:10%;">Year</td> <td style="width:15%;">THROUGH</td> <td style="width:5%;">Month</td> <td style="width:5%;">Day</td> <td style="width:10%;">Year</td> </tr> <tr> <td style="text-align: center;">12</td> <td style="text-align: center;">19</td> <td style="text-align: center;">2022</td> <td></td> <td style="text-align: center;">04</td> <td style="text-align: center;">05</td> <td style="text-align: center;">2023</td> </tr> </table> | | | Month | Day | Year | THROUGH | Month | Day | Year | 12 | 19 | 2022 | | 04 | 05 | 2023 | | | | | |
| Month | Day | Year | THROUGH | Month | Day | Year | | | | | | | | | | | | | | | | |
| 12 | 19 | 2022 | | 04 | 05 | 2023 | | | | | | | | | | | | | | | | |
| 11 ELECTION | <table style="width:100%; border-collapse: collapse;"> <tr> <td colspan="3" style="text-align: center;">ELECTION DATE</td> <td colspan="3" style="text-align: center;">ELECTION TYPE</td> </tr> <tr> <td style="width:10%;">Month</td> <td style="width:10%;">Day</td> <td style="width:10%;">Year</td> <td><input type="checkbox"/> Primary</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> Other Description</td> </tr> <tr> <td style="text-align: center;">05</td> <td style="text-align: center;">06</td> <td style="text-align: center;">2023</td> <td><input checked="" type="checkbox"/> General</td> <td><input type="checkbox"/> Special</td> <td></td> </tr> </table> | ELECTION DATE | | | ELECTION TYPE | | | Month | Day | Year | <input type="checkbox"/> Primary | <input type="checkbox"/> Runoff | <input type="checkbox"/> Other Description | 05 | 06 | 2023 | <input checked="" type="checkbox"/> General | <input type="checkbox"/> Special | | | | |
| ELECTION DATE | | | ELECTION TYPE | | | | | | | | | | | | | | | | | | | |
| Month | Day | Year | <input type="checkbox"/> Primary | <input type="checkbox"/> Runoff | <input type="checkbox"/> Other Description | | | | | | | | | | | | | | | | | |
| 05 | 06 | 2023 | <input checked="" type="checkbox"/> General | <input type="checkbox"/> Special | | | | | | | | | | | | | | | | | | |
| 12 OFFICE | OFFICE HELD (if any) | 13 OFFICE SOUGHT (if known) | | | | | | | | | | | | | | | | | | | | |
| 14 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages | <p style="font-size: small;">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.</p> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%; border-bottom: 1px solid black;">COMMITTEE TYPE</td> <td style="border-bottom: 1px solid black;">COMMITTEE NAME</td> </tr> <tr> <td style="border-bottom: 1px solid black;"><input type="checkbox"/> GENERAL</td> <td style="border-bottom: 1px solid black;">N/A</td> </tr> <tr> <td style="border-bottom: 1px solid black;"><input type="checkbox"/> SPECIFIC</td> <td style="border-bottom: 1px solid black;">COMMITTEE ADDRESS</td> </tr> <tr> <td style="border-bottom: 1px solid black;"></td> <td style="border-bottom: 1px solid black;">COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td style="border-bottom: 1px solid black;"></td> <td style="border-bottom: 1px solid black;">COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table> | | | COMMITTEE TYPE | COMMITTEE NAME | <input type="checkbox"/> GENERAL | N/A | <input type="checkbox"/> SPECIFIC | COMMITTEE ADDRESS | | COMMITTEE CAMPAIGN TREASURER NAME | | COMMITTEE CAMPAIGN TREASURER ADDRESS | | | | | | | | | |
| COMMITTEE TYPE | COMMITTEE NAME | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> GENERAL | N/A | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> SPECIFIC | 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

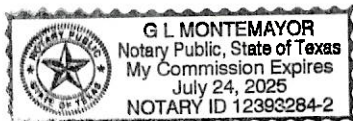
| | | |
|-------------------------------------|---|--|
| 15 C/OH NAME Beverly (Bev) Dixon | | 16 Filer ID (Ethics Commission Filers) |
| 17 CONTRIBUTION TOTALS | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) | \$ 125.00 |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ 27,725.00 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURE. | \$ 64.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ 14,569.61 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD | \$ 13,156.17 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 0.00 |

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.

Beverly Dixon
Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP/SEAL

Sworn to and subscribed before me by Beverly Dixon this the 6 day of April 2023, to certify which, witness my hand and seal of office.

G L. Montemayor Gaye Lynne Montemayor Notary
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____

My address is _____ (street) _____ (city) _____ (state) _____ (zip code) _____ (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20____ (month) (year)

Signature of Candidate/Officeholder (Declarant)

| | | |
|---|--|---|
| 19 FILER NAME Beverly (Bev) Dixon | | 20 Filer ID (Ethics Commission Filers) |
| 21 SCHEDULE SUBTOTALS NAME OF SCHEDULE | | SUBTOTAL AMOUNT |
| 1. <input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | | \$ 25,365.00 |
| 2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | | \$ 2235.00 |
| 3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS | | \$ |
| 4. <input type="checkbox"/> SCHEDULE E: LOANS | | \$ |
| 5. <input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS | | \$ 13,349.68 |
| 6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | | \$ 542.00 |
| 7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS | | \$ |
| 8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | | \$ 613.93 |
| 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 | | \$ 0.78 |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

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 A1: 18 |
| 2 FILER NAME Beverly (Bev) Dixon | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 12/21/2022 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kathryn King 6 Contributor address; City; State; Zip Code 8608 Olympiz Trace Circle Ft Worth Texas 76244 | 7 Amount of contribution (\$) \$2000.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 12/30/2022 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lesley Haas Contributor address; City; State; Zip Code 1614 Meadow Park Ln Keller TX 76248 | Amount of contribution (\$) \$300.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 1/3/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brittainy Fink Contributor address; City; State; Zip Code 532 Bristol Hill Keller TX 76248 | Amount of contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 1/4/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Susan & Rodney Eiland Contributor address; City; State; Zip Code 408 Monarch Hill Rd Keller TX 76248 | Amount of contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| <p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p> | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| 2 FILER NAME Beverly (Bev) Dixon | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 1/17/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lin & Ron Jencopale 6 Contributor address; City; State; Zip Code 933 Post Oak Road Keller Texas 76248 | 7 Amount of contribution (\$) \$100.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 1/17/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melody & Peter Sullivan Contributor address; City; State; Zip Code 512 Woodland Trail Keller TX 76248 | Amount of contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 2/6/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Susan Hunter Contributor address; City; State; Zip Code 1008 Lark Haven Ln Keller TX 76248 | Amount of contribution (\$) \$1000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 2/8/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Julie Schock Contributor address; City; State; Zip Code 1901 Silkwood Ct Keller TX 76248 | Amount of contribution (\$) \$100.00 |
| 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> | | |

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: 18 |
| 2 FILER NAME Beverly (Bev) Dixon | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 2/9/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Amanda Calongne 6 Contributor address; City; State; Zip Code 1459 Lockwood Ct Keller Texas 76248 | 7 Amount of contribution (\$) \$200.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 2/10/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Julie Fry Contributor address; City; State; Zip Code 9912 Lamberton Tar Ft Worth TX 76244 | Amount of contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 2/11/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ashley Ball Contributor address; City; State; Zip Code 1008 Silverwood Keller TX 76248 | Amount of contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 2/13/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Danielle Bobe Contributor address; City; State; Zip Code 1456 Lockwood Ct Keller TX 76248 | Amount of contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
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| 2 FILER NAME Beverly (Bev) Dixon | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 2/14/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) George Cozens 6 Contributor address; City; State; Zip Code 989 Meadow Circle N Keller TX 76248 | 7 Amount of contribution (\$) \$50.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 2/15/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Elizabeth Cumbie Contributor address; City; State; Zip Code 5021 Bomford Dr Ft Worth TX 76244 | Amount of contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 2/15/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kathi Glasscock Contributor address; City; State; Zip Code 8613 Amhurst Ct North Richland Hills, TX 76182 | Amount of contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 2/15/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kristi Burleson Contributor address; City; State; Zip Code 1421 Lizzy Ct Keller TX 76248 | Amount of contribution (\$) \$ 150.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
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| 2 FILER NAME Beverly (Bev) Dixon | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 2/15/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mary Cox 6 Contributor address; City; State; Zip Code 1134 Misty Oak Lane Keller Texas 76248 | 7 Amount of contribution (\$) \$100.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 2/15/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nadine Hutcheson Contributor address; City; State; Zip Code 2001 Yosemite Ln Keller TX 76248 | Amount of contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 2/15/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sarah Dykes Contributor address; City; State; Zip Code 2811 Flint Trail Keller TX 76182 | Amount of contribution (\$) \$40.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 2/16/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Angela Souther Contributor address; City; State; Zip Code 973 Ottinger Road Keller TX 76248 | Amount of contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| <p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p> | | |

MONETARY POLITICAL CONTRIBUTIONS

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| 2 FILER NAME Beverly (Bev) Dixon | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 2/16/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Julie Hagen 6 Contributor address; City; State; Zip Code 5133 Comstock Circle Ft Worth Texas 76244 | 7 Amount of contribution (\$) \$50.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 2/17/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belen Chee Contributor address; City; State; Zip Code 1706 Buckingham Dr Keller TX 76248 | Amount of contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 2/17/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John & Susan Cooper Contributor address; City; State; Zip Code 809 Forest Lakes Ct Keller TX 76182 | Amount of contribution (\$) \$180.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 2/21/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aprel Dobson Contributor address; City; State; Zip Code 9000 Thornberry Drive. North Richland Hills, TX 76182 | Amount of contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
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| 2 FILER NAME Beverly (Bev) Dixon | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 2/16/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Angela Starr 6 Contributor address; City; State; Zip Code 945 Bluebonnet Dr Keller Texas 76248 | 7 Amount of contribution (\$) \$150.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 2/21/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cassiopeia Van Dyke Contributor address; City; State; Zip Code 1424 Chase Oaks Keller TX 76248 | Amount of contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 2/21/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michelle Cline Contributor address; City; State; Zip Code 836 Keller Smithfield Keller TX 76248 | Amount of contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 2/25/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shelly Hye Contributor address; City; State; Zip Code 1228 Westwood Dr Keller TX 76262 | Amount of contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| <p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p> | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

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

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: 18 |
| 2 FILER NAME Beverly (Bev) Dixon | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 3/5/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Julie Tandy 6 Contributor address; City; State; Zip Code 1125 Wales Keller TX 76248 | 7 Amount of contribution (\$) 100.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 3/8/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kristen Lents Contributor address; City; State; Zip Code 1913 Wellington Ct Keller TX 76248 | Amount of contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 2/21/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dennis Serratt Contributor address; City; State; Zip Code 5553 Murton Place Ft Worth TX 76137 | Amount of contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 1/17/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) John Dixon Contributor address; City; State; Zip Code 808 Forest Lakes Ct Keller 76248 | Amount of contribution (\$) \$890.00 |
| Principal occupation / Job title (See Instructions) | | 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**

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

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: 18 |
| 2 FILER NAME Beverly (Bev) Dixon | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 3/28/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Raymond Peters 6 Contributor address; City; State; Zip Code 720 Fostery King Pl Keller TX 76248 | 7 Amount of contribution (\$) \$500.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 3/4/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Daniel Hawes Contributor address; City; State; Zip Code 5121 Merced Dr Ft Worth TX 76137 | Amount of contribution (\$) \$150.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 3/27/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) John Baker Contributor address; City; State; Zip Code PO Box 2047 Keller TX 76248 | Amount of contribution (\$) \$300.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 4/13/23 <i>for</i> | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Glenn Farkas Contributor address; City; State; Zip Code 1916 Stonecastle Dr Keller TX 76262 | Amount of contribution (\$) \$ 2500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| <p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p> | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

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

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: 18 |
| 2 FILER NAME Beverly (Bev) Dixon | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 2/27/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kymerly Sims 6 Contributor address; City; State; Zip Code 820 Forest Lakes Dr Keller Texas 76248 | 7 Amount of contribution (\$) \$100.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 3/3/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Joseph Austin Contributor address; City; State; Zip Code 6933 Black Wing Dr Ft Worth TX 76137 | Amount of contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 3/3/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mary Evans Contributor address; City; State; Zip Code 441 E Vine St Keller TX 76248 | Amount of contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 3/3/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Randy Campbell Contributor address; City; State; Zip Code 49 Stage Coach Rd Ft Worth TX 76244 | Amount of contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) | | 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**

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: 18 |
| 2 FILER NAME Beverly (Bev) Dixon | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 3/3/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ann Potts 6 Contributor address; City; State; Zip Code 535 Big Bend Drive Keller Texas 76248 | 7 Amount of contribution (\$) \$1000.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 3/3/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dawn Lydick Contributor address; City; State; Zip Code PO Box 2647 Ft Worth TX 76113 | Amount of contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 3/4/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Don & Melissa Reid Contributor address; City; State; Zip Code 2000 Brookhill Ct Keller TX 76248 | Amount of contribution (\$) \$5000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 3/4/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elaine Wagstaff Contributor address; City; State; Zip Code 428 Moonlight Lane Keller TX 76248 | Amount of contribution (\$) \$320.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| <p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p> | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: 18 |
| 2 FILER NAME Beverly (Bev) Dixon | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 3/4/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) George Cozens 6 Contributor address; City; State; Zip Code 989 Meadow Circle Keller TX 76248 | 7 Amount of contribution (\$) 30.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 3/4/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melody Sullivan Contributor address; City; State; Zip Code 512 Woodland Trail Keller TX 76248 | Amount of contribution (\$) \$475.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 3/4/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mary Weathered Contributor address; City; State; Zip Code 12308 Water Oak Ft Worth Texas 76244 | Amount of contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 3/4/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Janet Schoulda Contributor address; City; State; Zip Code 8613 Amhurst Ct North Richland Hills TX 76182 | Amount of contribution (\$) \$75.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| <p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p> | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: 18 |
| 2 FILER NAME Beverly (Bev) Dixon | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 3/4/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Annette Cox 6 Contributor address; City; State; Zip Code 1134 Misty Oak Lane Keller TX 76248 | 7 Amount of contribution (\$) \$160.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 3/4/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Courtney Herman Contributor address; City; State; Zip Code 1500 Hudnall Farm Rd Keller TX 76248 | Amount of contribution (\$) \$75.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 3/4/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Amanda Calongne Contributor address; City; State; Zip Code 1459 Lockwood Dr Keller TX 76248 | Amount of contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 3/4/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kathi Glasscock Contributor address; City; State; Zip Code 8613 Amhurst Ct NRH TX 76182 | Amount of contribution (\$) \$125.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| <p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p> | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: 18 |
| 2 FILER NAME Beverly (Bev) Dixon | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 3/4/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moira Jones 6 Contributor address; City; State; Zip Code 3809 Gladney Ln Ft Worth TX 76244 | 7 Amount of contribution (\$) \$100.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 3/4/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Andrew Sterneke Contributor address; City; State; Zip Code 506 Rawhide Path Keller TX 76248 | Amount of contribution (\$) \$320.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 3/4/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ruthie Keyes Contributor address; City; State; Zip Code 5008 Spanish River Trail Ft Worth TX 76137 | Amount of contribution (\$) \$150.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 3/4/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Eileen Meskill Contributor address; City; State; Zip Code 1500 Forest Bend Rd Keller TX 76248 | Amount of contribution (\$) \$ 75.00 |
| 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

SCHEDULE **A1**

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: 18 |
| 2 FILER NAME Beverly (Bev) Dixon | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 3/4/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shauna & Bryan Wright 6 Contributor address; City; State; Zip Code 814 Victoria Lane Keller Texas 76248 | 7 Amount of contribution (\$) \$1000.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 3/7/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Scott & Ashlee Hickman Contributor address; City; State; Zip Code 505 Holly Court Keller TX 76248 | Amount of contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 3/8/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Matthew Wilkens Contributor address; City; State; Zip Code 1703 Rolling Bend Keller TX 76248 | Amount of contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 3/8/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sherry Shelton Contributor address; City; State; Zip Code 321 College Keller TX 76248 | Amount of contribution (\$) \$100.00 |
| 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

SCHEDULE **A1**

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: 18 |
| 2 FILER NAME Beverly (Bev) Dixon | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 3/9/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Didi Zubricki 6 Contributor address; City; State; Zip Code 428 Durrand Oak Dr Keller Texas 76248 | 7 Amount of contribution (\$) \$50.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 3/14/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillip Chaffins Contributor address; City; State; Zip Code 925 Glenhurst Rd Keller TX 76248 | Amount of contribution (\$) \$300.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 3/20/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nomi Burns Contributor address; City; State; Zip Code 613 Monterey Dr Keller TX 76248 | Amount of contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 3/20/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steven Graff Contributor address; City; State; Zip Code 2832 Cotswold Ct Keller TX 76248 | Amount of contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| <p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p> | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: 18 |
| 2 FILER NAME Beverly (Bev) Dixon | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 3/20/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) John & Nancy Sullivan 6 Contributor address; City; State; Zip Code 130 Oregon Road Cheshire CT 06410 | 7 Amount of contribution (\$) \$50.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 3/21/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ashley Clark Contributor address; City; State; Zip Code 2037 Yosemite Keller TX 76248 | Amount of contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 3/21/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nicole Cobb Contributor address; City; State; Zip Code 5505 Milford Ft Worth TX 76137 | Amount of contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 3/21/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Robert Hassell Contributor address; City; State; Zip Code 602 LaSalle Dr Keller TX 76248 | Amount of contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | 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**

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: 18 |
| 2 FILER NAME Beverly (Bev) Dixon | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 3/25/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ashley Ram Gosnell 6 Contributor address; City; State; Zip Code 380 La Quinta S Keller TX 76248 | 7 Amount of contribution (\$) 200.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 3/25/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kathryn Metcalf Contributor address; City; State; Zip Code 425 Durrand Oak Keller TX 76248 | Amount of contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 3/25/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharon Stillinger Contributor address; City; State; Zip Code 1090 Misty Oak Lane Keller TX 76248 | Amount of contribution (\$) \$150.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 3/26/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruce Fields Contributor address; City; State; Zip Code 2803 Watts Ct Southlake TX 76092 | Amount of contribution (\$) \$2300.00 |
| 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> | | |

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE **A2**

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

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A2: 8 | |
| 2 FILER NAME Beverly (Bev) Dixon | | 3 Filer ID (Ethics Commission Filers) | |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS | | \$ 0.00 | |
| 5 Date 3/4/2023 | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) John Dixon | 8 Amount of Contribution \$ \$125.00 | 9 In-kind contribution description Whiskey /raffle |
| 7 Contributor address; City; State; Zip Code 808 Forest Lakes Ct Keller TX 76248 | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) | | 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 3/4/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Charcoopie (Chelsea Cooper) | Amount of Contribution \$ \$150.00 | In-kind contribution description Charcuterie Board/ Raffle |
| Contributor address; City; State; Zip Code 4952 Happy Trail, Ft Worth, TX 76244 | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) | | Employer (FOR NON-JUDICIAL)(See Instructions) | |
| 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**

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

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|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A2: 8 |
| 2 FILER NAME Beverly (Bev) Dixon | | 3 Filer ID (Ethics Commission Filers) |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS | | \$ 0.00 |
| 5 Date 3/4/2023 | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Amanda Moore 7 Contributor address; City; State; Zip Code 6048 Hilltop Dr Watauga TX 76148 | 8 Amount of Contribution \$ \$ 500.00 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) | | 9 In-kind contribution description Mavs experience /raffle |
| 12 Contributor's principal occupation (FOR JUDICIAL) | | 11 Employer (FOR NON-JUDICIAL)(See Instructions) |
| 14 Contributor's employer/law firm (FOR JUDICIAL) | | 13 Contributor's job title (FOR JUDICIAL)(See Instructions) |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) |
| Date 3/4/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Elaine Wagstaff Contributor address; City; State; Zip Code 420 Moonlight Keller TX 76248 | Amount of Contribution \$ \$160.00 Jewelry/ Raffle <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |
| Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) | | Employer (FOR NON-JUDICIAL)(See Instructions) |
| 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) | | |
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NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE **A2**

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A2: 8 |
| 2 FILER NAME Beverly (Bev) Dixon | | 3 Filer ID (Ethics Commission Filers) |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS | | \$ 0.00 |
| 5 Date 3/4/2023 | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sky Creek 7 Contributor address; City; State; Zip Code 600 Promontory Dr Keller TX 76248 | 8 Amount of Contribution \$ \$ 225.00 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. 9 In-kind contribution description Round of golf /raffle |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) | | 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 3/4/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Selfie World Contributor address; City; State; Zip Code 9409 Sage Meadow Tr #165 Ft Worth TX 76177 | Amount of Contribution \$ \$75.00 Gift C/ Raffle <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |
| Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) | | Employer (FOR NON-JUDICIAL)(See Instructions) |
| 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) | | |
| <p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p> | | |

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE **A2**

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A2: 8 |
| 2 FILER NAME Beverly (Bev) Dixon | | 3 Filer ID (Ethics Commission Filers) |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS | | \$ 0.00 |
| 5 Date 3/4/2023 | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Debbie Lee 7 Contributor address; City; State; Zip Code 1016 Brahms Colleyville TX 76034 | 8 Amount of Contribution \$ \$ 50.00 9 In-kind contribution description Macaroons /raffle Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) | | 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 3/4/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Becky Icken Contributor address; City; State; Zip Code 2202 Bayou Court Keller TX 76248 | Amount of Contribution \$ \$75.00 Raffle In-kind contribution description Cake/ Raffle Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> |
| Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) | | Employer (FOR NON-JUDICIAL)(See Instructions) |
| 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) | | |
| <p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p> | | |

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE **A2**

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

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A2: 8 |
| 2 FILER NAME Beverly (Bev) Dixon | | 3 Filer ID (Ethics Commission Filers) |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS | | \$ 0.00 |
| 5 Date 3/4/2023 | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Carla's Creations 7 Contributor address; City; State; Zip Code 420 Johnson Road Suite 104 Keller TX 76248 | 8 Amount of Contribution \$ \$ 50.00 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |
| 9 In-kind contribution description Dog basket /raffle | | |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) | | 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 3/4/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) DeVivo Bros. Contributor address; City; State; Zip Code 750 S Main #165 Keller TX 76248 | Amount of Contribution \$ \$25.00 Gift Card/ Raffle <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |
| Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) | | Employer (FOR NON-JUDICIAL)(See Instructions) |
| 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**

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

| | | | |
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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A2 | 8 |
| 2 FILER NAME Beverly (Bev) Dixon | | 3 Filer ID (Ethics Commission Filers) | |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS | | \$ 0.00 | |
| 5 Date 3/4/2023 | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kelly Fabian | 8 Amount of Contribution \$ \$30 .00 | 9 In-kind contribution description Scarf /raffle |
| 7 Contributor address; City; State; Zip Code 1709 Ranger Keller TX 76248 | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) | | 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 3/4/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Anna Wollscheid | Amount of Contribution \$ \$225.00 | In-kind contribution description Basket/ Raffle |
| Contributor address; City; State; Zip Code 402 Charrington Ct Keller TX 76248 | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) | | Employer (FOR NON-JUDICIAL)(See Instructions) | |
| 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) | | | |
| <p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p> | | | |

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE **A2**

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

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A2: 8 |
| 2 FILER NAME Beverly (Bev) Dixon | | 3 Filer ID (Ethics Commission Filers) |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS | | \$ 0.00 |
| 5 Date 3/4/2023 | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Empire Toys 7 Contributor address; City; State; Zip Code 790 S Main #417 Keller TX 76248 | 8 Amount of Contribution \$ \$200.00 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. 9 In-kind contribution description Basket /raffle |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) | | 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 3/4/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tracy Sones Contributor address; City; State; Zip Code 1460 Lockwood Keller TX 76248 | Amount of Contribution \$ \$75.00 Wreaths/ Raffle <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |
| Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) | | Employer (FOR NON-JUDICIAL)(See Instructions) |
| 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) | | |
| <p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p> | | |

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE **A2**

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

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|---|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A2: 8 | |
| 2 FILER NAME Beverly (Bev) Dixon | | 3 Filer ID (Ethics Commission Filers) | |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS | | \$ 0.00 | |
| 5 Date 3/4/2023 | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tara Golden Photography 7 Contributor address; City; State; Zip Code 810 Forest Lakes Ct Keller TX 76248 | 8 Amount of Contribution \$ \$150.00 | 9 In-kind contribution description Photo package /raffle <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) | | 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 3/4/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Annette Cox Contributor address; City; State; Zip Code 1134 Misty Oak Lane Keller TX 76248 | Amount of Contribution \$ \$120.00 | In-kind contribution description Pamper Basket/ Raffle <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |
| Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) | | Employer (FOR NON-JUDICIAL)(See Instructions) | |
| 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**

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 F1 3 | 2 FILER NAME Beverly (Bev) Dixon | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 3/7/2023 | 5 Payee name Keller Embroidery and Printing | |
| 6 Amount (\$) \$2300.31 | 7 Payee address; 1103 Keller Parkway Ste 106 | City; State; Zip Code Keller TX 76248 |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising | (b) Description Signs |
| | (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 3/26/2023 | Payee name KC Strategies | |
| Amount (\$) \$1092.00 | Payee address; 3571 Far West Blvd #196 | City; State; Zip Code Austin TX 78731 |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Advertising | Description Door Hangers |
| | <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 3/1/2023 | Payee name KC Strategies | |
| Amount (\$) \$2000.00 | Payee address; 3571 Far West Blvd #196 | City; State; Zip Code Austin TX 78731 |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Consulting Expense | Description Campaign Consulting |
| | <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 |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE **F1**

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 F1 3 | 2 FILER NAME Beverly (Bev) Dixon | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 1/31/2023 | 5 Payee name Main Street Depot | |
| 6 Amount (\$) \$650.00 | 7 Payee address; City; State; Zip Code 204 S Main Street Keller TX 76248 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description Rental of space |
| | (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 2/7/2023 | Payee name Keller Embroidery and Printing | |
| Amount (\$) \$2300.31 | Payee address; City; State; Zip Code 1103 Keller Parkway Ste 106 Keller TX 76248 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Advertising | Description Campaign Signs |
| | <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 2/1/2023 | Payee name KC Strategies | |
| Amount (\$) \$2000.00 | Payee address; City; State; Zip Code 3571 Far West Blvd #196 Austin TX 78731 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Consulting Expense | Description Campaign Consulting |
| | <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 |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE **F1**

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 F1 3 | 2 FILER NAME Beverly (Bev) Dixon | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 3/26/2023 | 5 Payee name Keller Masonic Lodge | |
| 6 Amount (\$) \$225.00 | 7 Payee address; City; State; Zip Code 424 N Main Street Keller TX 76248 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event expense | (b) Description Rental |
| | (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 4/1/2023 | Payee name KC Strategies | |
| Amount (\$) \$2000.00 | Payee address; City; State; Zip Code 3571 Far West Blvd #196 Austin TX 78731 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Consulting Expense | Description Consulting |
| | <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 3/1/2023 | Payee name KC Strategies | |
| Amount (\$) \$782.06 | Payee address; City; State; Zip Code 3571 Far West Blvd #196 Austin TX 78731 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Printing | Description Door Hangers |
| | <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 |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

UNPAID INCURRED OBLIGATIONS

SCHEDULE **F2**

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

EXPENDITURE CATEGORIES FOR BOX 10(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) |

The Instruction Guide explains how to complete this form.

| | | |
|--|--|--|
| 1 Total pages Schedule F2: 1 | 2 FILER NAME Beverly (Bev) Dixon | 3 Filer ID (Ethics Commission Filers) |
| 4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS | | \$ |
| 5 Date 3/24/2023 | 6 Payee name Keller Embroidery and Printing | |
| 8 Amount (\$) \$542.00 | 8 Payee address; 1103 Keller Parkway #106 | City; State; Zip Code Keller TX 76248 |
| 9 TYPE OF EXPENDITURE | <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | |
| 10 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising | (c) Description Signs |
| | (c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/> | |
| 11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought Office held |
| Date | Payee name | |
| Amount (\$) | Payee address; | City; State; Zip Code |
| TYPE OF EXPENDITURE | <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) | Description |
| | Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/> | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought Office held |

