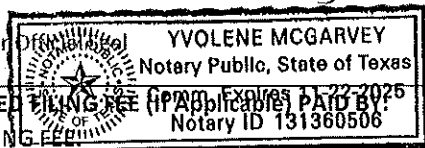


1

APPLICATION FOR A PLACE ON THE BALLOT FOR A GENERAL ELECTION FOR A CITY, SCHOOL DISTRICT OR OTHER POLITICAL SUBDIVISION

ALL INFORMATION IS REQUIRED TO BE PROVIDED UNLESS INDICATED AS OPTIONAL¹ Failure to provide required information may result in rejection of application.

APPLICATION FOR A PLACE ON THE <u>Argyle ISD School Board</u> GENERAL ELECTION BALLOT					
TO: City Secretary/Secretary of Board (name of election)					
I request that my name be placed on the above-named official ballot as a candidate for the office indicated below.					
OFFICE SOUGHT (Include any place number or other distinguishing number, if any.) <u>Trustee Place 1</u>				INDICATE TERM <input checked="" type="checkbox"/> FULL <input type="checkbox"/> UNEXPIRED	
FULL NAME (First, Middle, Last) <u>David Craig Hawkesworth</u>			PRINT NAME AS YOU WANT IT TO APPEAR ON THE BALLOT* <u>Craig Hawkesworth</u>		
PERMANENT RESIDENCE ADDRESS (Do not include a P.O. Box or Rural Route. If you do not have a residence address, describe location of residence.) <u>1835 Creekview Ct</u>			PUBLIC MAILING ADDRESS (Optional) (Address for which you receive campaign related correspondence, if available.) <u>PO Box 6665</u>		
CITY <u>Argyle</u>	STATE <u>TX</u>	ZIP <u>76226</u>	CITY <u>Argyle</u>	STATE <u>TX</u>	ZIP <u>76226</u>
PUBLIC EMAIL ADDRESS (Optional) (Address for which you receive campaign related emails, if available.)		OCCUPATION (Do not leave blank) <u>Business Owner</u>	DATE OF BIRTH <u>9/25/69</u>	VOTER REGISTRATION VOID NUMBER ² (Optional)	
TELEPHONE CONTACT INFORMATION (Optional)					
Home:		Office:		Cell: <u>972 567 3643</u>	
FELONY CONVICTION STATUS (You MUST check one)			LENGTH OF CONTINUOUS RESIDENCE AS OF DATE THIS APPLICATION WAS SWORN		
<input checked="" type="checkbox"/> I have not been finally convicted of a felony. <input type="checkbox"/> I have been finally convicted of a felony, but I have been pardoned or otherwise released from the resulting disabilities of that felony conviction and I have provided proof of this fact with the submission of this application. ³			IN THE STATE OF TEXAS <u>53</u> year(s) <u>4</u> month(s)		IN TERRITORY/DISTRICT/PRECINCT FROM WHICH THE OFFICE SOUGHT IS ELECTED <u>15</u> year(s) <u>7</u> month(s)
*If using a nickname as part of your name to appear on the ballot, you are also signing and swearing to the following statements: I further swear that my nickname does not constitute a slogan or contain a title, nor does it indicate a political, economic, social, or religious view or affiliation. I have been commonly known by this nickname for at least three years prior to this election. Please review sections 52.031, 52.032 and 52.033 of the Texas Election Code regarding the rules for how names may be listed on the official ballot.					
Before me, the undersigned authority, on this day personally appeared (name of candidate) <u>Craig Hawkesworth</u> who being by me here and now duly sworn, upon oath says:					
"I, (name of candidate) <u>Craig Hawkesworth</u> of <u>Denton</u> County, Texas, being a candidate for the office of <u>ISD Trustee, Place 1</u> , swear that I will support and defend the Constitution and laws of the United States and of the State of Texas. I am a citizen of the United States eligible to hold such office under the constitution and laws of this state. I have not been determined by a final judgment of a court exercising probate jurisdiction to be totally mentally incapacitated or partially mentally incapacitated without the right to vote. I am aware of the nepotism law, Chapter 573, Government Code. I am aware that I must disclose any prior felony conviction, and if so convicted, must provide proof that I have been pardoned or otherwise released from the resulting disabilities of any such final felony conviction. I am aware that knowingly providing false information on the application regarding my possible felony conviction status constitutes a Class B misdemeanor. I further swear that the foregoing statements included in my application are in all things true and correct."					
X <u>Craig Hawkesworth</u> SIGNATURE OF CANDIDATE					
Sworn to and subscribed before me this the <u>23rd</u> day of <u>January</u> , <u>2023</u> , by <u>CRAIG HAWKESWORTH</u> (name of candidate)					
<u>Yvonne MCGarvey</u> Signature of Officer Authorized to Administer Oath ⁴			<u>YVONE MCGARVEY</u> Printed Name of Officer Authorized to Administer Oath		
Title of Officer Authorized to Administer Oath			Notarial or Office Seal 		
TO BE COMPLETED BY FILING OFFICER: THIS APPLICATION IS ACCOMPANIED BY THE REQUIRED FILING FEE (If Applicable) PAID BY: <input type="checkbox"/> CASH <input type="checkbox"/> CHECK <input type="checkbox"/> MONEY ORDER <input type="checkbox"/> CASHIERS CHECK OR <input type="checkbox"/> PETITION IN LIEU OF A FILING FEE					
This document and \$ _____ filing fee or a nominating petition of _____ pages received. <input type="checkbox"/> Voter Registration Status Verified					
<u>01/23/2023</u> Date Received		<u>01/23/2023</u> Date Accepted		(See Section 1.007) <u>Yvonne MCGarvey</u> Signature of Filing Officer or Designee	

INSTRUCTIONS

Application for a place on the general election for a city, school district or other political subdivision, may not be filed earlier than 30 days before the deadline prescribed by this code for filing the application. An application filed before that day is void. All fields of the application **must** be completed unless specifically marked optional.

For an election to be held on a uniform election date, the day of the filing deadline is the 78th day before Election Day.

If you have questions about the application, please contact the Secretary of State's Elections Division at 800-252-8683.

NEPOTISM LAW

Each candidate must sign this statement indicating his awareness of the nepotism law. When a candidate signs the application, it is an acknowledgment that the candidate is aware of the nepotism law. The nepotism prohibitions of chapter 573, Government Code, are summarized below:

An officer may not appoint, or vote for or confirm the appointment or employment of any person related within the second degree of affinity (marriage) or the third degree by consanguinity (blood) to the officer, or to any other member of the governing body of a court on which the officer serves when the compensation of that person is to be paid out of public funds or fees of office. However, nothing in the law prevents the appointment, voting for, or confirmation of anyone who has been continuously employed in the office or employment for the following period prior to the election or appointment of the officer or member related to the employee in the prohibited degree: six months, if the officer or member is elected at an election other than the general election for state and county officers.

A candidate may not take action to influence an employee of the office to which the candidate is seeking election or an employee of the governmental body to which the candidate is seeking election regarding the appointment or employment of a person related to the candidate in a prohibited degree as noted above. This prohibition does not apply to a candidate's actions with respect to a bona fide class or category of employees or prospective employees.

FOOTNOTES

An application for a place on the ballot, including any accompanying petition, is public information immediately on its filing. (Section 141.035, Texas Election Code)

Inclusion of a candidate's VUID is optional. However, many candidates are required to be registered voters in the territory in which the office is elected at the time of the filing deadline. Please visit the Elections Division of the Secretary of State's website for additional information. <http://www.sos.state.tx.us/elections/laws/hb484-faq.shtml>

Proof of release from the resulting disabilities of a felony conviction would include proof of judicial clemency under Texas Code of Criminal Procedure 42A.701, proof of executive pardon under Texas Code of Criminal Procedure 48.01, or proof of a restoration of rights under Texas Code of Criminal Procedure 48.05. (Texas Attorney General Opinion KP-0251)

Each of the following documents must be submitted with this application.

- Judicial Clemency under Texas Code of Criminal Procedure 42A.701
- Executive Pardon under Texas Code of Criminal Procedure 48.01
- Restoration of Rights under Texas Code of Criminal Procedure 48.05

Oaths, affidavits, or affirmations made within this State may be administered and a certificate of the fact given by a judge, clerk, or commissioner of any court of record, a notary public, a justice of the peace, city secretary (for a city office), and the Secretary of State of Texas. See Chapter 602 of the Texas Government Code for the complete list of persons authorized to administer oaths.

APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

FORM CTA
PG 1

See CTA Instruction Guide for detailed instructions.

1 Total pages filed:

2 CANDIDATE
NAME

MS / MRS / MR

FIRST

MI

Mr. David Craig

NICKNAME

LAST

SUFFIX

Craig Hawkesworth

3 CANDIDATE
MAILING
ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

PO Box 6605 Argyle TX 76226

4 CANDIDATE
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(972) 567-3643

5 OFFICE
HELD
(if any)

ALSO Trustee, Place 1

6 OFFICE
SOUGHT
(if known)

ALSO Trustee, Place 1

7 CAMPAIGN
TREASURER
NAME

MS/MRS/MR

FIRST

MI

NICKNAME

LAST

SUFFIX

Mr. Jason Wylie

8 CAMPAIGN
TREASURER
STREET
ADDRESS
(residence or business)

STREET ADDRESS;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

801 W. Front Street Argyle TX 76226

9 CAMPAIGN
TREASURER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(817) 262 0902

10 CANDIDATE
SIGNATURE

I am aware of the Nepotism Law, Chapter 573 of the Texas Government Code.

I am aware of my responsibility to file timely reports as required by title 15 of the Election Code.

I am aware of the restrictions in title 15 of the Election Code on contributions from corporations and labor organizations.



Signature of Candidate

1-18-2023

Date Signed

OFFICE USE ONLY

Filer ID #

Date Received 1-23-2023

Date Hand-delivered or Postmarked

1-23-2023

Receipt #

Amount \$

Date Processed

Date Imaged

GO TO PAGE 2

**CANDIDATE MODIFIED
REPORTING DECLARATION**

**FORM CTA
PG 2**

11 CANDIDATE
NAME

12 MODIFIED
REPORTING
DECLARATION

**COMPLETE THIS SECTION ONLY IF YOU ARE
CHOOSING MODIFIED REPORTING**

**** This declaration must be filed no later than the 30th day before
the first election to which the declaration applies. ****

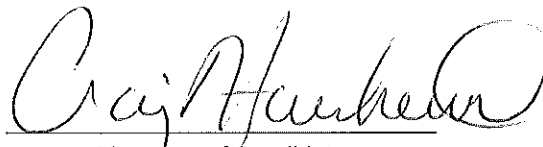
**** The modified reporting option is valid for one election cycle only. ****
(An election cycle includes a primary election, a general election, and any related runoffs.)

**** Candidates for the office of state chair of a political party
may NOT choose modified reporting. ****

I do not intend to accept more than \$940 in political contributions
or make more than \$940 in political expenditures (excluding filing
fees) in connection with any future election within the election
cycle. I understand that if either one of those limits is exceeded, I
will be required to file pre-election reports and, if necessary, a
runoff report.

2023

Year of election(s) or election cycle to
which declaration applies



Signature of Candidate

This appointment is effective on the date it is filed with the appropriate filing authority.

TEC Filers may send this form to the TEC electronically at treasappoint@ethics.state.tx.us
or mail to
Texas Ethics Commission
P.O. Box 12070
Austin, TX 78711-2070

Non-TEC Filers must file this form with the local filing authority
DO NOT SEND TO TEC

For more information about where to file go to:
<https://www.ethics.state.tx.us/filinginfo/QuickFileAReport.php>

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

FORM CIS

(Instructions for completing and filing this form are provided on the next page.)

This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.

This is the notice to the appropriate local governmental entity that the following local government officer has become aware of facts that require the officer to file this statement in accordance with Chapter 176, Local Government Code.

OFFICE USE ONLY

Date Received 1-23-2023

ym

1 Name of Local Government Officer

Craig Hawkesworth

2 Office Held

ALSO Trustee, Place 1

3 Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code

Five Stones Safety, LLC

4 Description of the nature and extent of each employment or other business relationship and each family relationship with vendor named in item 3.

President / Founder

5 List gifts accepted by the local government officer and any family member, if aggregate value of the gifts accepted from vendor named in item 3 exceeds \$100 during the 12-month period described by Section 176.003(a)(2)(B).

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 SIGNATURE

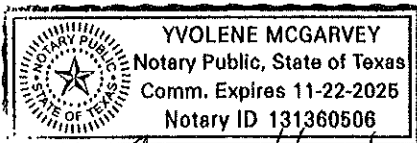
I swear under penalty of perjury that the above statement is true and correct. I acknowledge that the disclosure applies to each family member (as defined by Section 176.001(2), Local Government Code) of this local government officer. I also acknowledge that this statement covers the 12-month period described by Section 176.003(a)(2)(B), Local Government Code.

Craig Hawkesworth
Signature of Local Government Officer

Please complete either option below:

(1) Affidavit

NOTARY STAMP/SEAL



Sworn to and subscribed before me by CRAIG HAWKESWORTH this the 23rd day of January 2023, to certify which, witness my hand and seal of office.

Yvylene McGarvey YVOLENE MCGARVEY
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 Local Government Officer (Declarant)

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

Section 176.003 of the Local Government Code requires certain local government officers to file this form. A "local government officer" is defined as a member of the governing body of a local governmental entity; a director, superintendent, administrator, president, or other person designated as the executive officer of a local governmental entity; or an agent of a local governmental entity who exercises discretion in the planning, recommending, selecting, or contracting of a vendor. This form is required to be filed with the records administrator of the local governmental entity not later than 5 p.m. on the seventh business day after the date on which the officer becomes aware of the facts that require the filing of this statement.

A local government officer commits an offense if the officer knowingly violates Section 176.003, Local Government Code. An offense under this section is a misdemeanor.

Refer to chapter 176 of the Local Government Code for detailed information regarding the requirement to file this form.

INSTRUCTIONS FOR COMPLETING THIS FORM

The following numbers correspond to the numbered boxes on the other side.

- 1. Name of Local Government Officer.** Enter the name of the local government officer filing this statement.
- 2. Office Held.** Enter the name of the office held by the local government officer filing this statement.
- 3. Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code.** Enter the name of the vendor described by Section 176.001(7), Local Government Code, if the vendor: a) has an employment or other business relationship with the local government officer or a family member of the officer as described by Section 176.003(a)(2)(A), Local Government Code; b) has given to the local government officer or a family member of the officer one or more gifts as described by Section 176.003(a)(2)(B), Local Government Code; or c) has a family relationship with the local government officer as defined by Section 176.001(2-a), Local Government Code.
- 4. Description of the nature and extent of each employment or other business relationship and each family relationship with vendor named in item 3.** Describe the nature and extent of the employment or other business relationship the vendor has with the local government officer or a family member of the officer as described by Section 176.003(a)(2)(A), Local Government Code, and each family relationship the vendor has with the local government officer as defined by Section 176.001(2-a), Local Government Code.
- 5. List gifts accepted, if the aggregate value of the gifts accepted from vendor named in item 3 exceeds \$100.** List gifts accepted during the 12-month period (described by Section 176.003(a)(2)(B), Local Government Code) by the local government officer or family member of the officer from the vendor named in item 3 that in the aggregate exceed \$100 in value.
- 6. Signature.** Signature of local government officer. Complete this section after you finish the rest of this report. You have the option to either: (1) take the completed form to a notary public where you will sign above the first line that says "Signature of Local Government Officer" (an electronic signature is not acceptable) and your signature will be notarized, or (2) sign above both lines that say "Signature of Local Government Officer (Declarant)" (an electronic signature is not acceptable), and fill out the unsworn declaration section.

Local Government Code § 176.001(2-a): "Family relationship" means a relationship between a person and another person within the third degree by consanguinity or the second degree by affinity, as those terms are defined by Subchapter B, Chapter 573, Government Code.

Local Government Code § 176.003(a)(2)(A):

(a) A local government officer shall file a conflicts disclosure statement with respect to a vendor if:

(2) the vendor:

(A) has an employment or other business relationship with the local government officer or a family member of the officer that results in the officer or family member receiving taxable income, other than investment income, that exceeds \$2,500 during the 12-month period preceding the date that the officer becomes aware that:

- (i) a contract between the local governmental entity and vendor has been executed; or
- (ii) the local governmental entity is considering entering into a contract with the vendor.

CODE OF FAIR CAMPAIGN PRACTICES

FORM CFCP
COVER SHEET

Pursuant to chapter 258 of the Election Code, every candidate and political committee is encouraged to subscribe to the Code of Fair Campaign Practices. The Code may be filed with the proper filing authority upon submission of a campaign treasurer appointment form. Candidates or political committees that already have a current campaign treasurer appointment on file as of September 1, 1997, may subscribe to the code at any time.

Subscription to the Code of Fair Campaign Practices is voluntary.

OFFICE USE ONLY

Date Received

2-07-2023

JCM

Date Hand-delivered or Postmarked

Date Processed

Date Imaged

1 ACCOUNT NUMBER
(Ethics Commission Filers)

2 TYPE OF FILER

CANDIDATE

POLITICAL COMMITTEE

If filing as a candidate, complete boxes 3 - 6, then read and sign page 2.

If filing for a political committee, complete boxes 7 and 8, then read and sign page 2.

3 NAME OF CANDIDATE
(PLEASE TYPE OR PRINT)

TITLE (Dr., Mr., Ms., etc.)

FIRST

MI

Mr

David

C

NICKNAME

LAST

SUFFIX (SR., JR., III, etc.)

Hawkeswooth

4 TELEPHONE NUMBER OF CANDIDATE
(PLEASE TYPE OR PRINT)

AREA CODE

PHONE NUMBER

EXTENSION

(972) 567 3643

5 ADDRESS OF CANDIDATE
(PLEASE TYPE OR PRINT)

STREET/PO BOX;

APT./SUITE#;

CITY;

STATE;

ZIP CODE

1835 Creeksview Ct Argyle TX 76206

6 OFFICE SOUGHT BY CANDIDATE
(PLEASE TYPE OR PRINT)

ALSO Board of Trustees Place 1

7 NAME OF COMMITTEE
(PLEASE TYPE OR PRINT)

8 NAME OF CAMPAIGN TREASURER
(PLEASE TYPE OR PRINT)

TITLE (Dr., Mr., Ms., etc.)

FIRST

MI

Mr

Jason

NICKNAME

LAST

SUFFIX (SR., JR., III, etc.)

Wylie

GO TO PAGE 2

CODE OF FAIR CAMPAIGN PRACTICES

There are basic principles of decency, honesty, and fair play that every candidate and political committee in this state has a moral obligation to observe and uphold, in order that, after vigorously contested but fairly conducted campaigns, our citizens may exercise their constitutional rights to a free and untrammelled choice and the will of the people may be fully and clearly expressed on the issues.

THEREFORE:

- (1) I will conduct the campaign openly and publicly and limit attacks on my opponent to legitimate challenges to my opponent's record and stated positions on issues.
- (2) I will not use or permit the use of character defamation, whispering campaigns, libel, slander, or scurrilous attacks on any candidate or the candidate's personal or family life.
- (3) I will not use or permit any appeal to negative prejudice based on race, sex, religion, or national origin.
- (4) I will not use campaign material of any sort that misrepresents, distorts, or otherwise falsifies the facts, nor will I use malicious or unfounded accusations that aim at creating or exploiting doubts, without justification, as to the personal integrity or patriotism of my opponent.
- (5) I will not undertake or condone any dishonest or unethical practice that tends to corrupt or undermine our system of free elections or that hampers or prevents the full and free expression of the will of the voters, including any activity aimed at intimidating voters or discouraging them from voting.
- (6) I will defend and uphold the right of every qualified voter to full and equal participation in the electoral process, and will not engage in any activity aimed at intimidating voters or discouraging them from voting.
- (7) I will immediately and publicly repudiate methods and tactics that may come from others that I have pledged not to use or condone. I shall take firm action against any subordinate who violates any provision of this code or the laws governing elections.

I, the undersigned, candidate for election to public office in the State of Texas or campaign treasurer of a political committee, hereby voluntarily endorse, subscribe to, and solemnly pledge myself to conduct the campaign in accordance with the above principles and practices.


Signature


2-7-23
Date

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME DAVID CRAIG HAWKESWORTH		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 1,782.13
	4. TOTAL POLITICAL EXPENDITURES	\$ 1,782.13
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	\$ 0.00

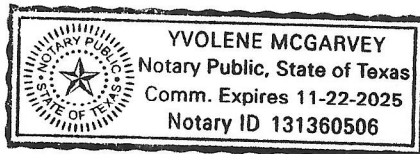
18 SIGNATURE I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



 Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP/SEAL

Sworn to and subscribed before me by CRAIG HAWKESWORTH this the 4th day of April, 2023, to certify which, witness my hand and seal of office.

Yvylene MCGarvey 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)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE

SUBTOTAL
AMOUNT

1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	SCHEDULE E: LOANS	\$
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	■ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 1,782.13
9.	■ SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 1,782.13
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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 A2:	
2 FILER NAME DAVID CRAIG HAWKESWORTH		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 250.00	
5 Date 03/21/2023	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTY B'S RESTARAUNT 7 Contributor address; City; State; Zip Code 2644 407 E BARTONVILLE, TX 76226	8 Amount of Contribution \$ 250.00	9 In-kind contribution description EVENT SPACE <small>Check if travel outside of Texas. Complete Schedule T.</small>
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) OWNER OPERATOR		11 Employer (FOR NON-JUDICIAL)(See Instructions) MARTY B'S RESTARAUNT	
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	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of Contribution \$	In-kind contribution description <small>Check if travel outside of Texas. Complete Schedule T.</small>
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.			

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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 F4:	2 FILER NAME DAVID CRAIG HAWKESWORTH	3 Filer ID (Ethics Commission Filers)
-----------------------------------	--	--

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 1,782.13
--	--------------------

5 Date 02/20/2023	6 Payee name DIRT CHEAP SIGNS
-----------------------------	---

7 Amount (\$) 768.75	8 Payee address; 6706 LOHMAN FORD RD LAGO VISTA, TEXAS 78645	City;	State;	Zip Code
---------------------------------------	--	-------	--------	----------

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 EXPENSE	(b) Description CAMPAIGN SIGNS
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	

11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name CRAIG HAWKESWORTH	Office sought ARGYLE ISD TRUSTEE - PLACE 1	Office held ARGYLE ISD TRUSTEE - PLACE 1
--	---	---	---

Date 03/20/2023	Payee name DIRT CHEAP SIGNS
--------------------	--------------------------------

Amount (\$) 384.63	Payee address; 6706 LOHMAN FORD RD LAGO VISTA, TEXAS 78645	City;	State;	Zip Code
------------------------------	---	-------	--------	----------

TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
----------------------------	---	--

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	Description CAMPAIGN SIGNS
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name CRAIG HAWKESWORTH	Office sought ARGYLE ISD TRUSTEE - PLACE 1	Office held ARGYLE ISD TRUSTEE - PLACE 1
--	---	---	---

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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 F4:	2 FILER NAME DAVID CRAIG HAWKESWORTH	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$
5 Date 03/30/2023	6 Payee name THE CROSS TIMBERS GAZETTE	
7 Amount (\$) 590.75	8 Payee address; City; State; Zip Code 6101 LONG PRAIRIE RD FLOWER MOUND, TX 75208	
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 EXPENSE	(b) Description NEWSPAPER AD
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name CRAIG HAWKESWORTH	Office sought ARGYLE ISD TRUSTEE - PLACE 1
		Office held ARGYLE ISD TRUSTEE - PLACE 1
Date 3/15/23	Payee name Facebook Post Boost	
Amount (\$) 39.05	Payee address; City; State; Zip Code No Receipt	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description
	(c) Check if travel outside of Texas. Complete Schedule T. 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		



**6706 LOHMAN FORD RD.
LAGO VISTA, TX 78645
888-255-5541**



SALES RECEIPT

DATE	ORDER #
2/20/2023	157404

Sold To
Craig Hawkesworth PO Box 665 Argyle, TX 76226 US

Ship To
Craig Hawkesworth Pick up from facility Lago Vista, TX 78645 US

CC/Check #	Pymt Method	Sales Rep	Ship Via	P.O. # / Job Name
3006	American E...	Laine	Cust Pickup	

Qty	Item	Description	Price Each	Amount
100	YARDSI...	Yard Signs, 18 x24 , White, Corrugated Plastic 4mil, vertical flutes, double side print	2.50	250.00T
25	CP	32x48 double sided corro	17.75	443.75T
100	HSTAKE...	Wire H-Stake 15 Inch, 15	0.75	75.00T
Shipment Carrier: ; Shipment Method: PickUp from Office Payment Method: 3006; Transaction ID: 43952620441				

<i>Thank you for your business!</i>	Subtotal	\$768.75
	Sales Tax (8.2...	\$63.42
	Total	\$832.17

SALES RECEIPT

6706 LOHMAN FORD RD.
LAGO VISTA, TX 78645
888-255-5541



Total Amount : \$768.75

American Express

No additional transfer fees or taxes apply.

Payment services brought by:

Intuit Payments Inc.

2700 Coast Avenue, Mountain View, CA 94043

Phone number 1 - 888 - 536 - 4801

NMLS #1098819

For more information about Intuit Payments' money transmission licenses, please visit
<https://www.intuit.com/legal/licenses/payment-licenses/>.

Thank you for your business!



6706 LOHMAN FORD RD.
LAGO VISTA, TX 78645
888-255-5541



SALES RECEIPT

DATE	ORDER #
3/20/2023	158841

Sold To
Craig Hawkesworth PO Box 665 Argyle, TX 76226

Ship To
Craig Hawkesworth 1835 Creek View Court Argyle, TX 76226

CC/Check #	Pymt Method	Sales Rep	Ship Via	P.O. # / Job Name
3006	American E...	Laine	FedEx	

Qty	Item	Description	Price Each	Amount
100	H-Stakes ...	15" H-Stakes	0.75	75.00T
100	CP1824	18"x24" Corrugated Plastic Signs, digital print, white, double sided	2.50	250.00T
	S&H	Shipping & Handling	59.63	59.63T

<i>Thank you for your business!</i>	Subtotal	\$384.63
	Sales Tax (8.2...)	\$31.73
	Total	\$416.36

SALES RECEIPT

**6706 LOHMAN FORD RD.
LAGO VISTA, TX 78645
888-255-5541**



Total Amount : \$384.63

American Express

No additional transfer fees or taxes apply.

Payment services brought by:

Intuit Payments Inc.

2700 Coast Avenue, Mountain View, CA 94043

Phone number 1 - 888 - 536 - 4801

NMLS #1098819

For more information about Intuit Payments' money transmission licenses, please visit
<https://www.intuit.com/legal/licenses/payment-licenses/>.

Thank you for your business!



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www.CrossTimbersGazette.com

Miller Media Holdings LLC
 6101 Long Prairie Rd
 Ste 744-186
 Flower Mound, TX 75028
 940-728-8284
 max@crosstimbersgazette.com

Invoice

Date	Invoice #
3/30/2023	22057

Bill To:

Craig Hawkesworth for School Board
 Craig Hawkesworth

Terms:
 Due on receipt

Item	Description	Month(s)	Amount
Newspaper Ad - HP	Half-Page - Political Rate	Apr 2023	590.75
Total			\$590.75
Payments / Credits			\$0.00
Thank you for your business!			Balance Due \$590.75

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:			
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR MR	FIRST DAVID	MI C	OFFICE USE ONLY Date Received 4-28-2023 <i>Ym</i>		
	NICKNAME CRAIG	LAST HAWKESWORTH	SUFFIX			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1835 CREEKVIEW CT ARGYLE, Tx 76226					
	Date Hand-delivered or Date Postmarked 4-28-23 <i>Ym</i>					
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE (972)	PHONE NUMBER 567-3643	EXTENSION	Receipt #		
	Date Processed			Amount \$		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR MR	FIRST JASON	MI	Date Imaged		
	NICKNAME	LAST WYLIE	SUFFIX			
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 801 WEST FRONT STREET ARGYLE, TEXAS 76226					
	Date Imaged					
8 CAMPAIGN TREASURER PHONE	AREA CODE (817)	PHONE NUMBER 262-0902	EXTENSION			
	9 REPORT TYPE					
<input 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 checked="" 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	Month	Day	Year
	4	6	23	THROUGH	4	28
11 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month	Day	Year	Primary	Runoff	Other Description
			5	6	23	<input checked="" type="checkbox"/> General <input type="checkbox"/> Special
12 OFFICE	OFFICE HELD (if any) AISD TRUSTEE PLACE 1			13 OFFICE SOUGHT (if known) AISD TRUSTEE PLACE 1		
	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	COMMITTEE NAME				
	GENERAL	COMMITTEE ADDRESS				
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME				
		COMMITTEE CAMPAIGN TREASURER ADDRESS				

GO TO PAGE 2

rec. 4-28
ym

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

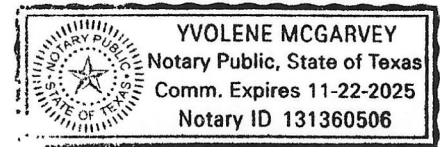
15 C/OH NAME DAVID CRAIG HAWKESWORTH		16 Filer ID (Ethics Commission Filers)	
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	487.67
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	\$	

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.

Craig Hawkesworth
Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP/SEAL

Sworn to and subscribed before me by CRAIG HAWKESWORTH this the 28th day of APRIL, 2023, to certify which, witness my hand and seal of office.

Yvylene McGarvey Signature of officer administering oath
Yvylene McGARVEY Printed name of officer administering oath
Title of officer administering oath

OR

(2) Unsworn Declaration

My name is David Craig Hawkesworth, and my date of birth is 09/25/1969.
My address is 1835 Creekview Ct., Argyle, TX, 76226, USA.
(street) (city) (state) (zip code) (country)
Executed in Denton County, State of Texas, on the 04 day of 27, 2023.
(month) (year)

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

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

19 FILER NAME DAVID CRAIG HAWKESWORTH		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. SCHEDULE E: LOANS		\$
5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS		\$
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 487.67
9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS		\$ 487.67
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH		\$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER		\$

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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 F4:	2 FILER NAME DAVID CRAIG HAWKESWORTH	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 487.67
5 Date 04/25/2023	6 Payee name DONUT PARADISE	
7 Amount (\$) 48.48	8 Payee address; City; State; Zip Code	
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) FOOD & BEVERAGE	(b) Description DONUTS
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name DAVID CRAIG HAWKESWORTH	Office sought AISD BOARD, TRUSTEE PLACE 1
		Office held AISD BOARD, TRUSTEE PLACE 1
Date 04/26/2023	Payee name FEDEX OFFICE	
Amount (\$) 81.19	Payee address; City; State; Zip Code	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	Description INFORMATIONAL FLYER
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name DAVID CRAIG HAWKESWORTH	Office sought AISD BOARD, TRUSTEE PLACE 1
		Office held AISD BOARD, TRUSTEE PLACE 1

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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 F4:	2 FILER NAME DAVID CRAIG HAWKESWORTH	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 487.67
5 Date 04/13/2023	6 Payee name FACEBOOK	
7 Amount (\$) 140.00	8 Payee address; City; State; Zip Code	
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 EXPENSE	(b) Description POST BOOSTS
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name DAVID CRAIG HAWKESWORTH	Office sought AISD BOARD, TRUSTEE PLACE 1
		Office held AISD BOARD, TRUSTEE PLACE 1
Date 04/25/2023	Payee name MICHELLE SCHMIDT	
Amount (\$) 218.00	Payee address; City; State; Zip Code	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) EVENT EXPENSE	Description ICE CREAM TRUCK - MEET THE CANDIDATE
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name DAVID CRAIG HAWKESWORTH	Office sought AISD BOARD, TRUSTEE PLACE 1
		Office held AISD BOARD, TRUSTEE PLACE 1

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

craighawk@verizon.net

From: no-reply.ecommerce@fedex.com
Sent: Tuesday, April 25, 2023 4:44 PM
To: Craig Hawkesworth
Subject: FedEx Office® Print On Demand—Order Completion (Order 2010352574844186)



This is an automated response. Please do not reply to this email.

Dear Craig Hawkesworth,

Thank you for choosing FedEx Office. This email confirms your order has been prepared and is ready for you to pick up at the FedEx Office at 1601 Village Pkwy Ste 1500, San Jose, CA 95128-75077 US

If you have any questions concerning your order, please call the FedEx Office at 1.800.GoFedEx. The person who produced the order and ask for the Project Coordinator. For your reference, the order number is 2010352574844186.

If you have questions about this order (or other comments or concerns) please contact a team member at **1.800.GoFedEx 1.800.463.3339**.

All jobs produced by customers will be retained for 30 days after the order is completed and a receipt is issued, at which time you will be charged for the completed job if you have not picked up the order. FedEx Office is not responsible for retaining any work not picked up within the 30 day period and is entitled to collect and retain payment for all work produced on the customer's behalf.

ORDER -- SUMMARY DETAILS

Order Number: 2010352574844186

Order Price

Subtotal: \$75.00

Tax: \$6.19

Total: \$81.19

Payment By: Credit Card

See order details for each recipient below.

ORDER DETAIL – Part 1

Job Number: 2010352574844186

FedEx Office Store Producing Order: 1601 Village Pkwy Ste 150 Highlan

Phone: 972.317.3078

Email: usa2198@fedex.com

Order Completion Date: Apr 26, 2023 at 9:00 AM

Documents: Craig Hawkesworth Re-Election Postcard (250)

Recipient: Hawkesworth, Craig

To be picked up at FedEx Office store (see above)

Price: \$75.00

Tax: \$6.19

Thank you. We look forward to the opportunity to work with you again.

✉ This email has been sent to: craighawk@verizon.net.

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U.S. and international law.

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Payment details




Michelle Schmidt

Ice Cream Truck

-\$224.54

Status
Completed

Payment method
 American Express
Credit · · · 3006

Transaction details
Apr 25, 2023, 4:32 PM

Type of transaction
Friends & Social

Paid to
@txblackbelt

Transaction ID
3789053414615100517

DONUT PARADISE
100 COUNTRY CLUB ROAD
ARGYLE, TX 76226
9404647173

25-Apr-2023 7:45:09A

Transaction **000026**
1 L Jalopeño \$2.89
1 Glazed Dozen \$10.50
1 Half & Half Dozen \$10.75

Subtotal \$24.14
Sales Tax 8.25% \$0.24

Total \$24.38
Tip \$3.66
CREDIT CARD SALE \$28.04
AMEX 3006

Retain this copy for statement validation

25-Apr-2023 7:45:43A
\$28.04 | Method: EMV
AMERICAN EXPRESS XXXXXXXXXXXXX3006
CRAIG HAWKESWORTH
Reference ID: 311500522480 | Auth ID:
834764
MID: *****5887
AID: A000000025010801
AthNtwkNm: AMEX

Online: <https://clover.com/p/H9CEC2PDA62AC>

Clover ID: N15QX21KHKP98
Payment H9CEC2PDA62AC

Clover Privacy Policy
<https://clover.com/privacy>

DONUT PARADISE
100 COUNTRY CLUB ROAD
ARGYLE, TX 76226
9404647173

27-Apr-2023 7:33:42A

Transaction **000023**
6 Old Fashion \$8.94
1 L Jalopeño \$2.89
6 Glazed \$5.70

Subtotal \$17.53
Sales Tax 8.25% \$0.24

Total \$17.77
Tip \$2.67
CREDIT CARD SALE \$20.44
AMEX 3006

Retain this copy for statement validation

27-Apr-2023 7:34:16A
\$20.44 | Method: EMV
AMERICAN EXPRESS XXXXXXXXXXXXX3006
CRAIG HAWKESWORTH
Reference ID: 311700524146 | Auth ID:
829322
MID: *****5887
AID: A000000025010801
AthNtwkNm: AMEX

Online: <https://clover.com/p/5QR2WJSYBDHKW>

Clover ID: 0MGJ6DKYRHWSM
Payment 5QR2WJSYBDHKW

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