#### **CANDIDATE / OFFICEHOLDER** CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** 1 Filer ID Total pages filed: The C/OH Instruction Guide explains how to complete this form. 32 CANDIDATE / MS/MRS/MR FIRST Mi **OFFICE USE ONLY OFFICEHOLDER** Kevin NAME FILID JOYCE HUDMAN. **NICKNAME** LAST SUFFIX COL Henry CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE **OFFICEHOLDER** 4849 CR747A MAILING Receipt # Amount **ADDRESS** Change of Address Brazoria, TX 77422 Date Processed Date imaged MS/MRS/MR **CAMPAIGN** MI **TREASURER** Lucinda Henry NAME Mrs. NICKNAME **SUFFIX CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; STATE; ZIP CODE **TREASURER** Brazonia TX 77422 **ADDRESS** 4849 CR747A (Residence or Business) **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION** TREASURER 236-8588 **PHONE** 8 REPORT TYPE 30th day before election 15th day after campaign treasurer January 15 Runoff appointment (officeholder only) Final Report (Attach C/OH-FR) 8th day before election Exceeded modified July 15 reporting limit **PERIOD** Month Day Year Month Day Year COVERED **THROUGH** 07/01/2024 09/26/2024 **10 ELECTION ELECTION DATE ELECTION TYPE** Month Day Year Primary Ruroff Other 11/05/2024 χ General Special 11 OFFICE OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) **Brazoria County Sheriff GO TO PAGE 2**

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Fonns provided by Texas Ethics Commission

FORM C/OH

Version V4.1.0.48da51f7

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

# FORM C/OH COVER SHEET PG 2

2 of 32

13 C / OH NAME	Henry, Kevin		14 Filer ID				
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	olitical contributions accepted or political expenditures may have been made without to officeholders are required to report this information	the candidate's or officeh	nolder's knowledge or			
Additional Pages	COMMITTEE TYPE  GENERAL	COMMITTEE NAME					
		COMMITTEE ADDRESS					
	SPECIFIC						
		COMMITTEE CAMPAIGN TREASURER NAME					
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS				
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THAI ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		\$ 0.00			
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)						
EXPENDITURE TOTALS	3. TOTAL UNITEM		\$ 0.00				
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 20,102.26			
CONTRIBUTION BALANCE	5. TOTAL POLITICA REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 28,668.62			
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 0.00			
Sworn to and subsort OCTO C	cribed before me, by the sa	12 11 11 11	Il information required to Continue of the Conficency of the Confi	be reported by me			

# **SUBTOTALS - C/OH**

# FORM C/OH COVER SHEET PG 3

3 of 32

18 FIL	ER NAM	1E	19 Filer ID		
He	nry, Ke	vin			
<b>20</b> SC	HEDUL	ESUBTOTALS			
NA	MEOF	SCHEDULE		SI	JBTOTAL AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	13,147.01
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$	4,178.69
6.	X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	1,727.00
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.	X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	13,702.56
9.	X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	494.01
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
12.	X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	730.00

	MONET	^A	RY POLITICAL CONTRIBUTIONS		SCHEDUI	LE A1
	The Instru	cti	on Guide explains how to complete this form.	1	Total pages Schedule A1: Sch: 1/6 Rpt: 4/32	
2	FILER NAME Henry, Kevir			3	Filer ID	
4	Date 09/17/2024	6	Full name of contributor out-of-state PAC (ID#:)  Angelton Family Partnership  Contributor address; City; State; Zip Code	7	Amount of Contribution (\$)	\$2,500.00
8	Principal occu	ipat	Angleton, TX 77515  tion / Job title (See Instructions)  9 Employer (See Instructions)	s)		
	•	•				
	Date O9/21/2024  Full name of contributor out-of-state PAC (ID#:)  Barnard, Cody  Contributor address; City; State; Zip Code  Richwood, TX 77531				Amount of Contribution (\$)	\$104.48
			Richwood, TX 77531			
	Principal occu	pat	tion / Job title (See Instructions) Employer (See Instructions	s)		
	Date 08/21/2024		Full name of contributor out-of-state PAC (ID#:)  Barnard, Cody  Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$104.48
			Richwood, TX 77531			
	Principal occu	pat	ion / Job title (See Instructions) Employer (See Instructions	s)		
	Date Full name of contributor out-of-state PAC (ID#:) 07/21/2024 Barnard, Cody Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$104.48	
	Principal occu	pat	Richwood, TX 77531  ion / Job title (See Instructions)  Employer (See Instructions)	s)		
	Date Full name of contributor out-of-state PAC (ID#:)  08/14/2024 Barnes, Joe  Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$104.48
	Principal occu	pat	Brazoria, TX 77422-7884 tion / Job title (See Instructions) Employer (See Instructions)	s)		

### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 2/6 Rpt: 5/32 2 FILER NAME 3 Filer ID Henry, Kevin Date 5 Full name of contributor 7 Amount of Contribution (\$) out-of-state PAC (ID#:\_ 09/11/2024 Barton, Ashley \$83.65 6 Contributor address; City, State; Zip Code Angleton, TX 77515 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 09/05/2024 \$140.00 Borne, Janice Contributor address; City; State; Zip Code Angleton, TX 77515 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#:\_ 09/21/2024 Carpenter, Crystal \$52.40 Contributor address; City; State; Zip Code Brazoria, TX 77422 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Date Full name of contributor OUT-OF-STATE PAC (ID#: Amount of Contribution (\$) 07/05/2024 \$500.00 Forrest, Kim Contributor address; City; State; Zip Code Katy, TX 77494 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Date Full name of contributor Amount of Contribution (\$) Out-of-state PAC (ID#: 09/21/2024 \$15.94 Hemandez, Janett Contributor address; City; State; Zip Code New Braunfels, TX 78130-7512 Principal occupation / Job title (See Instructions) **Employer (See Instructions)**

### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 3/6 Rpt: 6/32 2 FILER NAME 3 Filer ID Henry, Kevin 7 Amount of Contribution (\$) Date 5 Full name of contributor out-of-state PAC (ID#:\_ 08/18/2024 Hundl, Donna \$26.35 Contributor address; City; State; Zip Code Angleton, TX 77515 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:\_\_ Amount of Contribution (\$) 08/08/2024 \$260.73 Kandler, Kendel Contributor address; City, State; Zip Code Richwood, TX 77531-2829 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:\_ Amount of Contribution (\$) \$104.48 08/22/2024 Lance, Lance Contributor address; City; State; Zip Code Lake Jackson, TX 77566 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Date Full name of contributor OUT-OF-STATE PAC (ID#: Amount of Contribution (\$) 09/20/2024 Lively, Dana \$52.40 Contributor address; City; State; Zip Code Angleton, TX 77515 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Full name of contributor Amount of Contribution (\$) Date OUT-OF-STATE PAC (ID#:\_ 09/18/2024 \$104.48 Lucia, Richard Contributor address; City; State; Zip Code Alvin, TX 77511 Principal occupation / Job title (See Instructions) **Employer (See Instructions)**

141014217	ARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The Instruc	tion Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 4/6 Rpt: 7/32
2 FILER NAME		3 Filer ID
Henry, Kevin		
4 Date ! 09/13/2024	Full name of contributor out-of-state PAC (ID#: Mitchell, Brett	7 Amount of Contribution (\$) \$52.4
	6 Contributor address; City; State; Zip Code	
	West Columbia, TX 77486	
8 Principal occup	ation / Job title (See Instructions) 9 Employ	yer (See Instructions)
Date	Full name of contributor	) Amount of Contribution (\$)
08/13/2024	Murphy, Patrick	\$521.1
	Contributor address; City; State; Zip Code	
	Houston, TX 77018	
Principal occup	ation / Job title (See Instructions) Employ	yer (See Instructions)
Date	Full name of contributor	Amount of Contribution (\$)
09/17/2024	NUHAA LLC	\$5,000.0
Services successful the services successful to t	Contributor address; City; State; Zip Code	
	Stafford, TX 77477	
Principal occup	ation / Job title (See Instructions) Employ	yer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#:	) Amount of Contribution (\$)
09/12/2024	Peltier, Joyce	\$2,000.0
	Contributor address; City; State; Zip Code	
	Angleton, TX 77515	
Principal occup	ation / Job title (See Instructions) Employ	yer (See Instructions)
Date	Full name of contributor Out-of-state PAC (ID#:	) Amount of Contribution (\$)
08/24/2024	Prestage, Charles	\$10.7
	Contributor address; City; State; Zip Code	
	Pearland, TX 77581	
Principal occup		yer (See Instructions)
orms provided b	y Texas Ethics Commission www.ethics.state.tx.u	us Version V4.1.0.48da51

	MONET	ARY POLITICAL CONTRIBUTION	NS	SCHEDU	LE A1
	The Instru	ction Guide explains how to complete this for	m.	1 Total pages Schedule A1: Sch: 5/6 Rpt: 8/32	
2	FILER NAME Henry, Kevir			3 Filer ID	
4	Date 09/07/2024	<ul> <li>Full name of contributor</li></ul>	)	7 Amount of Contribution (\$)	\$21.15
0	Dringing one	Brazoria, TX 77422 pation / Job title (See Instructions)	Employer (See Instructions)		
0	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/18/2024	Full name of contributor out-of-state PAC (ID#: Smith, Brent Contributor address; City; State; Zip Code	)	Amount of Contribution (\$)	\$52.40
		Angleton, TX 77515			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/20/2024	Full name of contributor out-of-state PAC (ID#: Smith, Lisa Contributor address; City, State; Zip Code	Amount of Contribution (\$)	\$26.35	
		West Columbia, TX 77486	Management of the second of th		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/19/2024			Amount of Contribution (\$)	\$104.48
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/17/2024	Full name of contributor out-of-state PAC (ID#: V & D Pipe Company  Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$1,000.00
	Principal occu	Damon, TX 77430 pation / Job title (See Instructions)	Employer (See Instructions)		,

	MONET	ARY POLITICAL CONTI	RIBUTIONS	SCHEDULE A1
	The Instru	ction Guide explains how to com	plete this form.	1 Total pages Schedule A1: Sch: 6/6 Rpt: 9/32
2	FILER NAME Henry, Kevir			3 Filer ID
4	Date 08/13/2024	5 Full name of contributor out-of-s Wade, Victor	state PAC (ID#:)	7 Amount of Contribution (\$) \$100.00
		6 Contributor address; City; State; Zip Co	ode	
	Dringing one	Lake Jackson, TX 77566	O Employer (See Instruction	
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruction	ns)
	rms provided	by Texas Ethics Commission	www.ethics.state.tx.us	Version V4.1.0.480a51f7

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Food/Beverage Expense Git/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Printing Expense
Salaries/Wages/Corusa: Labor Travel Out of District Legal Services OTHER (emer a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 1/3 Rpt: 10/32 Henry, Kevin 4 Date Payee name 07/24/2024 3 Gent LLC Payee address; 6 Amount (\$) State; Zip Code City; \$1,000.00 331 Verde Dr Clute, TX 77531 **PURPOSE** 8 (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Adversting Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 08/31/2024 Anedot - August Amount (\$) Payee address; City; State; Zip Code \$54.28 1340 Poydras St Ste 1170 New Orleans, LA 70112 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Fees EXPENDITURE Check if Austin, TX, officeholder living expense Anedot hosting fees Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 07/31/2024 Anedot- July Payee address; City; Amount (\$) State; Zip Code \$24.78 1340 Poydras St Ste 1170 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 Anedot hosting fees Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH

# POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

# SCHEDULE F1

Advertising Expense Accounting/Banking
Consulting Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Experse Food/Beverage Experse

Loan Repayment/Reimbursement Office Overhead/Rental Experse Polling Experse

Solicitation/Fundraising Experse Transportation Equipment & Related Expense
Travel in District

	Candidate/Officeholder/Politica		roundiee	Legal Services		Salaries/Wa		e Connact Labor		OTHER (enter a category t	not listed above)
	Credit Card Payment			The Instruction Guid	de explains ho	ow to con	nple	te this form.			
1	Total pages Schedule F1:	2	FILER NAME			<del>''                                   </del>			3	Filer ID	
	Sch: 2/3 Rpt: 11/32		Henry, Kev	in							
4	Date	5	Payee name								
	09/21/2024		Anedot- Se	ptember							
6	Amount (\$)	7	Payee addre	ss; City;	State;	Zip Coo	de				
	\$29.15		1340 Poydr	as St							
			Ste 1170								
			New Orlean	is, I <i>L</i> A 701 <u>12</u>							
8	PURPOSE	(a)	Category (S	ee Categories listed at the	top of this sched	dule)	(b)	Description			
	OF EXPENDITURE		Fees					<b>=</b>		ide of Texas. Complete Sche	dule T.
								Anedot hosti		, officeholder living expense fees	
								,	9		
9	Complete ONLY if direct		Candidate/Offi	ceholder name	Of	fice soug	jht			Office held	
	expenditure to benefit C/O	H		_							
	Date		Payee name		W						
	08/02/2024		CLEAR CH	ANNEL							
Г	Amount (\$)		Payee addre	ss; City;	State;	Zip Coo	le				
	\$2,825.48		PO Box 847	7247							
			Dallas, TX	75284							
	PURPOSE OF	(a)		ee Categories listed at the	top of this sched	dule)	(b)	Description			
	EXPENDITURE		Advertising	Expense						ide of Tex <b>e</b> s. Complete Sche , officeholder living expense	dule T.
								Adversting		, one choice averg cape co	
								J			
<b> </b>	Complete ONLY if direct		Candidate/Off	ceholder name	Off	fice soug	jht			Office held	
	expenditure to benefit C/O	Н									
Г	Date		Рауее пате								
	09/18/2024		STS Cyril &	Methodius Catho	olic Church						
Г	Amount (\$)	Г	Payee addre	ss; City;	State;	Zip Coo	le				
	\$200.00		603 Mulcah	y Ave							
			Damon, TX	77:429							
Г	PURPOSE OF	(a)	• • •	ee Categories listed at the	-	dule)	(b)	Description			
	EXPENDITURE			ns/Donations Mad Officeholder/Politic		****		=		ide of Texas. Complete Sche , officeholder living expense	dule T.
		Netrolista (Netrolista (Netrol	Candidaten	Jiiceroldei/Politi	cai Commi	uee		Donation		, one choice averg expec	
	Complete ONLY if direct		Candidate/Offi	ceholder name	Of	fice soug	jht			Office held	
	expenditure to benefit C/O	Н									
				**************************************						***************************************	

# POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

# SCHEDULE F1

### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

	Accounting/Banking		Fees		ad/Rental Expense	Transportation Equipment & Related Expense
	Consulting Experse		Food/Beverage Experse	Polling Experi	Se .	Travel in District
	Contributions/ Durations Made By Candidate/Officeholder/Politica		GiN/Awards/Memorials Experse muidise Legal Services	Printing Exper	ree 25/Combract Labor	Tiravel Out of District OTHER (enter a category not listed above)
	Credit Card Payment		<del>-</del>	_		Office acaessory fact issues above;
	•		The Instruction Guide explains	how to comp	lete this form	
1	Total pages Schedule F1:	2	FILER NAME			3 Filer ID
	Sch: 3/3 Rpt: 12/32		Henry, Kevin			
4	Date	5	Payee name			
	09/17/2024			-b-		
	09/1/12024		STS Cyril & Methodius Catholic Churc	11		
6	Amount (\$)	7	Payee address; City; State	; Zip Code		
	\$45.00					
	\$45.00		603 Mulcahy Ave			
			Domon TV 77420			
			Damon, TX 77430			
8	PURPOSE	(a)	Category (See Categories listed at the top of this so	hadula) (b'	) Description	
	OF	(-,		reduc)		outside of Texas. Complete Schedule T.
	EXPENDITURE		Contributions/Donations Made By		<b>=</b>	a. TX. officeholder living expense
		l	Candidate/Officeholder/Political Comr	nittee		L 1X. Oncerous way experse
					Donation	
<del> -</del>	0	L	D1'-110''1			Office held
9	Complete ONLY if direct		Candidate/Officeholder name	Office sought	İ.	Office held
	expenditure to benefit C/O	1				
1						
l						

## **UNPAID INCURRED OBLIGATIONS** SCHEDULE F2 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Accounting/Banking Fees Food/Beverage Expense Gitt/Awards/Memorials Expense Office Overhead/Rental Expense Polling Expense Transportation Equipment & Related Expense Travel in District Consulting Expense Contributions/ Dorrations Made By -Travel Out of District Primiting Expense Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Coruract Labor OTHER (enter a category not fisted above) The Instruction Guide explains how to complete this form. Total pages Schedule F2: 2 FILER NAME 3 Filer ID Sch: 1/1 Rpt: 13/32 Henry, Kevin \$ TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS 5 Date 6 Payee name 09/26/2024 **Outdoor Advertising Display Inc** Payee address; City. State; Zip Code Amount (\$) PO BOX 58525 \$1,727.00 Houston, TX 77258-8528 TYPE OF Non-Political lxl 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. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Billboard Advertising 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

## SCHEDULE F4

### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

Advertising Expense
Accounting/Banking
Crresulting Expense
Contributions/ Dunations Made By Candidate/Officeholden/Political/Crommittee

Event Experse Fees Food/Beverage Experse GM/Awards/Memorials Experse

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District

Candidate/Officeholder/Politica	al Committee Legal Serv	nices Sa	laries/Wages/Con	ntract Labor O	THER (enter a categor	y notlisted al	pove)	
	The Inst	ruction Guide explains how	to complete t	this form.				
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID			
Sch: 1/16 Rpt: 14/32	Henry, Kevin							
4 CREDIT CARD	Name of fina	ncial institution		OF UNITEMIZED				
ISSUER	Barclays (	Credit Card	8	DITURES ED TO A CREDIT	. \$			
			CARD	ED TO A CILEDIT				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid			
	\$54.38	09/26/2024						
	40 1133							
7 PAYEE	(a) Payee name	<u> </u>	(b) Payee	address;	City,	State,	Zip Code	
			121 TX-3	32				
	Wal-Mart							
			Lake Jac	kson, TX 77566				
8 PURPOSE OF	(a) Category		(b) Descrip	tion				
EXPENDITURE	(See Categories listed at the top Show Supplies	of this schedule)	Show Su	pplies				
X Political	onow Supplies							
Non-Political	(c) Check if travel ourside	of Texas. Complete Schedule T.	1	Check if Austin, TX,	officeholder living exp	ense		
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held			
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid			
	\$622.87	09/26/2024						
	Realist GOUTE CO.							
PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code	
	ADDI, LLC		1339 E. E	Broadway				
	ADDI, LLC							
			Pearland, TX 77581					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description					
	Advertising Expense	,	Adverstin	g				
X Political						<del></del>		
Non-Political		of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense		
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held			
expenditure to benefit C/OH		(1) S : (0)	1()5 ( ()					
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Palo			
	\$1,038.12	09/26/2024						
PAYEE	( ) 5	<u> </u>	435				T- 0-1-	
PATEE	(a) Payee name		(b) Payee		City,	State,	Zip Code	
	ADDI, LLC		1339 E. E	sroadway				
			Doorland	, TX 77581				
PURPOSE OF	(a) Category		(b) Descrip					
EXPENDITURE	(See Categories listed at the top	of this schedule)	Adverstin					
X Political	Advertising Expense		1.0.00	.9				
	(a) $\Box$ a		1					
Non-Political  Complete ONLY if direct	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	e sought	Check if Austin, TX,	officeholder living exp Office held	ense		
Complete ONLY if direct expenditure to benefit C/OH	Canuluate/Officeriolder	name Offic	c sougiil		Onice Helu			
experiorare to belief C/OH								

## SCHEDULE F4

### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

Adventising Expense

Event Expertse

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Constituing Expense Contributions/ Donations Made By Cambridate/Officeholder/Positica	Food/Beverage Expense PA By - Gith/Awards-Memorials Expense P cal Commidtee Legal Services S		Polling E Privaleg Salaries	Travel in District Travel on Officer Travel on O							
			ruction Guide explains I	how to c	complete this form.	_					
1 Total pages Schedule F4:	2 FILER NAME					3 Filer ID					
Sch: 2/16 Rpt: 15/32	Henry, Kevi	n									
4 CREDIT CARD	Nam	e of fina	ncial institution	5	TOTAL OF UNITEMIZED						
ISSUER		see p	revious		EXPENDITURES CHARGED TO A CREDI	т					
					CARD	•					
6 PAYMENT	(a) Amount Char	rged	(b) Date of Charge	(c	) Date(s) Credit Card Issu	er Paid					
	\$2,076.24	1	09/26/2024								
	Ψ2,010.2-	Ψ2,070.24									
7 PAYEE	(a) Payee name			(b	) Payee address;	City,	State.	Zip Code			
	(-,,			- 1	339 E. Broadway	J.,	,				
	ADDI, LLC				oos E. Broadway						
				P	earland, TX 77581						
8 PURPOSE OF	(a) Category				) Description						
EXPENDITURE	(See Categories listed	at the top	of this schedule)		dversting						
X Political	Advertising Ex	dvertising Expense		1	Auversung						
	(c) Check if travel outside of Texas. Complete Schedute										
Non-Political	` _										
• —					ught	Office held					
expenditure to benefit C/OH											
PAYMENT	(a) Amount Char	rged	(b) Date of Charge	(c)	) Date(s) Credit Card Issu	er Paid					
	\$622.87		09/26/2024								
PAYEE	(a) Payee name			(b	) Payee address;	City,	State,	Zip Code			
	1001110			1:	1339 E. Broadway						
	ADDI, LLC										
				P	Pearland, TX 77581						
PURPOSE OF	(a) Category			(b)	) Description						
EXPENDITURE	(See Campuries listed Advertising Ex		of this stredule)	A	dversting						
X Political	Advertising Lx	pense		İ							
Non-Political	(c) Check if tran	vel outside	of Texas. Complete Schedule	<b>_</b> ≘T.	Check if Austin, TX, officeholder fiving expense						
Complete ONLY if direct	Candidate/Office	æholder	name O	Office so	ught	Office held					
expenditure to benefit C/OH											
PAYMENT	(a) Amount Char	rged	(b) Date of Charge	(c	) Date(s) Credit Card Issu	er Paid	**************************************				
	\$257.49		09/26/2024		, , ,						
	<b>Φ</b> 251.49		09/20/2024								
PAYEE	(a) Payee name			(P.	) Payee address;	City,	State.	Zip Code			
	(a) rayee name			(	03 TX-322	City,	June,	Zip Code			
	TRACTOR-	SUPPL	Y-CO #0465	20	J3 1A-3ZZ						
					ake Jackson, TX 77566	•					
PURPOSE OF	(a) Category	<u> </u>			Description						
EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)		1	igns Supplies							
X Political	Sign Supplies		٦	.g							
			<del></del>	L		·····					
Non-Political	`		of Texas. Complete Schedule			K, officeholder living exp	ense				
Complete ONLY if direct	Candidate/Office	eholder	name O	Office so	ught	Office held					
expenditure to benefit C/OH											

## SCHEDULE F4

### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

Advertising Expense

Loan Repayment/Reimbursement

Solicitetion/Fundraising Expense

	Accounting/Banking Consulting Expense Contributions/ Domaticus Made By	Fees Food/Bew Git/Awar	erage Expense	Office Overhead/Rental Expense Polling Expense Printing Expense	Travel in District	Transportation Equipment & Related Expense Travel in District Travel Out of District				
	Candidate/Officeholder/Politica			Salaries/Wages/Commaci Labor	OTHER (enter a categ	rony mot listed at	bove)			
		Theinst	truction Guide explains h	ow to complete this form.						
1	Total pages Schedule F4:				3 Filer ID					
	Sch: 3/16 Rpt: 16/32	Henry, Kevin								
4	CREDIT CARD ISSUER	Name of fina	encial institution	5 TOTAL OF UNITEMIZE EXPENDITURES	ED <b>(</b>					
	LOGUER .	see p	revious	CHARGED TO A CREI	1 T					
				CARD						
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	suer Paid					
		\$24.19	09/16/2024							
7	PAYEE	(а) Рауее пате		(b) Payee address;	City,	State,	Zip Code			
		HARBOR FREIGH	T TOOL \$2251	165 OysterCreek Dr						
	TIANDON NEIGHT TO DESCRIP									
				Lake Jackson, TX 7750	66					
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	and this schedule)	(b) Description						
	_	Sign Supplies	, o, o.e suiceae,	Signs Supplies						
	X Political		·							
	Non-Political		of Texas. Complete Schedule 1		TX, officeholder living e	opense				
	Complete ONLY if direct	Candidate/Officeholder	rname Of	fice sought	Office held					
e	cpenditure to benefit C/OH		<u> </u>							
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	suer Paid					
		\$15.00	09/14/2024							
	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code			
		CANVA* 104274-12	2286216	3212 E Cesar Chavez	St					
				A - # TV 70700						
	DIDDOCE OF	(a) Catagony		Austin, TX 78702 (b) Description						
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	Adversting						
	X Political	Advertising Expense		Auversuing						
	Non-Political									
			of Texas. Complete Schedule 1		TX, officeholder living e	doeuze				
_	Complete <u>ONLY</u> if direct penditure to benefit C/OH	Candidate/Officeholde	r name Or	fice sought	Office held					
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	suor Daid					
	PATIVICIVI			(c) Date(s) Credit Card iss	suei Faiu					
		\$46.54	09/07/2024							
	PAYEE	(а) Рауее пате	<u> </u>	(b) Payee address;	City,	State,	Zip Code			
		(a) Payee name		500 Terry A Francios B	-	Serie,	Zip Code			
		WIX.COM		500 Telly A Flancius B	oivu					
				San Francisco, CA 941	158					
	PURPOSE OF	(a) Category		(b) Description						
	EXPENDITURE	(See Categories listed at the top	of this schedule)	Adversting						
	Delitical	Advertising Expense		_						
	X Political			Check if Austin, TX, officeholder living expense						
	Non-Political	(c) Check if travel outside	of Texas, Complete Schedule 1	. Check if Austin	TX. officeholder living ex	opense				
	Non-Political	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T	. Check if Austin, fice sought	TX, officeholder living experience of the control o	pense .				
e)						pense .				

# SCHEDULE F4

### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Office/holder/Political Committee

Event Experse
Fees
Food/Beverage Expense
Giff/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Experse Polling Experse Printing Experse Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a caleboury not listed above)

Candidate/Officeholder/Politica			Salaries/Wages/Cor		THER (OTE a CALE)	pory not listed at	tove)	
	The Inst	truction Guide explains ho	ow to complete t	his form.				
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID			
Sch: 4/16 Rpt 17/32	Henry, Kevin							
4 CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES ED TO A CREDIT	\$			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid			
No. of the Control of	\$75.15	09/05/2024						
7 PAYEE	(a) Payee name		(b) Payee a	address;	City,	State,	Zip Code	
	HARBOR FREIGH	165 Oyst	165 OysterCreek Dr					
				kson, TX 77566				
8 PURPOSE OF EXPENDITURE	(a) CategOTy (See Categories listed at the top	of this schedule)	(b) Descrip					
	Sign Supplies	or this schedule)	Signs Su	pplies				
X   Political								
Non-Political		of Texas. Complete Schedule T		Check if Austin, TX,		xbszs		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder		fice sought		Office held			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid			
	\$54.07	08/27/2024						
PAYEE	(a) Payee name		(b) Payee a	address;	City,	State,	Zip Code	
	FACEBK *UDTPES	947K2	1 Meta Way					
			Menlo Park, CA 94025					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of the man and the	(b) Description					
X Political	Advertising Expense	ر عسده سه الله الله الله الله الله الله الله	Adversting					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T	T.	Check if Austin, TX,	officeholder fiving e	xbarz.		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholde	r name Off	fice sought		Office held			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid			
	\$69.41	08/26/2024						
PAYEE	(a) Payee name		(b) Payee a	address;	City,	State,	Zip Code	
	HARBOR FREIGH	T TOOLS3351	165 Oysto	erCree Dr				
			Lake Jac	kson, TX 77566				
PURPOSE OF	(a) Category		(b) Descrip	tion				
EXPENDITURE (See Categories listed at the top of this schedule)		Signs Su	pplies					
Sign Supplies								
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T	- -	Check if Austin, TX,	officeholder living e	xpense		
Complete ONLY if direct	Candidate/Officeholde	r name Off	fice sought		Office held			
expenditure to benefit C/OH								
B .								

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Solicitation/Fundraising Experse Advertising Expense Event Expense Loan Repayment/Reimbursement Accounting/Banking Fees Office Overhead/Rental Expense Transportation Equipment & Related Experse Cotation Exhauss Food/Beverage Expense Pollino Experse Travel in District Gitt/Awards/Memorials Expense Contributions/ Donations Made By Travel Out of District Printing Experse Legal Services Cambridge/Officeholder/Political Committee 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: 5/16 Rpt: 18/32 Henry, Kevin CREDIT CARD Name of financial institution TOTAL OF UNITEMIZED **EXPENDITURES** ISSUER see previous CHARGED TO A CREDIT CARD 6 PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid \$125.00 08/26/2024 PAYEE State, (a) Payee name (b) Payee address; City. Zip Code 2614 E. Belgravia Dr SOUTHERN ELEGANCE Pearland, TX 77584 (a) Category **PURPOSE OF** (b) Description **EXPENDITURE** (See Caregories listed at the top of this schedule) Show expense **Show Supplies** X Political Non-Political (c) Check if travel outside of Texas. Complete Schadule T. Check if Austin, TX, officeholder living expense Candidate/Officeholder name Office held 9 Complete ONLY if direct Office sought expenditure to benefit C/OH PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid \$958.00 08/25/2024 PAYEE City, (b) Payee address; State Zip Code (a) Payee name 203 TX-322 TRACTOR-SUPPLY-CO #0465 Lake Jackson, TX 77566 PURPOSE OF (a) Category (b) Description **EXPENDITURE** (See Categories listed at the top of this schedule) Signs Supplies Sign Supplies X Political Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office held Candidate/Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH **PAYMENT** (c) Date(s) Credit Card Issuer Paid (a) Amount Charged (b) Date of Charge \$250.00 08/20/2024 PAYEE (b) Payee address; City, State. Zip Code (a) Payee name Unkown 2024 ANGLETON ARISTOCA Angleton, TX 77515 (a) Category (b) Description **PURPOSE OF EXPENDITURE** (See Categories listed at the top of this schedule) Donation Contributions/Donations Made By X Political Candidate/Officeholder/Political Committee Non-Political Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office held Candidate/Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Corsulting Expense Food/Beverage Expense Polling Experse Travel in District Contributions/ Durations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Travel Out of District Printing Expense 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: 6/16 Rpt: 19/32 Henry, Kevin CREDIT CARD Name of financial institution TOTAL OF UNITEMIZED **EXPENDITURES ISSUER** see previous CHARGED TO A CREDIT **CARD** PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid \$52.06 08/19/2024 PAYEE (a) Payee name (b) Payee address; City, State. Zip Code 165 OysterCreek Dr HARBOR FREIGHT TOOLS3351 Lake Jackson, TX 77566 PURPOSE OF (a) Category (b) Description **EXPENDITURE** (See Categories listed at the top of this schedule) Supplies **Supplies** X Political Non-Political (C) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate/Officeholder name Office held 9 Complete ONLY if direct Office sought expenditure to benefit C/OH PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid \$53.79 08/16/2024 PAYEE City, Zip Code (a) Payee name (b) Payee address; State 330 N Dixie Dr **ASIELS** Lake Jackson, TX 77566 **PURPOSE OF** (a) Category (b) Description **EXPENDITURE** (See Caregories listed at the top of this schedule) Food for meeting Food/Beverage Expense X Political Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH PAYMENT (c) Date(s) Credit Card Issuer Paid (a) Amount Charged (b) Date of Charge 08/15/2024 \$6.47 PAYEE (a) Payee name (b) Payee address; City, State. Zip Code 1308 Brooks St MCCOYS #03 Brazoria, TX 77422 (a) Category **PURPOSE OF** (b) Description **EXPENDITURE** (See Categories listed at the top of this schedule) **Supplies** Supplies X Political Non-Political Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH

### SCHEDULE F4

### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Offinehulder/Political Committee

Event Expense Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Pollino Expense Printing Expers

Solicitation/Fundraising Expense Transportation Equipment & Related Experse Travel Out of District

Travel in District emorials Experse 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 3 Filer ID Sch: 7/16 Rpt: 20/32 Henry, Kevin CREDIT CARD Name of financial institution TOTAL OF UNITEMIZED ISSUER **EXPENDITURES** see previous CHARGED TO A CREDIT CARD PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid \$25.84 08/15/2024 PAYEE (b) Payee address; Zip Code (a) Payee name City, State. 1309 Brooks St MCCOYS #03 Brazoria, TX 77423 PURPOSE OF (a) Category (b) Description **EXPENDITURE** (See Categories listed at the top of this schedule) **Supplies Supplies** X Political Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH PAYMENT (b) Date of Charge (a) Amount Charged (c) Date(s) Credit Card Issuer Paid \$15.00 08/14/2024 PAYEE State, Zip Code (a) Payee name (b) Payee address; City, 3212 E Cesar Chavez St CANVA\* I04243-17535082 Austin, TX 78702 (a) Category (b) Description PURPOSE OF **EXPENDITURE** (See Cassyuries listed at the top of this schedule) Adversting Advertising Expense X Political Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH (a) Amount Charged (c) Date(s) Credit Card Issuer Paid **PAYMENT** (b) Date of Charge \$21.82 08/13/2024 PAYEE (a) Payee name (b) Payee address; City, State Zip Code 1100 E Mulberry Subway Angleton, TX 77515 (a) Category (b) Description **PURPOSE OF EXPENDITURE** (See Categories listed at the top of this schedule) Food for meeting Food/Beverage Expense X Political Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate/Officeholder name Office held Office sought Complete ONLY if direct expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Office Overhead/Rental Experse Accounting/Banking Transportation Equipment & Related Expense Consulting Expense Contributions/ Duraniums Made By -Food/Beverage Experse Git/Awards/Memorials Experse Travel in District Polling Experse Printing Experse Travel Out of District Legal Services Caroliniane/Officeholder/Political Committee OTHER (emer a category not listed above) The Instruction Guide explains how to complete this form. 3 Filer ID 1 Total pages Schedule F4: 2 FILER NAME Sch: 8/16 Rpt: 21/32 Henry, Kevin CREDIT CARD Name of financial institution TOTAL OF UNITEMIZED \$ ISSUER **EXPENDITURES** see previous CHARGED TO A CREDIT **CARD** (c) Date(s) Credit Card Issuer Paid PAYMENT (a) Amount Charged (b) Date of Charge \$61.63 08/13/2024 PAYEE (b) Payee address; (a) Payee name City, State, Zip Code 401-A This Way LA MADELEINE LAKE Lake Jackson, TX 77566 (a) Category (b) Description **PURPOSE OF EXPENDITURE** (See Categories listed at the top of this schedule) Food for meeting Food/Beverage Expense X Political Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH **PAYMENT** (a) Amount Charged (c) Date(s) Credit Card Issuer Paid (b) Date of Charge \$14.02 08/12/2024 PAYEE Zip Code (a) Payee name (b) Payee address; City, State. 1309 Brooks St MCCOYS #03 Brazoria, TX 77423 (b) Description (a) Category **PURPOSE OF EXPENDITURE** (See Categories listed at the top of this schedule) **Supplies Supplies** X Political Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH **PAYMENT** (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid \$32.83 08/11/2024 PAYEE Zip Code (a) Payee name (b) Payee address; City, State. 210 TX-332 SHIPLEY DO-NUTS - FC6000 Lake Jackson, TX 77566 (a) Category (b) Description **PURPOSE OF EXPENDITURE** (See Categories listed at the top of this schedule) Food for meeting Food/Beverage Expense X Political Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate/Officeholder name Office held Office sought Complete ONLY if direct

expenditure to benefit C/OH

### SCHEDULE F4

### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Office/bolder/Political Committee

Event Expense Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rentel Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Travel In District
Travel Out of District
OTHER (enter a category not listed above)

Candidate/Officeholder/Politica	J		laries/Wages/Co		THER (enter a categ	ory not listed a	bove)	
		ruction Guide explains how	to complete	this form.				
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID			
Sch: 9/16 Rpt: 22/32	Henry, Kevin							
4 CREDIT CARD	Name of fina	ncial institution		OF UNITEMIZED				
ISSUER	see pi	revious	2	DITURES SED TO A CREDIT	\$			
			CARD					
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s	Credit Card Issue	er Paid			
	\$150.00	08/10/2024						
	Dricking							
7 PAYEE	(a) Payee name	<u> </u>	(b) Payee	address;	City,	State,	Zip Code	
			403 Leev	vard Way				
	NO MATTER WHA	TCLUB						
			Freeport	, TX 77541				
8 PURPOSE OF	(a) Category		(b) Descri	otion				
EXPENDITURE	(See Categories listed at the top Contributions/Donation		Donation	1				
X Political		er/Political Committee						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX	, officeholder living ex	xpense		
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	<del></del>	Office held			
expenditure to benefit C/OH								
PAYMENT	(a) Arnount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	er Paid			
	\$46.54	08/07/2024						
	10.0	30,0,,202						
PAYEE	(a) Payee name	<u> </u>	(b) Payee	address;	City,	State,	Zip Code	
	500 Terry A Francios Blvd							
	WIX.COM							
	San Francisco, CA 94158							
PURPOSE OF								
EXPENDITURE	(See Categories listed at the top of this schedule) Advertising Expense  Adversing							
X Political	Advertising Expense							
Non-Political	Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX.				, officeholder living expense			
Complete ONLY if direct					Office held			
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	er Paid			
	\$52.06	08/06/2024						
	•							
PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code	
			165 Oyst	erCreek Dr				
	HARBOR FREIGHT	T TOOLS3351						
			Lake Jac	kson, TX 77566				
PURPOSE OF	(a) Category		(b) Descrip	otion				
EXPENDITURE	(See Categories listed at the top of this schedule) Supplies Supplies							
X Political	оприсо							
Non-Political	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	<del></del>	Office held			
expenditure to benefit C/OH								

## SCHEDULE F4

### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Ownations Made By Cantification/Office/holder/Political Committee

Event Experse Fees Food/Beverage Experse Git/Awards/Memorials Expers Loan Repayment/Reimbursement Office Overhead/Rental Experse Polling Experse Printing Experse Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District

Contributions/ Ownations Made By Candidate/Officeholder/Politica			ri <b>nting Experse</b> alaries/Wages/Con		avel Out of District THER (enter a calego)	ry not listed a	bove)
	The Inst	ruction Guide explains how	v to complete t	his form.			
1 Total pages Schedule F4:	2 FILER NAME		<del>,                                    </del>		3 Filer ID		
Sch: 10/16 Rpt: 23/32	Henry, Kevin						
4 CREDIT CARD	Name of fina	ncial institution	8	OF UNITEMIZED	_		
ISSUER	see p	revious	1	DITURES ED TO A CREDIT	.   \$		
		-	CARD		<u>]</u>		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
	\$175.00	08/04/2024					
7 PAYEE	(a) Payee name		(b) Payee	-	City,	State,	Zip Code
	FACEBK *ZFV5R8	U7K2	1 Meta W				
			Menlo Pa	ırk, CA 94025			
8 PURPOSE OF	(a) Category		(b) Descrip				*
EXPENDITURE	(See Cattegories listed at the top	of this schedule)	Adverstin				
X Political	Advertising Expense		ļ				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	1	Check if Austin, TX,	officeholder living exp	ense	
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	æ sought		Office held		
expenditure to benefit C/OH						_	
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
	\$15.00	08/02/2024					
PAYEE	(a) Payee name		(b) Payee		City,	State,	Zip Code
	LI DONATIO* GOT	V WORKS	1101N Hi	ghland St			
PURPOSE OF	(a) Category (b) Description						
EXPENDITURE	(See Campyories listed at the top	of this schedule)	Educaiotn				
X Political	Education						
Non-Political	(c) Check if travel outside	of Texas. Complet⊵ Schedule T.		Check if Austin, TX,	officeholder living exp	ense	\\
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
	\$162.38	07/31/2024					
PAYEE	(a) Payee name		(b) Payee a		City,	State,	Zip Code
	ADDI, LLC		1339 E. B	Broadway			
			Deadand	TX 77581			
PURPOSE OF	(a) Category		(b) Descrip				
EXPENDITURE	(See Categories listed at the top of this schedule)  Adversting						
X Political	Advertising Expense						
Non-Political	(C) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
Complete ONLY if direct	Candidate/Officeholder		æ sought		Office held		
expenditure to benefit C/OH			-				
			-				

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Event Experse Loan Repayment/Reimbursement Solicitation/Fundraising Expense Office Overhead/Rental Experse Transportation Equipment & Related Expense Consulting Expense Food/Beverage Expense Politing Expense Travel in District Contributions/ Donations Made By Candidate/Officeholder/Political Committee Travel Out of District Git/Awards/Memorials Experse Printing Expers Legal Services Salaries/Wages/Commact 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: 11/16 Rpt: 24/32 Henry, Kevin CREDIT CARD Name of financial institution TOTAL OF UNITEMIZED ISSUER **EXPENDITURES** see previous CHARGED TO A CREDIT CARD PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid \$1,244.88 07/31/2024 PAYEE (a) Payee name State, (b) Payee address; City, Zip Code 1339 E. Broadway ADDI, LLC Pearland, TX 77581 (a) Category (b) Description **PURPOSE OF EXPENDITURE** (See Categories listed at the top of this schedule) Adversting Advertising Expense X Political Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, 1X, officeholder living expense Candidate/Officeholder name Office sought Office held 9 Complete ONLY if direct expenditure to benefit C/OH PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid \$2.076.24 07/31/2024 PAYEE City, (a) Payee name (b) Payee address; State, Zip Code 1339 E. Broadway ADDI, LLC Pearland, TX 77581 **PURPOSE OF** (a) Category (b) Description **EXPENDITURE** (See Carryories listed at the top of this schedule) Adversting Advertising Expense X Political Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH (a) Amount Charged **PAYMENT** (b) Date of Charge (c) Date(s) Credit Card Issuer Paid \$1,768.81 07/31/2024 PAYEE (a) Payee name (b) Payee address; Zip Code City. State. 1339 E. Broadway ADDI, LLC Pearland, TX 77581 (a) Category (b) Description **PURPOSE OF EXPENDITURE** (See Categories listed at the top of this schedule) Adversting Advertising Expense X Political Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, 1X, officeholder living expense Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Loan Repayment/Reimbursement Advertising Expense Event Expense Solicitation/Fundraising Expense Accounting/Banking Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Consulting Experse Food/Beverage Experse Gift/Awards/Memorials Experse Polling Expense Travel in District Contributions/ Donations Made By Printing Experse Salaries/Wages/Contract Labor Travel Out of District Legal Services Candidate/Officeholder/Political Committee 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: 12/16 Rpt: 25/32 Henry, Kevin CREDIT CARD Name of financial institution TOTAL OF UNITEMIZED **ISSUER EXPENDITURES** see previous CHARGED TO A CREDIT CARD PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid \$15.00 07/30/2024 PAYEE State, (a) Payee name (b) Payee address; City. Zip Code 1101N Highland St LI DONATIO\* GOTV WORKS Arlington, VA 22201 PURPOSE OF (a) Category (b) Description **EXPENDITURE** (See Categories listed at the top of this schedule) Educaiotn Educaiotn X Political Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate/Officeholder name 9 Complete ONLY if direct Office sought Office held expenditure to benefit C/OH PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid \$15.00 07/30/2024 PAYEE City, (b) Payee address; (a) Payee name State. Zip Code 1101N Highland St LI DONATIO\* GOTV WORKS Arlington, VA 22201 **PURPOSE OF** (a) Category (b) Description **EXPENDITURE** (See Categories listed at the top of this schedule) Education Education X Political Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH **PAYMENT** (c) Date(s) Credit Card Issuer Paid (a) Amount Charged (b) Date of Charge \$59.70 07/28/2024 PAYEE Zip Code (a) Payee name (b) Payee address; City, State 104 TX-332 Ste 300 **OFFICE DEPOT #2691** Lake Jackson, TX 77566 (a) Category (b) Description **PURPOSE OF EXPENDITURE** (See Categories listed at the top of this schedule) **Supplies Supplies** X Political Non-Political (C) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office held Candidate/Officeholder name Office sought Complete ONLY if direct

expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Loan Repayment/Reimbursement Event Expense Solicitation/Fundraising Expense Accounting/Banking Office Overhead/Rental Experse Transportation Equipment & Related Experse Travel in District Consulting Expense Food/Beverage Experse Polling Experse Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Gitt/Awards/Memorials Expense Printing Experse Salaries/Wages/Commact 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: 13/16 Rpt: 26/32 Henry, Kevin **CREDIT CARD** Name of financial institution TOTAL OF UNITEMIZED **ISSUER EXPENDITURES** see previous CHARGED TO A CREDIT CARD PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid \$724.30 07/22/2024 PAYEE (a) Payee name Zip Code (b) Payee address; City, State, 5485 W Sam Houston **BULL SHIRTS** Houston, TX 77041 PURPOSE OF (a) Category (b) Description **EXPENDITURE** (See Categories listed at the top of this schedule) Shirts Advertising Expense X Political Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate/Officeholder name Office held 9 Complete ONLY if direct Office sought expenditure to benefit C/OH **PAYMENT** (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid \$160.11 07/22/2024 PAYEE (a) Payee name (b) Payee address; City, State, Zip Code 410 Terry Ave N AMAZON.COM\*RJ3327B30 Seattle, WA 98109 **PURPOSE OF** (a) Category (b) Description **EXPENDITURE** (See Categories listed at the top of this schedule) Supplies **Supplies** X Political

Non-Political

Complete ONLY if direct expenditure to benefit C/OH

**PAYMENT** 

PAYEE

**PURPOSE OF** 

X Political

**EXPENDITURE** 

Non-Political

Complete <u>ONLY</u> if direct expenditure to benefit C/OH Office sought

(C) Check if travel outside of Texas. Complete Schedule T.

(b) Date of Charge

07/14/2024

Candidate/Officeholder name

CANVA\* 104212-10140826

(See Categories listed at the top of this schedule)

Candidate/Officeholder name

(C) Check if travel outside of Texas. Complete Schedule T.

(a) Amount Charged

(a) Payee name

(a) Category

\$15.00

Advertising Expense

State,

Zip Code

Check if Austin, TX, officeholder living expense

(c) Date(s) Credit Card Issuer Paid

(b) Payee address;

Austin, TX 78702

(b) Description

Adversting

Office sought

3212 E Cesar Chavez St

Office held

City.

Check if Austin, TX, officeholder living expense

Office held

#### **EXPENDITURES MADE BY CREDIT CARD** SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Loan Repayment/Reimbursement Office Overhead/Rental Experse Solicitation/Fundraising Expense Advertising Expense Event Expense Accounting/Banking Transportation Equipment & Related Expense Food/Beverage Experse Gitt/Awards/Memorials Experse Consulting Experse Polling Expense Travel in District Contributions/ Donations Made By Printing Experse Travel Out of District Legal Sarvices Candidate/Officeholder/Political Committee Salaries Wages Commad Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 3 Filer ID Total pages Schedule F4: 2 FILER NAME Sch: 14/16 Rpt: 27/32 Henry, Kevin TOTAL OF UNITEMIZED Name of financial institution **CREDIT CARD EXPENDITURES** ISSUER see previous **CHARGED TO A CREDIT** CARD 6 PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid \$46.54 07/07/2024 PAYEE (a) Payee name (b) Payee address; City, State, Zip Code 500 Terry A Francios Blvd WIX.COM 1125088319 San Francisco, CA 94158 (b) Description PURPOSE OF (a) Category **EXPENDITURE** (See Categories listed at the top of this schedule) Adversting Advertising Expense X Political Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Complete QNLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH PAYMENT (c) Date(s) Credit Card Issuer Paid (a) Amount Charged (b) Date of Charge \$49.58 07/01/2024 PAYEE (a) Payee name (b) Payee address; City, State. Zip Code 165 OvsterCreek Dr HARBOR FREIGHT TOOLS3351 Lake Jackson, TX 77566 (a) Category (b) Description **PURPOSE OF EXPENDITURE** (See Caregories listed at the top of this schedule) **Supplies Supplies** X Political Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office sought Office held Complete QNLY if direct Candidate/Officeholder name expenditure to benefit C/OH PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid \$32.26 09/26/2024 PAYEE (b) Payee address; Zip Code (a) Payee name City, State. 165 OvsterCreek Dr HARBOR FREIGHT TOOLS3351 Lake Jackson, TX 77566 (b) Description **PURPOSE OF** (a) Category **EXPENDITURE** (See Categories listed at the top of this schedule) Supplies **Supplies** X Political Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Complete ONLY if direct Office held Candidate/Officeholder name Office sought

expenditure to benefit C/OH

# SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense Adversing Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made ByCamdidate/Office/holder/Political Committee Event Expense Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Poting Expense
Printing Expense
Salaries/Wages/Contract Lattor

Solicitation/Fundraising Experse Transportation Equipment & Related Experse 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: 15/16 Rpt: 28/32	Henry, Kevin								
4 CREDIT CARD ISSUER	Name of financial institution  Lowes Credit Card  5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD			S					
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s	s) C	Credit Card Issuer	Paid			
SE DESTRUCTION DE LA CONTRACTION DEL CONTRACTION DE LA CONTRACTION DE LA CONTRACTION DE LA CONTRACTION DE LA CONTRACTION DE LA CONTRACTION DE LA CONTRACTION DE LA CONTRACTION DE LA CONTRACTION DE LA CONTRACTION DE LA CONTRACTION DE LA CONTRACTION DE LA CONTRACTION DE LA CONTRACTION DE LA CONTRACTION DE LA CONTRACTION DE LA CONTRACTION DE LA CONTRACTION	\$86.56	09/10/2024							
7 PAYEE	(a) Payee name (b) Payee address;			City,	State,	Zip Code			
	Lowe's		200 Hwy 332						
		·······················			son, TX 77566				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descri		Off				
X Political	Supplies	, 	Supplies	5					
Non-Political		of Texas. Complete Schedule T.		-	Check if Austin, TX,	officeholder living exp	න <u>ළ</u> දෙ		
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought			Office held			
expenditure to benefit C/OH			7						
PAYMENT	(a) Amount Charged	Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid							
PAYEE	E (a) Payee name (b) Payee address;				ldress;	City,	State,	Zip Code	
PURPOSE OF EXPENDITURE  Political	EXPENDITURE (See Categories listed at the top of this schedule)				on				
Non-Political	() [ a   i   i   i   i   i   i   i   i   i		1						
Complete ONLY if direct	(c) Check if travel outside  Candidate/Officeholder	of Texas. Complete Schedule T.  name Office	e sought			Office held			
expenditure to benefit C/OH									
PAYMENT					redit Card Issuer	Paid			
PAYEE	(a) Payee name		(b) Payee	e ad	dress;	City,	State,	Zip Code	
PURPOSE OF									
EXPENDITURE Political	(See Categories listed at the top of this schedule)								
Non-Political	Non-Political (c) Check if travel outside of Texas. Complete Schedule T.								
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									

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Gift/Awards/Memorials Expense Consulting Experse Polling Experse Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Legal Services OTHER (error 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: 16/16 Rpt: 29/32 Henry, Kevin **CREDIT CARD** Name of financial institution TOTAL OF UNITEMIZED **EXPENDITURES** ISSUER American Express CHARGED TO A CREDIT **CARD** PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid \$115.75 08/13/2024 PAYEE (a) Payee name (b) Payee address; State, City. Zip Code 104 TX-332 Ste 300 OFFICE DEPOT #2691 Lake Jackson, TX 77566 (b) Description **PURPOSE OF** (a) Category **EXPENDITURE** (See Categories listed at the top of this schedule) Supplies Supplies X Political Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder fiving expense 9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid \$119.06 08/13/2024 PAYEE (a) Payee name State. Zip Code (b) Payee address; City, 104 TX-332 Ste 300 OFFICE DEPOT #2691 Lake Jackson, TX 77566 **PURPOSE OF** (a) Category (b) Description EXPENDITURE (See Categories listed at the top of this schedule) **Supplies** Supplies X Political Non-Political (C) Check if travel ourside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH

# **POLITICAL EXPENDITURES FROM PERSONAL FUNDS**

## SCHEDULE G

# **EXPENDITURE CATEGORIES FOR BOX 8(a)**

	Accounting/Banking Consulting Experse Contributions/ Donations Made By - Candidate/Officeholdler/Political Committee Oredit Card Powment		•	Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Printing Expense Printing Expense			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not lissed above)
		Ţ		IOW to Co	mbee no our	ـــــــ	
1	Total pages Schedule G: Sch: 1/2 Rpt: 30/32	2	2 FILER NAME Henry, Kevin			3	Filer ID
4		Ę		<del></del>			
4	Date 09/10/2024	5	Payee name Lowe's				
-		<del> -</del>		Zin C		—	
0	Amount (\$) \$86.56	1	Payee address; City; State; 200 Hwy 332	Zip Co	ode		
	Reimbursement from political contributions intended		Lake Jackson, TX 77566				
8	PURPOSE	(a	) Category (See Categories listed at the top of this sche	dule)	(b) Description	] cı	neck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITION		Signs Supplies			] a	neck if Austin, TX, officeholder living expense
	EXPENDITURE	DITURE		Signs Supplies			
9	Complete ONLY if direct expenditure to benefit C/OH	Caı	ndidate/Officeholder name		Office sought		Office held
	Date		Payee name	·			
	08/13/2024 OFFICE DEPOT #2691						
_	Amount (\$)	Amount (\$) Payee address; City; State; Zip Code			ode		
	\$115.75		104 TX-332 Ste 300				
	Reindowsement from political controlled intended		Lake Jackson, TX 77566				
	PURPOSE		Category (See Categories listed at the top of this sched	dule)	Description [	╡	neck iftravel outside of Texas. Complete Schedule T.
OF EXPENDITURE			Office Supplies			] Ch	neck if Austin, TX, officeholder living expense
		Office Supplies			Office Supplies		
	Complete ONLY if direct expenditure to benefit C/OH	Car	ndidate/Officeholder name		Office sought		Office held
	Date 08/13/2024		Payee name OFFICE DEPOT #2691				
_	Amount (\$) \$119.06		Payee address; City; State; 104 TX-332 Ste 300	Zip Co	ode	-	
-	Reimbursement from political committees of the committee	Lake Jackson, TX 77566					
	PURPOSE		Category (See Categories listed at the top of this sche	dule)	Description	_	neck if travel outside of Texas. Complete Schedule T.
	OF Office Supplies			L	] Ch	neck if Austin, TX, officeholder living expense	
					Office Supplies		
	Complete ONLY if direct expenditure to benefit C/OH	Car	ndidate/Officeholder name		Office sought		Office held

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Advertising Expense Event Expense Solicitation/Fundraising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Office/holder/Political Committee Fees Food/Beverage Experse Transportation Equipment & Related Expense Travel in District Polling Experse wards/Memorials Experse Printing Experse Salaries/Wages/Contract Labor Travel Out of District Legal Services OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule G: 2 FILER NAME 3 Filer ID Sch: 2/2 Rpt: 31/32 Henry, Kevin 4 Date Payee name 08/12/2024 Sam's Club Payee address; 6 Amount (\$) State; Zip Code 15800 S Fwy \$172.64 Reimbursement from क्रकांट्य ट्याणवेष्णांटाड स्वटार्टर Pearland, TX 77584 Check if travel outside of Texas. Complete Schedule T. **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense **Show Supplies EXPENDITURE** Supplies for trade shows Complete ONLY if direct Candidate/Officeholder name Office held Office sought expenditure to benefit CIOH

# INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 32/32 2 FILER NAME 3 Filer ID Henry, Kevin Date 5 Name of person from whom amount is received 8 Amount (\$) 08/06/2024 Brazoria Little League Inc \$300.00 Address of person from whom amount is received; City; State; Zip Code PO Box 1180 Brazoria, TX 77422 Purpose for which amount is received Check if political contribution returned to filer Refund for sponsorship Date Name of person from whom amount is received Amount (\$) \$50.00 09/13/2024 Brazoria Little League Inc Address of person from whom amount is received; City; State; Zip Code PO Box 1180 Brazoria, TX 77422 Purpose for which amount is received ☐ Check if political contribution returned to filer Refund of sponsorship Date Name of person from whom amount is received Amount (\$) 08/05/2024 City of Clute \$380.00 Address of person from whom amount is received; City; State; Zip Code 108 E Main St Clute, TX 77531 Purpose for which amount is received Check if political contribution returned to filer Refund for cancelled event fee