

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

<b>The C/OH Instruction Guide explains how to complete this form.</b>		<b>1 Filer ID</b>	<b>2 Total pages filed:</b> 6	
<b>3 CANDIDATE / OFFICEHOLDER NAME</b>	MS / MRS / MR Mrs.	FIRST Pamela	MI S.	<b>OFFICE USE ONLY</b>  Date Received <b>Received</b>  <b>JAN 12 2021</b>
	NICKNAME Pam	LAST Johnson	SUFFIX	
<b>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</b>  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 6805 Beckworth Ln  Plano, TX 75024		ZIP CODE	Date Hand-delivered or Date Postmarked <b>USD / Supt Ofc</b>
	Receipt #		Amount	
	Date Processed			
	Date Imaged			
<b>5 CAMPAIGN TREASURER NAME</b>	MS / MRS / MR Mrs.	FIRST Pamela	MI S.	
	NICKNAME Pam	LAST Johnson	SUFFIX	
<b>6 CAMPAIGN TREASURER ADDRESS</b>  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 6805 Beckworth Ln  Plano, TX 75024			
<b>7 CAMPAIGN TREASURER PHONE</b>	AREA CODE	PHONE NUMBER	EXTENSION	
	(214)	952-1298		
<b>8 REPORT TYPE</b>	<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)			
<b>9 PERIOD COVERED</b>	Month    Day    Year 07/01/2021		THROUGH	Month    Day    Year 12/31/2021
<b>10 ELECTION</b>	ELECTION DATE Month    Day    Year 05/07/2022		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
<b>11 OFFICE</b>	OFFICE HELD (if any)		<b>12 OFFICE SOUGHT (if known)</b> Lewisville ISD, Board of Trustees, Place 3	

**GO TO PAGE 2**

**CANDIDATE / OFFICEHOLDER REPORT:  
SUPPORT & TOTALS**

**FORM C/OH  
COVER SHEET PG 2**  
2 of 6

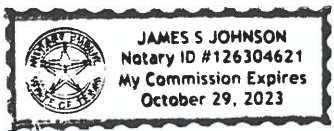
<b>13 C / OH NAME</b> Johnson, Pam	<b>14 Filer ID</b>
------------------------------------	--------------------

<b>15 NOTICE FROM POLITICAL COMMITTEE(S)</b>  <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. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
	<b>COMMITTEE TYPE</b> <input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	<b>COMMITTEE NAME</b>
	<b>COMMITTEE ADDRESS</b>	
	<b>COMMITTEE CAMPAIGN TREASURER NAME</b>	
	<b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b>	

<b>16 CONTRIBUTION TOTALS</b>	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)	\$ 7,497.00
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 125.03
	4. TOTAL POLITICAL EXPENDITURES	\$ 125.03
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 7,371.97
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

**17 AFFIDAVIT**

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.



AFFIX NOTARY STAMP / SEAL ABOVE

*Pamela S. Johnson*  
 \_\_\_\_\_  
 Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Pamela S. Johnson, this the 5th day of January, 2022, to certify which, witness my hand and seal of office.

*James Johnson* \_\_\_\_\_  
 Signature of officer administering Printed name of officer administering Title of officer administering oath

**SUBTOTALS - C/OH**

<b>18 FILER NAME</b> Johnson, Pam	<b>19 Filer ID</b>
--------------------------------------	--------------------

<b>20 SCHEDULE SUBTOTALS</b>		<b>SUBTOTAL AMOUNT</b>
<b>NAME OF SCHEDULE</b>		
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 7,497.00
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 FROM POLITICAL CONTRIBUTIONS	\$ 125.03
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/3 Rpt: 4/6
<b>2</b> FILER NAME Johnson, Pam		<b>3</b> Filer ID
<b>4</b> Date 08/15/2021	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Askew, Stephanie	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>6</b> Contributor address; City; State; Zip Code 3104 Overlook Cir  Highland Village, TX 75077		
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Askew Legal, PLLC
Date 08/15/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniels-Northcutt, Dustin	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code 2148 Pembroke Pl  Denton, TX 76205		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/08/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, James	Amount of Contribution (\$)  \$115.00
Contributor address; City; State; Zip Code 6805 Beckworth Ln  Plano, TX 75024		
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 12/31/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, James	Amount of Contribution (\$)  \$5,500.00
Contributor address; City; State; Zip Code 6805 Beckworth Ln  Plano, TX 75024		
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 07/31/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Pamela	Amount of Contribution (\$)  \$282.00
Contributor address; City; State; Zip Code 6805 Beckworth Ln  Plano, TX 75024		
Principal occupation / Job title (See Instructions) Paralegal		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/3 Rpt: 5/6
<b>2</b> FILER NAME Johnson, Pam		<b>3</b> Filer ID
<b>4</b> Date 10/29/2021	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) King, Glyn	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>6</b> Contributor address; City; State; Zip Code 4285 Glenhurst Ln  Frisco, TX 75033		
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 09/18/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Meek, David	Amount of Contribution (\$)  \$500.00
Contributor address; City; State; Zip Code 560 Diamond Point Dr  Oak Point, TX 75068		
Principal occupation / Job title (See Instructions) Banker		Employer (See Instructions) CLG Hedge
Date 08/08/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Meek, Dena	Amount of Contribution (\$)  \$250.00
Contributor address; City; State; Zip Code 560 Diamond Point Dr.  Oak Point, TX 75068		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/13/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Moffitt, Marc	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code 2708 Crater Lake Ln  Denton, TX 76210		
Principal occupation / Job title (See Instructions) Real Estate Broker		Employer (See Instructions) Self
Date 08/26/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Montgomery, Martha	Amount of Contribution (\$)  \$250.00
Contributor address; City; State; Zip Code P.O. Box 2  Abbott, TX 76621		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/3 Rpt: 6/6
<b>2</b> FILER NAME Johnson, Pam		<b>3</b> Filer ID
<b>4</b> Date 08/26/2021	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Montgomery, Mitch <hr/> <b>6</b> Contributor address; City; State; Zip Code P.O. Box 2  Abbott, TX 76621	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired