The C/OH Instruction (Guide explains how to complete t	his form. 1 Filer ID		2 Total pages filed: 26
CANDIDATE / OFFICEHOLDER NAME	Land a control of the	RST	MI	OFFICE USE ONLY Date Received U 24 FILED JCYCE HUDMAN
	NICKNAME LA He	ST enry	SUFFIX	COUNTY CLERK BRAZORL
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SU 4849 CR747A	IITE#; CITY;	ZIP CODE	Dale Hand-delivered Police Postmanged Receipt # Arrount
Change of Address	Brazoria, TX 77422			Date Processed Date Imaged
5 CAMPAIGN	MS/MRS/MR FIR	ST	MI	
TREASURER NAME		Lucinda	М	

	NICKNAME LAS	st Henry	SUFFIX	
G CAMPAIGN TREASURER ADDRESS (Residence or Business)		Henry	APT / SUITE #; CITY Braz	
TREASURER ADDRESS	STREET ADDRESS (NO PO BO)	Henry (PLEASE);	APT / SUITE #; CITY Braz	77400
TREASURER ADDRESS (Residence or Business) 7 CAMPAIGN TREASURER	STREET ADDRESS (NO PO BO) 4849 CR747 A AREA CODE PHONE N 979-236-8588	Henry (PLEASE);	APT / SUITE #; CITY Braz	77400
TREASURER ADDRESS (Residence or Business) 7 CAMPAIGN TREASURER PHONE 8 REPORT	STREET ADDRESS (NO PO BO) 4849 CR747 A AREA CODE PHONE N 979-236-8588	Henry K PLEASE); UMBER EXTENSION 30th day before election	APT / SUITE #; CITY Braz	15th day after campaign treasurer appointment (officeholder only) Final Report (Attach C/OH-FR)
TREASURER ADDRESS (Residence or Business) 7 CAMPAIGN TREASURER PHONE 8 REPORT TYPE	STREET ADDRESS (NO PO BO) 4849 CR747 A AREA CODE PHONE N 979-236-8588 X January 15	Henry K PLEASE); UMBER EXTENSION Both day before election [APT / SUITE #; CITY Braz	15th day after campaign treasurer appointment (officeholder only) Final Report (Attach C/OH-FR)

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

SUFFURI	XIOIALJ			2 of 26
13 C / OH NAME	Henry, Kevin		14 Filer ID	
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	iolitical contributions accepted or political expenditu These expenditures may have been made without of officeholders are required to report this information	the candidate's or officeho	older's knowledge or
Additional Pages	COMMITTEE TYPE GENERAL	COMMITTEE NAME		
	SPECIFIC	COMMITTEE ADDRESS		
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
16 CONTRIBUTION TOTALS	1	LIZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	S)	\$ 5,102.10
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITIC	AL EXPENDITURES	massion and the contribution of an incident charles of a fill factor in the state of a called	\$ 28,874.53
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 12,459.99
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS ITING PERIOD	OF THE LAST DAY	\$ 2,738.22
Sworn to and subso	ROSCHELLE L HICKS Notary ID #13161370 My Cemmission Expiration 20, 2026 FARY STAMP / SEAL AB Tribed before me, by the s	true and correct and includes a under Title 15, Election Code.		pe reported by me
Signature of office	er administering	Printed name of officer administering	Title of officer a	dministering oath

FORM C/OH **SUBTOTALS - C/OH COVER SHEET PG 3** 3 of 26 **18 FILER NAME** 19 Filer ID Henry, Kevin **20 SCHEDULE SUBTOTALS** SUBTOTAL AMOUNT NAME OF SCHEDULE 1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 4,602.10 2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS 500.00 \$ SCHEDULE B: PLEDGED CONTRIBUTIONS \$ SCHEDULE E: LOANS \$ SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 13,048.58 S SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD 8. X \$ 12,561.01 SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS 9. X 3,264.94 SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 10. \$ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 11. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 12. \$

www.ethics.state.tx.us

Forms provided by Texas Ethics Commission

Version V3.5.1.0bfcfb67

MONET	ARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The Instruc	tion Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 1/5 Rpt: 4/26
2 FILER NAME		3 Filer ID
Henry, Kevin		
4 Date	5 Full name of contributor	7 Amount of Contribution (\$)
12/31/2023	Beard, Daniel (Mr.)	\$260
	6 Contributor address; City; State; Zip Code	
	Lake Jackson, TX 77566	
B Principal occur	nation / Job title (See Instructions) 9 Employer (See	ee Instructions)
- · · · · · · · · · · · · · · · · · · ·		,
Date	Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
10/28/2023	Borne, Janice (Mrs.)	\$100
	Contributor address; City; State; Zip Code	77///WWW.001-0
	A. h. TV TYPE	
manager de annu	Angelton, TX 77515	
Pieriki (All	action / Job title (See Instructions) Employer (See	ee Instructions)
Date	Full name of contributor) Amount of Contribution (\$)
11/02/2023	Borne, Janice (Mrs.)	\$100
	Contributor address; City; State; Zip Code	***************************************
	A	
Dringing cons	Angelton, TX 77515 ation / Job title (See Instructions) Employer (See	ee Instructions)
rancipa occu	and 17 300 title (See instructions)	se manutaris)
Date	Full name of contributor out-of-state PAC (ID#	
11/27/2023	Bottenfield, Gerald (Mr.)	\$500
	Contributor address; City, State; Zip Code	
	Lake Taskess TV 77FCC	
Dringing con	Lake Jackson, TX 77566 vation / Job title (See Instructions) Employer (See	ee Instructions)
rincipal occu	Maudi / Job title (See Histauctions)	e manuciona)
Date	Full name of contributor ut-of-state PAC (ID#:	Amount of Contribution (\$)
12/31/2023	Broom, Jansen (Mr.)	\$104
	Contributor address; City; State; Zip Code	PPOPPE PRODUCTION DAMAGE
	Lake Jackson, TX 77566	
Princinal occur		ee Instructions)
	Empoya (occ	· · · · · · · · · · · · · · · · · · ·
photo-the-state transfer and the state to the		an kanangan a yaya ya maran a kanan a dawan a dawa a dawa a kanan a kanan a kanan a kanan a kanan a kanan a
orms provided	y Texas Ethics Commission www.ethics.state.tx.us	Version V3.5.1.0bfc

	MONET	ARY POLITICAL CONTRIBUTION	DNS	SCHEDU	LE A1
	The Instru	ction Guide explains how to complete this fo	1 Total pages Schedule A1: Sch: 2/5 Rpt: 5/26		
2	FILER NAME Henry, Kevir			3 Filer ID	
4	Date 07/04/2023	5 Full name of contributor	7 Amount of Contribution (\$)	\$1,000.00	
8	Principal occu		9 Employer (See Instructions)	
	Date 12/15/2023	Full name of contributor out-of-state PAC (ID#		Amount of Contribution (\$)	\$100.00
	Principal occi	pation / Job title (See Instructions)	Employer (See Instructions)	
	Date 12/31/2023	Full name of contributor out-of-state PAC (ID#: Gregg, Parker (Mr.) Contributor address; City; State; Zip Code Houston, TX 77080		Amount of Contribution (\$)	\$100.00
-	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	7000 TO THE TOTAL THE TOTAL TO THE TOTAL TOT
	Date 07/10/2023	Full name of contributor out-of-state PAC (ID#:_ Harrison, Paul (Mr.) Contributor address; City; State; Zip Code Brazoria, TX 77422		Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	
	Date 12/30/2023	Full name of contributor out-of-state PAC (ID#:_ Hickman, Austin (Mr.) Contributor address; City; State; Zip Code Spring Branch, TX 78070		Amount of Contribution (\$)	\$156.56
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	
Fo	rms provided	by Texas Ethics Commission www.ethics	s.state.tx.us	Version V3.	5.1.0bfcfb6

MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE	A1
The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 3/5 Rpt: 6/26	
2 FILER NAME Henry, Kevin	3 Filer ID	
12/31/2023 King, Craig (Mr.) 6 Contributor address; City, State; Zip Code	7 Amount of Contribution (\$)	\$26.35
Vidor, TX 77662 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)		· · · · · · · · · · · · · · · · · · ·
Date Full name of contributor out-of-state PAC (ID#:) 12/31/2023	Amount of Contribution (\$)	\$52.40
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
12/31/2023 Mares, Tomas (Mr.) Contributor address; City; State; Zip Code Lake Jackson, TX 77566		\$104.48
Principal occupation / Job title (See Instructions) Employer (See Instructions))	genetal and high property and the
Date Full name of contributor out-of-state PAC (ID#:) 12/31/2023 McGuire, Mike (Mr.) Contributor address; City; State; Zip Code Clute, TX 77531	Amount of Contribution (\$)	\$521.15
Principal occupation / Job title (See Instructions) Employer (See Instructions))	***************************************
Date Full name of contributor out-of-state PAC (ID#:) 08/06/2023 Miller, Katherine (Mrs.) Contributor address; City; State; Zip Code Brazoria, TX 77422	Amount of Contribution (\$)	\$400.00
Principal occupation / Job title (See Instructions) Employer (See Instructions)		
Forms provided by Texas Ethics Commission www.ethics.state.tx.us	Version V3.5.1	I Ol-f-a-c

MON	IETAI	RY POLITICAL CONTRIBUTION	DNS		SCHEDUL	E A1
The In:	structio	on Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 4/5 Rpt: 7/26	Own State St
2 FILER N	AME			3	Filer ID	***************************************
Henry, I	Kevin					
4 Date	1	Full name of contributor ut-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	·····
12/31/2	ļ	Olshovsky, Lance (Mr.)				\$52.40
	6	Contributor address; City; State; Zip Code				
		·				
		Lake Jackson, TX 77566		Nacosyllated N		
8 Principal	occupati	on / Job title (See Instructions)	9 Employer (See Instructions	L 5)		***************************************
Date		Full name of contributor ut-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
12/31/20	023	Oxford, Tony (Mr.)				\$100.00
		Contributor address; City; State; Zip Code	perigen a prima a march and an a phi a chair ha prima a a a a a a a a a a a a a a a a a a			
			!			
		Howey In The Hills, FL 34737				
Principal	occupati	on / Job title (See Instructions)	Employer (See Instructions	<u>L</u> 5)		·····
	•	•		•		
Date	······································	Full name of contributor		Π	Amount of Contribution (\$)	
12/31/2	023	Phillips, Sharon (Mrs.)				\$52.40
		Contributor address; City; State; Zip Code	graveta (1744 1744 1744 1744 1744 1744 1744 174			
		West columbia, TX 77486				
Principal	l occupati	on / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
Date		Full name of contributor ut-of-state PAC (ID#:_)		Amount of Contribution (\$)	
12/31/2	023	Price, Beverly (Mrs.)				\$50.00
	ļ	Contributor address; City; State; Zip Code	***************************************			
		Sugar Land, TX 77479				
Principal	occupati	on / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
				-		
Date		Full name of contributor)	Γ	Amount of Contribution (\$)	
12/31/2		Read, Dana (Mrs.)				\$100.00
		Contributor address; City; State; Zip Code				
		Brazoria, TX 77422				
Principal	occupati	on / Job title (See Instructions)	Employer (See Instructions	;)	de de la mentional de la Completion de l	
······································	and the second s					
orms prov	ided by	Texas Ethics Commission www.ethic	s.state.tx.us		Version V3.5	.1.0bfcfb6

ecolar december and a second	MONET	Ā	RY POLITICAL CONTRIBUTIONS		SCHEDUL	E A1
	The Instru	cti	on Guide explains how to complete this form.	1	Total pages Schedule A1: Sch: 5/5 Rpt: 8/26	
2	FILER NAME Henry, Kevi			3	Filer ID	
4	Date 12/28/2023	5	Full name of contributor out-of-state PAC (ID#:) White, Grace (Mrs.) Contributor address; City; State; Zip Code	7	Amount of Contribution (\$)	\$521.15
STOCKE STOCKE		Andrews and the latest and the lates	Ganado, TX 77962			
8	Principal occu	ıpat	ion / Job title (See Instructions) 9 Employer (See Instructions)	3 S)		
	Date 08/06/2023		Full name of contributor out-of-state PAC (ID#:) Wren, Larry (Mr.) Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$100.00
	Principal occi	L spai	Angelton, TX 77515 ion / Job title (See Instructions) Employer (See Instructions)			
For	ms movided	hv	Texas Ethics Commission www.ethics.state.tx.us	nyani yirildi.	Version V3.5	1 Objets

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 9/26 FILER NAME 3 Filer ID Henry, Kevin TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS 6 Full name of contributor Amount of 9 In-kind contribution out-of-state PAC (ID#: contribution (\$) description 07/01/2023 Emola, Charles \$300,001 United Stoves Co: USSC Contributor address; City; State; Zip Code Grills 295 Sq In Pellet Grill - Stainless Houston, TX 77801 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 Full name of contributor out-of-state PAC (ID#: Amount of In-kind contribution contribution (\$) description 07/01/2023 Wenzel, Trey (Mr.) \$200.00 A pair of outdoor Keter Contributor address; City; State; Zip Code Adirondack chairs Richmond, TX 77469 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)

www.ethics.state.tx.us

Version V3.5.1.0bfcfb67

Forms provided by Texas Ethics Commission

POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1 **CONTRIBUTIONS EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Corsulting Expense Contributions/Donations Made By Candidate/Officeholder/Political/Committee Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Fees Food/Beverage Expense Git/Awards/Memorials Expense Transportation Equipment & Related Expense Travel in District Travel Out of District Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 1/2 Rpt: 10/26 Henry, Kevin 4 Date Payee name 12/31/2023 Anedot 6 Amount (S) Payee address; City, State: Zip Code 1340 Poydras Street \$92.30 Suite1770 New Orleans . LA 70112 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Cumulative fundraising fees for December 2023, Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 08/21/2023 Barclay US Credit Card Amount (\$) State; Zip Code Payee address; City; \$5,478.07 PO Box 60517 City of Industry, CA 91716 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Credit Card Payment **EXPENDITURE** Check if Austin, TX, officeholder living expense Credit card payment for political expenditures Complete ONLY if direct Office held Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 08/22/2023 Barclay US Credit Card Amount (\$) Payee address; City; State; Zip Code \$3,995.00 PO Box 60517 City of Industry, CA 91716 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Payment **EXPENDITURE** Credit card payment for political expenditures Candidate/Officeholder name Office held Complete ONLY if direct Office sought expenditure to benefit C/OH

POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1 **CONTRIBUTIONS EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political/Committee Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Event Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District Fees Food/Beverage Expense Git/Amards/Memorials Expense OTHER (enter a category not listed above) Legal Services Salaries/Wages/Contract Labor Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 2/2 Rpt: 11/26 Henry, Kevin 4 Date Payee name 10/11/2023 **Barclay US Credit Card** 6 Amount (S) Payee address; City; State; Zip Code \$1,814.39 PO Box 60517 City of Industry, CA 91716 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Credit Card Payment EXPENDITURE Check if Austin, TX, officeholder living expense Credit card payment for political expenditures 9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 10/16/2023 LVL UP Audio Towers Amount (S) Payee address; State; Zip Code City, \$1,668.82 2620 FM 521 Rd Brazoria, TX 77422 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas, Complete Schedule T, Loan Repayment/Reimbursement **EXPENDITURE** Check if Auslin, TX, officeholder living expense Loan reimbursement for credit card charges paid from business funds. Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Event Expense Fees Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Food/Beverage Expense Git/Aurards/Memorials Expense Poling Expense Printing Expense Travel in District Travel Out of District Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not fisted above) The Instruction Guide explains how to complete this form. 1 Total pages Schedule F4: 2 FILER NAME 3 Filer ID Sch: 1/13 Rpt: 12/26 Henry, Kevin TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date Payee name 07/07/2023 5.11, INC. 7 Amount (\$) Payee address; City; State; Zip Code 16322 Southwest FWY \$336.79 Sugarland, TX 77479 TYPE OF X Political Non-Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Yexas. Complete Schedule T. OTHER: Police Academy Uniforms EXPENDITURE Check if Austin, TX, officeholder living expense Police Academy Training Supplies 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 08/08/2023 **BDM STRATEGIES** Amount (\$) Payee address; State; Zip Code \$3,995.00 2201 Spinks Rd FlowerMound, TX 75022 TYPE OF Non-Political x Political EXPENDITURE **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Consulting Expense Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign Consulting Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Version V3.5.1.0bfcfb67 Forms provided by Texas Ethics Commission www.ethics.state.tx.us

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursemen Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Travel in District Travel Out of District Consulting Expense Contributions/ Donations Made By-Food/Beverage Expense Git/Awards/Memorials Expense Politing Expense Printing Expense 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. Total pages Schedule F4: 2 FILER NAME 3 Filer ID Sch: 2/13 Rpt: 13/26 Henry, Kevin S TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date 6 Payee name **BRAZORIA COUNTY FAIR ASSOCIATION** 09/09/2023 7 Amount (\$) Payee address; City; State; Zip Code \$206.00 901 S Downing St Angleton, TX 77515 TYPE OF x Political Non-Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By EXPENDITURE Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Auction Item -Donation BCYFA Office sought 11 Complete ONLY if direct Candidate/Officeholder name Office held expenditure to benefit C/OH Date Payee name 11/10/2023 **Boot Barn** Amount (\$) Payee address; State; Zip Code \$277.08 2911 Rio Grande Blvd Euless, TX 76039 TYPE OF Non-Political x Political EXPENDITURE **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. OTHER: Professional clothing expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Professional clothing used in video and commercials during filming. Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Version V3.5.1.0bfcfb67 Forms provided by Texas Ethics Commission www.ethics.state.tx.us

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Consulting Expense Contributions! Donations Made By Candidate!Officeholder!Political Committee Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Polling Expense Printing Expense Salaries/Wages/Contract Labor Food/Beverage Expense Git/Awards/Memorials Expense Travel in District Travel Out of District OTHER (enter a category not listed above) Legal Services The Instruction Guide explains how to complete this form. 1 Total pages Schedule F4: 2 FILER NAME 3 Filer ID Sch: 3/13 Rpt: 14/26 Henry, Kevin TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date Payee name 07/07/2023 **CARROLLS GUN SHOP** 7 Amount (\$) State; Zip Code Payee address; City; \$52.28 123 Carroll Rd Wharton, TX 77488 TYPE OF X Political Non-Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. OTHER: Supplies EXPENDITURE Check if Austin, TX, officeholder living expense Police Academy Training Supplies 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/11/2023 CSS Amount (\$) Payee address; City; State; Zip Code \$368.03 7087 HWY 6 Houston, TX 77095 TYPE OF Non-Political x Political EXPENDITURE **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OTHER: Supplies Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Audio visual monitoring devices Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Version V3.5.1.0bfcfb67 Forms provided by Texas Ethics Commission www.ethics.state.tx.us

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political/Committee Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Event Expense Fees Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District Food/Beverage Expense Git/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 Total pages Schedule F4: 2 FILER NAME 3 Filer ID Sch: 4/13 Rpt: 15/26 Henry, Kevin TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD S 5 Date Payee name 11/10/2023 Cavender's Boot City 7 Amount (\$) Payee address; State; Zip Code 1610 S Stemmons FWY \$416.75 Lewisville, TX 75067 TYPE OF X Political Non-Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. OTHER: Professional clothing expense EXPENDITURE Check if Austin, TX, officeholder living expense Professional clothing used in video and commercials during filming. 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name **EIGHTEEN NINETY GRILL** 07/21/2023 Amount (\$) Payee address; State; Zip Code \$154.77 115 E Pearl St Granbury, TX 76048 TYPE OF Non-Political x Political EXPENDITURE **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign Training -Dinner out of town Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Version V3.5.1.0bfcfb67 Forms provided by Texas Ethics Commission www.ethics.state.tx.us

EXPENDITURE	ES MADE BY CREDIT CARD	SCHEDULE F4
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate@Officeholder/Politica	Fees Office Overhe Food/Beverage Expense Polling Exper GitManards/Memorials Expense Printing Expe	nent/Reimbursement Solicitation/Fundralsing Expense ad/Rental Expense Transportation Equipment & Related Expense Travel in District Travel Out of District
	The Instruction Guide explains how to comp	·
1 Total pages Schedule F4: Sch: 5/13 Rpt: 16/26	2 FILER NAME Henry, Kevin	3 Filer ID
TOTAL OF UNITEMI	ZED EXPENDITURES CHARGED TO A CRED	T CARD \$
5 Date 08/25/2023	6 Payee name H-E-B #707	
7 Amount (\$) \$583.39	8 Payee address; City; State; Zip Code 97 Oyster Creek Dr	
9 TYPE OF EXPENDITURE	Lake Jackson, TX 77566 X Political Non-Politic	al
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b) Food/Beverage Expense	Description Check if travel outside at Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Donor Dinner
11 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sough	t Office held
Date 10/20/2023	Payee name J&M CUSTOM SCREEN PRINT	
Amount (\$) \$298.67	Payee address; City; State; Zip Code 1119 N Velasco St	
TYPE OF	Angleton, TX 77515 X Political Non-Politic	Al
EXPENDITURE PURPOSE) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Custom Embroidery for Shirts
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sough	t Office held

EXPENDITURE	ES MADE BY CREDIT	CARD		SCHEDULE F4
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholdes/Politica		Loan Repaym Office Overhe Polling Expense Printing Expense	nent/Reimbursement ead/Rental Expense se	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F4: Sch: 6/13 Rpt: 17/26	The Instruction Guide ex 2 FILER NAME Henry, Kevin	cplains how to comp	lete this form.	3 Filer ID
	ZED EXPENDITURES CHARGE	D TO A CREDI	IT CARD	\$
5 Date 07/22/2023 7 Amount (\$)	6 Payee name KETZLER'S SCHNITZEL HAUS 8 Payee address; City;	State; Zip Code	entrespelations on the property of the state	
\$109.16	201 E Pearl St	·		
9 TYPE OF EXPENDITURE	Granbury, TX 76048 X Political	Non-Politica	al	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Food/Beverage Expense	of this schedule) (b	Check if Austin	outside of Texas. Complete Schedule T. n, TX, officeholder living expense raining -Dinner out of town
11 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sough	t	Office held
Date 09/09/2023	Payee пате LAZ PARKING 610732-T2			
Amount (\$) \$25.70	Payee address; City; 500 Jefferson St Ste 2010 Houston, TX 77002	State; Zip Code		
TYPE OF EXPENDITURE	X Political	Non-Politic	al .	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of OTHER: Training	of this schedule) (b	facility of the second	outside of Texas, Complete Schedule T. b, TX, officeholder living expense raining cost
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sough	t	Office held

	ES MADE BY CREDIT CARD)	SCHEDULE F4
opension de Principal de Brito Porting _{de} la major, a municipa condomination de sec ión de la Colon Portido Po rtido Portido	EXPENDITURE CATEGORIE	S FOR BOX 10(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions! Donations Made By Candidate/Officeholder/Political	Event Expense Lo Fees Of Food/Beverage Expense Po GR/Awards/Memorials Expense Pri	van Repayment/Reimbursement flice Overhead/Rental Expense Ming Expense inting Expense daries/Wages/Contract Labor	Solicitation/Fundralsing Expense Transportation Equipment & Related Expense Travel in District Travel out of District OTHER (enter a category not listed above)
1 Total pages Schedule F4:	2 FILER NAME	[3	3 Filer ID
Sch: 7/13 Rpt: 18/26	Henry, Kevin		
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED TO A	CREDIT CARD	\$
5 Date	6 Payee name	Residence of the second	
08/23/2023	LI DONATION* CAMPAIGN SCHOOL		
7 Amount (\$) \$25.00	8 Payee address; City; State; Z 1101 N Highland ST Arlington, VA 22201	ip Code	
9 TYPE OF EXPENDITURE	X Political No	n-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedul Contributions/Donations Made By Candidate/Officeholder/Political Committee	Check if travel ou	utside of Texas. Complete Schedule T. TX, officeholder living expense ining
11 Complete <u>ONLY</u> if direct expenditure to benefit C/O		ce sought	Office held
Date 08/23/2023	Payee name LI DONATION* CAMPAIGN SCHOOL		
Amount (\$) \$25.00	Payee address; City; State; Z 1101 N Highland ST	ip Code	!
	Arlington, VA 22201		
TYPE OF	X Political No		
EXPENDITURE		n-Political	
	(a) Category (See Categories listed at the top of this schedule Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description Check if travel ou	utside of Texas. Complete Schedule T. IX, officeholder living expense ining
EXPENDITURE PURPOSE OF	(a) Category (See Categories listed at the top of this schedule Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder name Officeholder name	e) (b) Description Check if travel ou Check if Austin, 1	FX, officeholder living expense

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Event Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Fees Food/Beverage Expense Git/Awards/Memorials Expense Polling Expense Printing Expense Travel in District Travel Out of District Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Legal Services The Instruction Guide explains how to complete this form. 1 Total pages Schedule F4: 2 FILER NAME 3 Filer ID Sch: 8/13 Rpt: 19/26 Henry, Kevin \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date 6 Payee name LI DONATION* CAMPAIGN SCHOOL 08/26/2023 7 Amount (\$) Payee address; City; State; Zip Code 1101 N Highland ST \$25.00 Arlington, VA 22201 TYPE OF X Political Non-Political **EXPENDITURE** PURPOSE 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas, Complete Schedule T. Contributions/Donations Made By EXPENDITURE Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Campaign Training Office sought 11 Complete ONLY if direct Candidate/Officeholder name Office held expenditure to benefit C/OH Date Payee name OFFICE DEPOT #2691 12/13/2023 Amount (\$) Payee address; State; Zip Code \$48.36 104 TX-332 Lake Jackson, TX 77566 TYPE OF Non-Political x Political EXPENDITURE **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Mailer supplies Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Version V3.5.1.0bfcfb67 Forms provided by Texas Ethics Commission www.ethics.state.tx.us

EXPENDITURE	ES MADE BY CREDIT	CARD		SCHEDULE F4
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholdet/Politica		Loan Rep Office Ov Polling Ex Printing E Salaries N	ayment/Reimbursement orhead/Rental Expense pense xpense vages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F4: Sch: 9/13 Rpt: 20/26	2 FILER NAME Henry, Kevin			3 Filer ID
	ZED EXPENDITURES CHARGE	D TO A CRE	DIT CARD	S
5 Date 11/04/2023	6 Payee name SQ *BOLING DONUTS			
7 Amount (\$) \$34.63	8 Payee address; City; 11102 FM 1301 Boling, TX 77420	State; Zip Co	ode	
9 TYPE OF EXPENDITURE	X Political	Non-Pol	tical	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Food/Beverage Expense	f this schedule)	Check if Austi	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense eakfast for local police dept.
11 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sou	ght	Office held
Date 08/24/2023	Payee name SQ *JEFF DODSON CAMPAIGI	Į.		
Amount (\$) \$950.00	Payee address; City; 319 Yorktown	State; Zip Co	ode	
TYPE OF	Clute, TX 77531			
EXPENDITURE	X Political	Mon-Pol		kalla suuraa pagaa ka oppas ka oppas saa
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Contributions/Donations Made B Candidate/Officeholder/Political	у	Check if Austin	outside of Texas. Complete Schedule T. n, TX, officeholder living expense auction item at fundraiser
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H Dodson, Jeff (Mr.)	Office sou	-	Office held
Forms provided by Texas E	thics Commission www.e	thics.state.tx.	is	Version V3.5.1.0bfcfb67

EXPENDITURI	ES MADE BY CREDIT (CARD		SCHEDULE F4
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Loan Repay Office Overl Polling Expe e Printing Exp Salaries/Wa	ment/Reimbursement lead/Rental Expense lease ense ense ges/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F4: Sch: 10/13 Rpt: 21/26	2 FILER NAME Henry, Kevin			3 Filer ID
4 TOTAL OF UNITEM	ZED EXPENDITURES CHARGE	D TO A CRED	OIT CARD	s
5 Date 12/22/2023	6 Payee name SQ *THE KOLACHE SHOP			
7 Amount (\$) \$38.38	8 Payee address; City; 220 E San Bernard St Brazoria, TX 77422	State; Zip Cod	e	
9 TYPE OF EXPENDITURE	X Political	Non-Politic	cal	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top o Food/Beverage Expense	f this schedule)	Check if Austin	l outside of Texas. Complete Schedule T. n, TX, officeholder fiving expense eakfast for local police dept.
11 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sough	ht	Office held
Date 08/08/2023	Payee name TXDPS DRIVER RECORD			
Amount (\$) \$4.50	Payee address; City; PO Box 4087	State; Zip Cod	e	
TYPE OF EXPENDITURE	Austin, TX 78773 X Political	Non-Politi	al	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Fees	f this schedule) (Check if Austir	outside of Texas. Complete Schedule T. n, TX, officeholder living expense emy Training Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sough	nt	Office held
Forms provided by Texas E	thics Commission www.e	thics.state.tx.us		Version V3.5.1.0bfcfb6

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Event Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District Advertising Expense Accounting/Banking Fees Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Committee Polling Expense Printing Expense Salaries/Wages/Contract Labor Food/Beverage Expense GiN/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME 3 Filer ID Sch: 11/13 Rpt: 22/26 Henry, Kevin TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date Payee name **VISTAPRINT** 12/04/2023 Payee address; 7 Amount (\$) City; State; Zip Code \$205.67 275 Wyman Street Waltham, MA 02451 TYPE OF X Political Non-Political **EXPENDITURE** 10 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Printing Expense EXPENDITURE Check if Austin, TX, officeholder living expense Christmas card mailers Office held 11 Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 10/05/2023 WAL-MART #0546 Amount (\$) Payee address; State; Zip Code City; 5330 FM 1640 \$56.25 Richmond, TX 77469 TYPE OF Non-Political x Political EXPENDITURE **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign Meeting - Breakfast Provided Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V3.5.1.0bfcfb67

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Solicitation/Fundraising Expense Transportation Equipment & Related Expense Advertising Expense Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Accounting/Banking Fees Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Committee Food/Beverage Expense Git/Awards/Memorials Expense Legal Services Polling Expense Printing Expense Salaries/Wages/Contract Labor Travel in District Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 Total pages Schedule F4: 2 FILER NAME 3 Filer ID Sch: 12/13 Rpt: 23/26 Henry, Kevin TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date Payee name 07/07/2023 WAL-MART #482 State; Zip Code 7 Amount (\$) Payee address; City; \$89.88 301 N Columbia DR West Columbia, TX 77486 TYPE OF X Political Non-Political **EXPENDITURE** 10 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. OTHER: Supplies EXPENDITURE Check if Austin, TX, officeholder living expense Police Academy Training Supplies Office sought 11 Complete ONLY if direct Candidate/Officeholder name Office held expenditure to benefit C/OH Date Payee name 09/12/2023 WALMART.COM Amount (\$) Payee address; State; Zip Code \$159.18 702 SW 8th ST Bentonville, AK 72716 TYPE OF X Political Non-Political **EXPENDITURE** PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense Check if Austin, TX, officeholder living expense Campaign Meeting -Donor Dinner Provided Office sought Complete ONLY if direct Candidate/Officeholder name Office held expenditure to benefit C/OH Version V3.5.1.0bfcfb67 Forms provided by Texas Ethics Commission www.ethics.state.tx.us

EXPENDITURI	ES MADE BY CREDIT	CARD		SCHEDULE F4		
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politics	Event Expense Fees Food/Beverage Expense y - GéNAvands/Memorials Exper	Office Overho Polling Expense Printing Expe Salaries/Wag	nent/Reimbursement ead/Rental Expense ise inse es/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1 Total pages Schedule F4:		adalah kempunya di Alang dan ang Katalah Abrasil kelabah dan berbahan Berah (Abra P kari	readatablesteriore orași par per ace din provinci	3 Filer ID		
Sch: 13/13 Rpt: 24/26	Henry, Kevin					
TOTAL OF UNITEMI	ZED EXPENDITURES CHARGI	ED TO A CRED	IT CARD	\$		
5 Date 07/03/2023	6 Payee name WHARTON COUNTY JR. COL	LEGE				
7 Amount (\$) \$3,971.00	8 Payee address; City; 911 E Boling Hwy Wharton, TX 77488	State; Zip Code	•			
9 TYPE OF EXPENDITURE	X Political	Non-Politic	al			
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top OTHER: Police Academy Licen		<u></u>	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense enny Training		
11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH						
Date 10/15/2023	Payee name WM SUPERCENTER #808					
Amount (\$) \$104.54	Payee address; City; 121 HWY 332 W	State; Zip Code	3			
TYPE OF	Lake Jackson, TX 77566					
EXPENDITURE	X Political	Non-Politic	al			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Food/Beverage Expense	of this schedule) (Check if Austin	outside of Texas. Complete Schedule T. n, TX, officeholder living expense leeting - Lunch provided		
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sough	nt	Office held		
Forms provided by Texas E	unics Commission www.	ethics.state.tx.us		Version V3.5.1.0bfcfb67		

	POLITICAL EX	PENDITU	JRES FROM PE	ERSON	AL FUNDS	SCHEDULE G	
	EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense						
	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Polling Ex Printing E		Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
	Credit Card Payment		The Instruction Guide expla	ins how to co	omplete this form.		
1	Total pages Schedule G: Sch: 1/2 Rpt: 25/26					3 Filer ID	
4	Date	5 Payee name					
_	07/01/2023		Goldman Sachs Bank USA				
6	Amount (S) \$2,400.00	7 Payee address; City, State; Zip Code Salt Lake City Branch					
		PO Box 70	•				
and the second	Reimbursement from political contributions intended		a, PA 19176-0321				
8	PURPOSE OF	(a) Category (s	ice Categories listed at the top of the	s schedule)	(b) Description	Check if travel outside of Texas. Complete Schedule 1	
T COLUMN TO THE	EXPENDITURE	Credit Card	I Payment		Downsont of avad	Check if Austin, TX, officeholder living expense	
						dit card bill for political expenditures mad CCA fundraiser.	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Office	holder name		Office sought	Office held	
1	Date	Payee name)				
ĺ	11/12/2023	Mastercard	l				
	Amount (S)	Amount (S) Payee address; City; State; Zip Co			ode		
	\$18.00	PO Box 66	0496				
	X Preimbursement from political contributions intended	political contributions					
	PURPOSE	Category (s	See Categories listed at the top of th	is schedule)	Description	Check if travel outside of Texas. Complete Schedule 1	
Name of the least	OF EXPENDITURE	Credit Care	i Payment		L	Check if Austin, TX, officeholder living expense	
				Payment of credit card bill for political expenditures itemized in credit card charges.			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Office	holder name		Office sought	Office held	
	Date Payee name						
	11/14/2023	Mastercard	l				
Г	Amount (\$)	Payee addre	•	tate; Zip C	ode		
	\$424.77	PO Box 66	0496				
	Reimbursement from political contributions intended	Dallas , TX	75266-0493				
	PURPOSE OF	Category (s	See Categories listed at the top of th	is schedule)	Description	Check if travel outside of Texas, Complete Schedule 1	
	EXPENDITURE	Credit Card	d Payment		 	Check if Austin, TX, officeholder living expense	
					itemized in cred	dit card bill for political expenditures it card charges.	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Office	holder name		Office sought	Office held	
		ata da 1960 (1960 - 1960 (1960) pagi ngapi ngangangan pantal ngapangan					
£							

	POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officetrokler/Politica Credit Card Payment	Fees Office (Food/Beverage Expense Polling Git/Awards/Memorials Expense Printing	epayment/Reimbursement Dverhead/Rental Expense Expense Expense Expense Expense Expense Wages/Contract Labor Solicitation/Fundraising Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
I	Total pages Schedule G: Sch: 2/2 Rpt: 26/26	2 FILER NAME Henry, Kevin	3 Filer ID			
4	Date 12/12/2023	5 Payee name Mastercard				
6	Amount (\$) \$43.00 Reimbursement from political contributions intended	7 Payree address; City; State; Zip Code PO Box 660496 Dallas , TX 75266-0493				
83	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description Check if travel outside of Texas. Complete Schedule T Check if Austin, TX, officeholder living expense Payment of credit card bill for political expenditures itemized in credit card charges.			
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			
	Date 08/11/2023	Payee name Southwest Chase Cardmember Service				
	Amount (S) \$247.63 Reimbursement from political contributions intended	Payee address; City; State; Zip Code PO Box 6294 Carol Stream , IL 60197-6294				
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Credit Card Payment	Description Check if vavel outside of Texas. Complete Schedule To Check if Austin, TX, officeholder living expense Payment of credit card bill for political expenditures itemized in credit card charges.			
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			
	Date 07/06/2023	Payee name Southwest Chase Cardmember Service				
CONTRACTOR IN THE CONTRACTOR I	Amount (\$) \$131.54	Payee address; City; State; Zip PO Box 6294	Code			
PARTICULAR PROPERTY AND ADDRESS OF THE PARTICULAR PROPERT	X political contributions intended	Carol Stream , IL 60197-6294	Description Check if travel outside of Texas. Complete Schedule 1			
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Credit Card Payment	Description Check if travel outside of Texas. Complete Schedule T Check if Austin, TX, officeholder living expense Payment of credit card bill for political expenditures itemized in credit card charges.			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			
Metabolistica						