FORM C/OH CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID Total pages filed: The C/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 35 00000011 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** Brian NAME Date Received **ELECTRONICALLY FILED** 10/07/2024 NICKNAME LAST **SUFFIX** Kennedy CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** 5015 Montoya MAILING Amount Receipt # **ADDRESS** Change of Address El Paso, TX 79922 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mrs. Iliana NAME NICKNAME LAST **SUFFIX** Holguin **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE; **TREASURER** 1701 Bassett Ave. **ADDRESS** Suite 156 (Residence or Business) El Paso, TX 79902 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (915) 588-6244 **PHONE** REPORT **TYPE** 30th day before election January 15 Runoff 15th day after campaign treasurer appointment (officeholder only) Final Report (Attach C/OH-FR) July 15 8th day before election Exceeded modified reporting limit **PERIOD** Month Day Year Month Day Year **COVERED** 07/01/2024 **THROUGH** 09/26/2024 10 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other 11/05/2024 χ General Special

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11 OFFICE

OFFICE HELD (if any)

City Representative District 1 El Paso

12 OFFICE SOUGHT (if known)

Mayor El Paso

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

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13 C / OH NAME	Kennedy, Brian		14 Filer ID 0000011	(Ethics Commission Filers)				
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political exper These expenditures may have been made with officeholders are required to report this informa-	out the candidate's or offic	eholder's knowledge or				
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME						
⊔ °	GENERAL							
		COMMITTEE ADDRESS						
	SPECIFIC							
		COMMITTEE CAMPAIGN TREASURER NAM	E					
		COMMITTEE CAMPAIGN TREASURER ADD	RESS					
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER T ES OF LOANS, OR CONTRIBUTIONS MADE E		\$ 0.00				
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LO	ANS)	\$ 31,007.30				
EXPENDITURE TOTALS								
	4. TOTAL POLITICAL EXPENDITURES \$							
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF TH RIOD	E LAST DAY OF THE	\$ 113,479.39				
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS TING PERIOD	AS OF THE LAST DAY	\$ 181,000.00				
17 AFFIDAVIT		I swear, or affirm, under per true and correct and include under Title 15, Election Cod	es all information required					
			Brian Kennedy					
		Signatur	e of Candidate or Officeho	older				
AFFIX NO	TARY STAMP / SEAL ABO	DVE						
Sworn to and subs	cribed before me, by the s	aid	, this the	day				
		rtify which, witness my hand and seal of office.						
Signature of office	Signature of officer administering Printed name of officer administering Title of officer administering oath							

SUBTOTALS - C/OH

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

					3 of 35
	ER NAM		19 Filer ID 0000011	(Eth	ics Commission Filers)
		E SUBTOTALS SCHEDULE			SUBTOTAL AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	27,147.20
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	3,860.10
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$	66,395.42
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.	X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	179,556.40
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$	

	MONEI	ARY POLITICAL CONTRIBUTIO	INS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 1/10 Rpt: 4/35	
2	FILER NAME Kennedy, Bri	an		3	Filer ID (Ethics Commission 00000011	n Filers)
4	Date 07/27/2024	 Full name of contributor out-of-state PAC (ID#:_Acosta, Cristina Contributor address; City; State; Zip Code 9327 Elgin Dr.)	7	Amount of Contribution (\$)	\$500.00
8	Principal occup	El Paso, TX 79907 pation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date 07/18/2024	Full name of contributor out-of-state PAC (ID#:_Adauto, Raymond Contributor address; City; State; Zip Code 3331 Morehead El Paso, TX 79930			Amount of Contribution (\$)	\$250.00
	Principal occup	pation / Job title (See Instructions)	Employer (See Instructions))		
	Date 07/29/2024	Full name of contributor out-of-state PAC (ID#:_Alba, Karla Contributor address; City; State; Zip Code 5988 Equinox Court			Amount of Contribution (\$)	\$500.00
	Principal occu	El Paso, TX 79924 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/26/2024	Full name of contributor out-of-state PAC (ID#:_ Austin, David Contributor address; City; State; Zip Code 5745 Mira Grande Drive Dr. El Paso, TX 79912			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		
	Date 09/17/2024	Full name of contributor out-of-state PAC (ID#:_Avila, Andrew Contributor address; City; State; Zip Code 6365 los Robles El Paso, TX 79912			Amount of Contribution (\$)	\$500.00
	Principal occup Restaurant o	pation / Job title (See Instructions) wner	Employer (See Instructions))		

	MONET	ARY POLITICAL CONTRIBUTIONS		SCHEDULI	E A1
	The Instruc	ction Guide explains how to complete this form.	1	Total pages Schedule A1: Sch: 2/10 Rpt: 5/35	
2	FILER NAME Kennedy, Br	an	3	Filer ID (Ethics Commission 00000011	n Filers)
4	Date 07/13/2024	 Full name of contributor out-of-state PAC (ID#:	7	Amount of Contribution (\$)	\$250.00
8	Principal occu	pation / Job title (See Instructions) 9 Employer (See Instru	ctions)		
	Date 07/11/2024	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	\$1,000.00
	Principal occu Atty	pation / Job title (See Instructions) Employer (See Instru	ctions)		
	Date 08/30/2024	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	\$300.00
	Principal occu NA	pation / Job title (See Instructions) Employer (See Instru	ctions)		
	Date 09/22/2024	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	\$150.00
	Principal occu	pation / Job title (See Instructions) Employer (See Instru	ctions)		
	Date 08/02/2024	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	\$75.00
	Principal occu Retired	pation / Job title (See Instructions) Employer (See Instru	ctions)		
		1			

	MONEI	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 3/10 Rpt: 6/35	
2	FILER NAME Kennedy, Bri	an		3	Filer ID (Ethics Commission 00000011	on Filers)
4	Date 09/17/2024	 Full name of contributor out-of-state PAC (ID#:_Dalbin, Frederick Contributor address; City; State; Zip Code 2308 red Bluff 		7	Amount of Contribution (\$)	\$150.00
8	Principal occup	El Paso, TX 79930 pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u> ;;)		
	Date 08/08/2024	Full name of contributor out-of-state PAC (ID#:_Dipp, Suzanne Contributor address; City; State; Zip Code 515 Rim Rd. El Paso, TX 79902			Amount of Contribution (\$)	\$1,000.00
	Principal occup Self-employe	oation / Job title (See Instructions) d	Employer (See Instructions	s)		
	Date 09/19/2024	Full name of contributor out-of-state PAC (ID#:_Escobar, Enrique Contributor address; City; State; Zip Code 337 East Borderland Rd.			Amount of Contribution (\$)	\$1,000.00
	Principal occu	El Pass, TX 79932 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Date 09/17/2024	Full name of contributor out-of-state PAC (ID#:_Fender, Lorraine & Rod Contributor address; City; State; Zip Code 7040 Villa Hermosa El Paso, TX 79912			Amount of Contribution (\$)	\$500.00
	Principal occup Business per	oation / Job title (See Instructions)	Employer (See Instructions	<u>(</u> 5)		
	Date 07/29/2024	Full name of contributor out-of-state PAC (ID#:_Flores, Josh Contributor address; City; State; Zip Code 872 Agave Park El Paso, TX 79932			Amount of Contribution (\$)	\$500.00
	Principal occu	oation / Job title (See Instructions)	Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 4/10 Rpt: 7/35	
2	FILER NAME Kennedy, Br	ian		3	Filer ID (Ethics Commission 00000011	on Filers)
4	Date 09/15/2024	 5 Full name of contributor out-of-state PAC (ID#:_George, Thomas and Bailee 6 Contributor address; City; State; Zip Code 5529 Woodgreen Dr. El Paso, TX 79932)	7	Amount of Contribution (\$)	\$3,000.00
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 07/29/2024	Full name of contributor out-of-state PAC (ID#:_ Griffin, Keli Contributor address; City; State; Zip Code 409 Pendale Rd. El Paso, TX 79907			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 07/20/2024	Full name of contributor out-of-state PAC (ID#:_ Hernandez, Arnulfo Contributor address; City; State; Zip Code 1490 George Deiter Drive El Paso, TX 79936)		Amount of Contribution (\$)	\$150.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/09/2024	Full name of contributor out-of-state PAC (ID#:_ House, David Contributor address; City; State; Zip Code 6372 La Posta El Paso, TX 79912			Amount of Contribution (\$)	\$100.00
	Principal occu SWA	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/17/2024	Full name of contributor out-of-state PAC (ID#:_ Hughes, Thomas Contributor address; City; State; Zip Code 747 E. San Antonio Suite 202 El Pasas, TX 79901)		Amount of Contribution (\$)	\$150.00
	Principal occu Atty	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTIONS		SCHEDUI	E A1
	The Instruc	ction Guide explains how to complete this form.	1	Total pages Schedule A1: Sch: 5/10 Rpt: 8/35	
2	FILER NAME Kennedy, Bri	an	3	Filer ID (Ethics Commission 00000011	on Filers)
4	Date 07/11/2024	 Full name of contributor out-of-state PAC (ID#:) Jones, David Contributor address; City; State; Zip Code 714 McKellan Dr. 		Amount of Contribution (\$)	\$75.00
8		El Paso, TX 79922 pation / Job title (See Instructions) 9 Employer (See Instruction)	ns)		
	Date 09/17/2024	Full name of contributor out-of-state PAC (ID#:) Kastrin, William Contributor address; City; State; Zip Code 1600 E. 4th Ave. El Paso, TX 79901		Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions) Employer (See Instruction	ns)		
	Date 09/03/2024	Full name of contributor out-of-state PAC (ID#:) King, Bruce Contributor address; City; State; Zip Code 606 Rosinante		Amount of Contribution (\$)	\$500.00
	Principal occu	El Paso, TX 79922 Dation / Job title (See Instructions) Employer (See Instruction	ns)		
	Date 09/26/2024	Full name of contributor out-of-state PAC (ID#:) Knight, Dennece Contributor address; City; State; Zip Code 5015 Montoya El Paso, TX 79922		Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions) Employer (See Instruction	ns)		
	Date 07/11/2024	Full name of contributor out-of-state PAC (ID#:) Knight, Dennece Contributor address; City; State; Zip Code 5015 Montoya El Paso, TX 79922		Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions) Employer (See Instruction	ns)		
		I			

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 6/10 Rpt: 9/35	
2	FILER NAME Kennedy, Br	an		3	Filer ID (Ethics Commission 00000011	n Filers)
4	Date 07/13/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$25.00
8	Principal occu	El Paso, TX 79932 pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u>		
	None Date 07/11/2024	Full name of contributor uut-of-state PAC (ID#:_Laign, Phillips			Amount of Contribution (\$)	\$25.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 07/29/2024	Full name of contributor out-of-state PAC (ID#:_ Lara, Ann Laura Contributor address; City; State; Zip Code 1475 Raya del Sol			Amount of Contribution (\$)	\$500.00
	Principal occu	El Paso, TX 79911 pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Date 07/18/2024	Full name of contributor out-of-state PAC (ID#:_Limon, Jose or Lilia Contributor address; City; State; Zip Code 1301 Lone Wood Dr. El Paso, TX 79925			Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/11/2024	Full name of contributor out-of-state PAC (ID#:_Lindell, AJ Contributor address; City; State; Zip Code 45395 20th Ave. Kenyon, MN 55946)		Amount of Contribution (\$)	\$100.00
	Principal occu Airline pilots	oation / Job title (See Instructions) association	Employer (See Instructions	5)		
		•				

	MONEI	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 7/10 Rpt: 10/35	
2	FILER NAME Kennedy, Bri	an		3	Filer ID (Ethics Commission 00000011	n Filers)
4	Date 09/26/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$150.00
8	Principal occur Architecture	El Paso, TX 79901 pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u> 5)		
	Date 07/13/2024	Full name of contributor out-of-state PAC (ID#: Lorey, Martina Contributor address; City; State; Zip Code 2100 N. StantonStreet El Pass, TX 79902			Amount of Contribution (\$)	\$250.00
	Principal occu Architect,	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 09/17/2024	Full name of contributor out-of-state PAC (ID#: Mendez, Jesus Contributor address; City; State; Zip Code 3812 N. StantonStreet El Paso, TX 79902			Amount of Contribution (\$)	\$100.00
	Principal occu Businessma	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Date 08/23/2024	Full name of contributor out-of-state PAC (ID#: Morrison, Sherrie Contributor address; City; State; Zip Code 7332 OToole Dr. El Paso, TX 79934			Amount of Contribution (\$)	\$150.00
	Principal occu Self-employe	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 08/22/2024	Full name of contributor out-of-state PAC (ID#: Nacim, Richard Contributor address; City; State; Zip Code 4033 Emory Rd. El Paso, TX 79922			Amount of Contribution (\$)	\$500.00
	Principal occu Self-employe	pation / Job title (See Instructions)	Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDULE A1	
	The Instruc	ction Guide explains how to complete this fo	orm.		otal pages Schedule A1: Sch: 8/10 Rpt: 11/35	_
2	FILER NAME Kennedy, Br	an			iler ID (Ethics Commission Filers) 0000011	
4	Date 07/16/2024	 Full name of contributor out-of-state PAC (ID#:_Neesen, Dennis and Donnana Contributor address; City; State; Zip Code 5625 South Desert Blvd. 	_	7 A	smount of Contribution (\$) \$1,000.0	0
		El Paso, TX 79932				
8	Principal occu Business ow		9 Employer (See Instructions)	i)		
	Date 07/14/2024	Full name of contributor out-of-state PAC (ID#:Padilla, Glo Contributor address; City; State; Zip Code 14002 Tuckey Ln. El Paso, TX 79928		Д	amount of Contribution (\$) \$25.0	0
	Principal occu Nine	pation / Job title (See Instructions)	Employer (See Instructions)	5)		
	Date 08/10/2024	Full name of contributor out-of-state PAC (ID#:		Д	mount of Contribution (\$) \$47.2	0
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions)	<u> </u>		_
	Date 07/24/2024	Full name of contributor out-of-state PAC (ID#:_ Parker, Lester Contributor address; City; State; Zip Code 6173 Los Felinos Circle El Paso, TX 79912)	A	mount of Contribution (\$) \$400.0	0
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions)	5)		_
	Date 07/11/2024	Full name of contributor out-of-state PAC (ID#: Parsa, Michael Contributor address; City; State; Zip Code 4765 Pine Creek Ln. El Paso, TX 79922		Α	mount of Contribution (\$) \$50.0	0
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	<u> </u>		_

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 9/10 Rpt: 12/35	
2	FILER NAME Kennedy, Br	an		3	Filer ID (Ethics Commissio 00000011	n Filers)
4	Date 09/17/2024			7	Amount of Contribution (\$)	\$250.00
		762 via Lanza El Paso, TX 79912				
8	Principal occu	1	9 Employer (See Instructions)	<u> </u> ;)		
	Marketing					
	Date	Full name of contributor uut-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	07/28/2024	Radcliffe, Yolanda				\$25.00
		Contributor address; City; State; Zip Code				
		1212 East Baltimore Dr.				
		El Paso, TX 79902				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	5)		
	Self-employe	ed				
	Date	Full name of contributor ut-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	07/12/2024	Reinbolt, Jason				\$100.00
		Contributor address; City; State; Zip Code				
		1821 Bessmore Park				
		Rochester, MN 46975				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		
	State of India	ana attorney				
	Date	Full name of contributor ut-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	09/17/2024	Reyes, Silvestre				\$1,000.00
		Contributor address; City; State; Zip Code				
		732 Azalea				
		El Paso, TX 79922				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		
	Retired					
	Date	Full name of contributor ut-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	08/14/2024	Rizk, David				\$250.00
		Contributor address; City; State; Zip Code				
		1612 Dede In				
		El Paso, TX 79902				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		
	Self-employe	ed				

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 10/10 Rpt: 13/35	
2	FILER NAME Kennedy, Br	ian		3	Filer ID (Ethics Commission 00000011	on Filers)
4	Date 09/17/2024	 Full name of contributor out-of-state PAC (ID#:_Robinet, Philip and Sharon Contributor address; City; State; Zip Code 1075 Esplanada El Paso, TX 79932)	7	Amount of Contribution (\$)	\$1,000.00
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date 07/19/2024	Full name of contributor out-of-state PAC (ID#:_Saan, William Contributor address; City; State; Zip Code 700 Camino Real Ave. El Paso, TX 79922			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/02/2024	Full name of contributor out-of-state PAC (ID#:_ Thompson, John and Mary Contributor address; City; State; Zip Code 909 Broadmoor			Amount of Contribution (\$)	\$500.00
	Principal occu	El Paso, TX 79912 pation / Job title (See Instructions)	Employer (See Instructions))		
	Date 07/18/2024	Full name of contributor out-of-state PAC (ID#:_Velarde, Ray Contributor address; City; State; Zip Code 1216 Montana Ave. El Paso, TX 79902			Amount of Contribution (\$)	\$250.00
	Principal occu Atty	pation / Job title (See Instructions)	Employer (See Instructions))		
	Date 08/08/2024	Full name of contributor out-of-state PAC (ID#:_ Venegas, Mary Contributor address; City; State; Zip Code 6321 Camino Nogal El Paso, TX 79932			Amount of Contribution (\$)	\$150.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/3 Rpt: 14/35 3 Filer ID (Ethics Commission Filers) FILER NAME Kennedy, Brian 00000011 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Full name of contributor In-kind contribution Date out-of-state PAC (ID#: Amount of contribution (\$) description 09/18/2024 Aguilar III, Carlos \$910.10 Fundraiser expenses Contributor address; City; State; Zip Code 3420 Pershing Dr. El Paso, TX 79903 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) Real 13 Contributor's job title (FOR JUDICIAL) (See instructions) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) Date Full name of contributor Amount of In-kind contribution out-of-state PAC (ID#: contribution (\$) description 09/18/2024 Aguilar IV, Carlos \$600.00 Fundraising expenses Contributor address; City; State; Zip Code 3430 Douglas

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 2/3 Rpt: 15/35 3 Filer ID (Ethics Commission Filers) FILER NAME Kennedy, Brian 00000011 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Full name of contributor In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 09/18/2024 Dominguez, Nicolas \$500.00 Fundraiser expenses Contributor address; City; State; Zip Code 14166 Bradley Rd. El Paso, TX 79938 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) Marketing 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) In-kind contribution Date Full name of contributor Amount of out-of-state PAC (ID#: contribution (\$) description 09/10/2024 Robinet, Sharon \$450.00 Fund Raiser Contributor address; City; State; Zip Code 1075 Esplanada El Paso, TX 79932 Check if travel outside of Texas. Complete Schedule T. (See instructions) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) 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) Date Full name of contributor Amount of In-kind contribution out-of-state PAC (ID#: contribution (\$) description 09/18/2024 Rodriguez, Adriana \$500.00 i Contributor address; City; State; Zip Code 805 Londonderry Rd. El Paso, TX 79907 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 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)

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL)

(See instructions)

CONTRIBUTIONS	ICAL	SCHEDULE A2
The Instruction Guide explains how to complete	this form.	1 Total pages Schedule A2: Sch: 3/3 Rpt: 16/35
2 FILER NAME Kennedy, Brian	3 Filer ID (Ethics Commission Filers) 00000011	
TOTAL OF UNITEMIZED IN-KIND POLITICAL CON	\$	
5 Date 09/10/2024 6 Full name of contributor out-of-state PAC Woo, Sue 7 Contributor address; City; State; Zip Code 816 Lakeshore Santa Teresa, NM 88008	ID#:	8 Amount of contribution (\$) 9 In-kind contribution description \$450.00 Fund Raiser
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instru	ctions) 11 Employer (FO	DR NON-JUDICIAL) (See instructions)
12 Contributor's principal occupation (FOR JUDICIAL)	13 Contributor's j	job title (FOR JUDICIAL) (See instructions)
14 Contributor's employer/law firm (FOR JUDICIAL)	15 Law firm of co	ontributor's spouse (if any) (FOR JUDICIAL)
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDIC	AL)	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

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 Credit Card Payment	I Committee	Legal Services The Instruction	Guide explains how to c		cte this form.	OTHER (enter a	a category not listed above)
1	Total pages Schedule F1:	2 FILER N	NAME				3 Filer ID	(Ethics Commission Filers)
	Sch: 1/1 Rpt: 17/35	Kenne	dy, Brian				00000011	
4	Date	5 Payee r	name					
	08/23/2024	Display	y Services					
6	Amount (\$)	7 Payee a	address; City;	State; Zip C	ode			
	\$13,521.25	821 N.	Raynor Street					
		El Paso	o, TX 79903					
8	PURPOSE	(a) Categor	ry (See Categories listed a	at the top of this schedule)	(b)	Description		
	OF EXPENDITURE	Adverti	ising Expense			_	utside of Texas. Con	
						Signs	TX, officeholder living	g expense
						Signs		
_	Complete ONLY if direct	Condidat	e/Officeholder name	Office co	uabt		Office h	ald
9	Complete ONLY if direct expenditure to benefit C/Ol		e/Onicendider name	Office so	ugni		Office II	eiu
	Date	Payee r						
	09/18/2024	GODIR	RECT					
	Amount (\$)	Payee a	address; City;	State; Zip C	ode			
	\$52,874.17	8400 B	Boeing Dr.					
		El Paso	o, TX 79925					
	PURPOSE		ry (See Categories listed a	at the top of this schedule)	(b)	Description		
	OF	(a) Categor	ry (See Categories listed a	at the top of this schedule)	(b)	Check if travel of	utside of Texas. Con	
		(a) Categor		at the top of this schedule)	(b)	Check if travel of Check if Austin,	TX, officeholder living	
	OF	(a) Categor		at the top of this schedule)	(b)	Check if travel of	TX, officeholder living	
	OF EXPENDITURE	(a) Categor Adverti	ising Expense			Check if travel of Check if Austin,	TX, officeholder living	g expense
	OF	(a) Categor Adverti Candidat		at the top of this schedule) Office so		Check if travel of Check if Austin,	TX, officeholder living	g expense
	OF EXPENDITURE Complete ONLY if direct	(a) Categor Adverti Candidat	ising Expense			Check if travel of Check if Austin,	TX, officeholder living	g expense
	OF EXPENDITURE Complete ONLY if direct	(a) Categor Adverti Candidat	ising Expense			Check if travel of Check if Austin,	TX, officeholder living	g expense
	OF EXPENDITURE Complete ONLY if direct	(a) Categor Adverti Candidat	ising Expense			Check if travel of Check if Austin,	TX, officeholder living	g expense
	OF EXPENDITURE Complete ONLY if direct	(a) Categor Adverti Candidat	ising Expense			Check if travel of Check if Austin,	TX, officeholder living	g expense
	OF EXPENDITURE Complete ONLY if direct	(a) Categor Adverti Candidat	ising Expense			Check if travel of Check if Austin,	TX, officeholder living	g expense
	OF EXPENDITURE Complete ONLY if direct	(a) Categor Adverti Candidat	ising Expense			Check if travel of Check if Austin,	TX, officeholder living	g expense
	OF EXPENDITURE Complete ONLY if direct	(a) Categor Adverti Candidat	ising Expense			Check if travel of Check if Austin,	TX, officeholder living	g expense
	OF EXPENDITURE Complete ONLY if direct	(a) Categor Adverti Candidat	ising Expense			Check if travel of Check if Austin,	TX, officeholder living	g expense
	OF EXPENDITURE Complete ONLY if direct	(a) Categor Adverti Candidat	ising Expense			Check if travel of Check if Austin,	TX, officeholder living	g expense
	OF EXPENDITURE Complete ONLY if direct	(a) Categor Adverti Candidat	ising Expense			Check if travel of Check if Austin,	TX, officeholder living	g expense
	OF EXPENDITURE Complete ONLY if direct	(a) Categor Adverti Candidat	ising Expense			Check if travel of Check if Austin,	TX, officeholder living	g expense
	OF EXPENDITURE Complete ONLY if direct	(a) Categor Adverti Candidat	ising Expense			Check if travel of Check if Austin,	TX, officeholder living	g expense
	OF EXPENDITURE Complete ONLY if direct	(a) Categor Adverti Candidat	ising Expense			Check if travel of Check if Austin,	TX, officeholder living	g expense
	OF EXPENDITURE Complete ONLY if direct	(a) Categor Adverti Candidat	ising Expense			Check if travel of Check if Austin,	TX, officeholder living	g expense
	OF EXPENDITURE Complete ONLY if direct	(a) Categor Adverti Candidat	ising Expense			Check if travel of Check if Austin,	TX, officeholder living	g expense

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 Credit Card Payment		Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Polling E: Printing E			Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
	credit card r dyment	_	The Instruction Guide explain	s how to co	omplete this form.			
1	Total pages Schedule G:	2 FILER NAME				3	Filer ID (Ethics Commission Filers)	
	Sch: 1/18 Rpt: 18/35	Kennedy, E	rian				0000011	
4	Date	5 Payee name						
	07/11/2024	Campaign	verify					
6	Amount (\$)	7 Payee addre	ss; City; State	e; Zip C	ode			_
	\$95.00	4402 Rese	voir Rd.					
	Reimbursement from							
	political contributions intended	Washingtor	n, DC 20007					
8	PURPOSE	(a) Category (s	ee Categories listed at the top of this so	:hedule)	(b) Description	Ch	neck if travel outside of Texas. Complete Schedule T	_
	OF	Advertising		,		Ch	neck if Austin, TX, officeholder living expense	
	EXPENDITURE]	F		Verify Campaign	for	Marketing	
9	Complete ONLY if direct	Candidate/Office	holder name		Office sought		Office held	_
	expenditure to benefit C/OH							
	0,011							_
	Date	Payee name						
	08/03/2024	Crisistomo						
	Amount (\$)	Payee addre	ss; City; State	e; Zip C	ode			
	\$196.86	5658 N. Me	sa Street					
	Reimbursement from political contributions							
	intended	El Paso, T	79912					
	PURPOSE	Category (S	ee Categories listed at the top of this so	chedule)	Description	_	neck if travel outside of Texas. Complete Schedule T	:
	OF EXPENDITURE	Food/Bevei	age Expense		L	_	neck if Austin, TX, officeholder living expense	
					Food for canvase	es		
	0 1: 0.11.7.7.1.	0 111 1011			0"		0.6	_
	Complete ONLY if direct expenditure to benefit	Candidate/Office	nolder name		Office sought		Office held	
	C/OH							
	Date	Payee name						=
	08/24/2024	Crisistomo						
	Amount (\$)	Payee addre	ss; City; State	e; Zip C	ode			_
	\$227.32	5658 N. Me	sa Street					
	Reimbursement from							
	political contributions intended	El Paso, T	79912					
	PURPOSE	Category (s	ee Categories listed at the top of this so	chedule)	Description	Ch	neck if travel outside of Texas. Complete Schedule T	-
	OF EXPENDITURE	Food/Bever	age Expense			Ch	neck if Austin, TX, officeholder living expense	
	EXI ENDITORE				Food for canvase	es		
	Complete ONLY if direct expenditure to benefit	Candidate/Office	holder name		Office sought		Office held	
	C/OH							
								_

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	- Committee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Loan Rep Office Ove Polling Ex Printing E	ayment/Reimbursement erhead/Rental Expense pense		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
	Credit Card Payment		The Instruction Guide explains I	how to co	mplete this form.		
1	Total pages Schedule G:	2 FILER NAM	E			3	Filer ID (Ethics Commission Filers)
	Sch: 2/18 Rpt: 19/35	Kennedy, I	Brian				00000011
4	Date	5 Payee name	9				
	09/14/2024	Crisistomo					
6	Amount (\$)	7 Payee addr	ess; City; State;	Zip Co	de		
	\$227.32	5658 N. M	esa Street				
	Reimbursement from political contributions intended	El Paso, T	X 79912				
8	PURPOSE	(a) Category (See Categories listed at the top of this sch	edule)	(b) Description	С	heck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Food/Beve	erage Expense			С	heck if Austin, TX, officeholder living expense
					Food for canvaso	es	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Office	eholder name		Office sought		Office held
	Date	Payee name	9				
	09/09/2024	Display Se	rvices				
	Amount (\$)	Payee addr	ess; City; State;	Zip Co	de		
	\$1,688.70	821 N. Ray	ynor Street				
	Reimbursement from political contributions intended	El Paso, T	X 79903				
	PURPOSE	Category (See Categories listed at the top of this sche	edule)	Description	=	heck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Printing Ex	pense		L	_	heck if Austin, TX, officeholder living expense
					Signs and magn	ets	
	0 1 0 0 1 1 1 1	2 11 1 10 11			000		0.5
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Office	enoider name		Office sought		Office held
	Date	Payee name	е				
	09/10/2024	El Diario					
	Amount (\$)	Payee addr	ess; City; State;	Zip Co	de		
	\$8,676.37	1801 Texa	S				
	Reimbursement from political contributions						
	intended	El Paso, T	X 79901				
	PURPOSE	Category (See Categories listed at the top of this sche	edule)	Description	С	heck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Printing Ex	pense			С	heck if Austin, TX, officeholder living expense
					Mailer		
	0 1. 0						000
	Complete <u>ONLY</u> if direct expenditure to benefit	Candidate/Office	enoider name		Office sought		Office held
	C/OH						

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Constituting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memorials Expense Legal Services The Instruction Guide explain		Expense Wages/Contract Labor	Travel II District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule G:	2 FILER NAME	Ē			3 Filer ID (Ethics Commission Filer	rs)
	Sch: 3/18 Rpt: 20/35	Kennedy, E	Brian			00000011	
4	Date	5 Payee name	:			1	
	07/24/2024	-	ail and Print				
6	Amount (\$)	7 Payee addre	ess; City; Stat	te; Zip C	ode		
_	\$6,745.33	1144 Vista	•	, <u>-</u>			
	Reimbursement from political contributions intended	El Paso, T					
8	PURPOSE OF	(a) Category (s	see Categories listed at the top of this s	chedule)	(b) Description	Check if travel outside of Texas. Complete Sched	dule T.
	EXPENDITURE	Advertising	Expense		<u> </u>	Check if Austin, TX, officeholder living expense	
					Door hangers		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Office	holder name		Office sought	Office held	
	Date	Payee name					
	09/10/2024	Facebook					
	Amount (\$)	Payee addre	ess; City; Stat	te; Zip C	ode		
	\$10.00	One Hacke					
	Reimbursement from		•				
	political contributions intended	Menlo Park	x, CA 94025				
	PURPOSE OF	Category (S	see Categories listed at the top of this s	chedule)	Description	Check if travel outside of Texas. Complete Sched	dule T.
	EXPENDITURE	Advertising	Expense		L	Check if Austin, TX, officeholder living expense	
					Social Media		
	•	Candidate/Office	holder name		Office sought	Office held	
	expenditure to benefit C/OH						
	Date	Payee name					
	09/11/2024	Facebook					
	Amount (\$)	Payee addre	ess; City; Stat	te; Zip C	ode		
	\$30.00	One Hacke	r Way				
	Reimbursement from political contributions intended	Menlo Park	s, CA 94025				
	PURPOSE	Category (s	see Categories listed at the top of this s	chedule)	Description	Check if travel outside of Texas. Complete Sched	dule T.
	OF EXPENDITURE	Advertising	Expense			Check if Austin, TX, officeholder living expense	
					Social media		
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Office	holder name		Office sought	Office held	

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) xpense Event Expense Loan Repayment/Reimbu

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee
Credit Card Bayment

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Gift/Awards/Memorials E Legal Services The Instruction Gu	•		Vages/Contract Labor	Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule G:	2	FILER NAME					3 Filer ID (Ethics Commission Filers)
	Sch: 4/18 Rpt: 21/35		Kennedy, B	rian				00000011
4	Date	5	Payee name					
	09/13/2024		Facebook					
6	Amount (\$)	7	Payee addre	ss; City;	State;	Zip Co	ode	
	\$10.00		One Hacke	r Way				
	Reimbursement from political contributions intended		Menlo Park	, CA 94025				
8	PURPOSE	(a)	Category (S	ee Categories listed at the	e top of this sch	edule)	(b) Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Advertising	Expense			l L	Check if Austin, TX, officeholder living expense
							Social media	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Car	ndidate/Office	nolder name			Office sought	Office held
	Date		Payee name					
	09/14/2024		Facebook					
H	Amount (\$)	┢	Payee addre	ss; City;	State:	Zip Co	ode	
	\$10.00		One Hacke	-	,			
			Ono maono	. Truy				
	Reimbursement from political contributions intended		Menlo Park	, CA 94025				
	PURPOSE		Category (S	ee Categories listed at the	e top of this sch	edule)	Description [Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Advertising	Expense			[Check if Austin, TX, officeholder living expense
							Social Media	
		Car	ndidate/Office	nolder name			Office sought	Office held
	expenditure to benefit C/OH							
H		_						
	Date		Payee name					
	09/19/2024		Facebook					
	Amount (\$)		Payee addre	ss; City;	State;	Zip Co	ode	
	\$11.00		One Hacke	r Way				
	Reimbursement from political contributions intended		Menlo Park	, CA 94025				
	PURPOSE	_	Category (s	ee Categories listed at the	e top of this sch	edule)	Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Advertising	Expense			[Check if Austin, TX, officeholder living expense
							Social Media	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Car	ndidate/Office	nolder name			Office sought	Office held

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains I	Polling Ex Printing E Salaries/V	xpense Nages/Contract Labor		Travel in Dis Travel Out o	
			The Instruction Guide explains I	now to co	omplete this form.			
1	Total pages Schedule G:	2 FILER NAM	E			3	iler ID	(Ethics Commission Filers)
	Sch: 5/18 Rpt: 22/35	Kennedy, E	Brian			(0000001	.1
4	Date	5 Payee name)					
	09/21/2024	Facebook						
6	Amount (\$)	7 Payee addre	ess; City; State;	Zip Co	ode			
	\$13.00	One Hacke		·				
	Reimbursement from							
	political contributions intended	Menlo Park	c, CA 94025					
L					I			
8	PURPOSE OF	1.,	See Categories listed at the top of this scho	edule)	(b) Description	=		outside of Texas. Complete Schedule T. TX, officeholder living expense
	EXPENDITURE	Advertising	Expense		L	Cite	ck ii Austiii,	17, officeriolder living expense
					Social media			
9	Complete ONLY if direct expenditure to benefit	Candidate/Office	holder name		Office sought			Office held
	C/OH							
	Data							
	Date	Payee name						
	09/23/2024	Facebook						
	Amount (\$)	Payee addre	ess; City; State;	Zip Co	ode			
	\$15.00	One Hacke	er Way					
	Reimbursement from							
	political contributions intended	Menlo Park	c, CA 94025					
	PURPOSE	Category (s	See Categories listed at the top of this sche	edule)	Description	Che	eck if travel o	outside of Texas. Complete Schedule T.
	OF	Advertising				Che	eck if Austin,	TX, officeholder living expense
	EXPENDITURE		'		Social media			
	Complete ONLY if direct	Candidate/Office	holder name		Office sought			Office held
	expenditure to benefit							
	C/OH							
	Date	Payee name)					
	09/26/2024	Facebook						
	Amount (\$)	Payee addre	ess; City; State;	Zip Co	ode			
	\$17.00	One Hacke	r Way					
	Reimbursement from		•					
	political contributions intended	Menlo Park	c, CA 94025					
_					Description F	Che	al if traval a	sutside of Toylog Complete Cohodule T
	PURPOSE OF	1	See Categories listed at the top of this scho	eaule)	Description _	_		outside of Texas. Complete Schedule T. TX, officeholder living expense
	EXPENDITURE	Advertising	Expense		Social media			,
					Cociai media			
_	Complete ONLY if direct	Condidate/Off:	holder name		Office accept			Office hold
	Complete ONLY if direct expenditure to benefit	Candidate/Office	noider name		Office sought			Office held
	C/OH							

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 Credit Card Payment	y - Food/Beverage Expense y - Gift/Awards/Memorials Expense al Committee Legal Services	Polling Ex Printing Ex Salaries/W	kpense /ages/Contract Labor	Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
	.,	The Instruction Guide explains h	ow to co	mplete this form.	
1	Total pages Schedule G: Sch: 6/18 Rpt: 23/35	2 FILER NAME Kennedy, Brian			3 Filer ID (Ethics Commission Filers) 00000011
_		-			0000011
4	Date 07/15/2024	5 Payee name Halleluah!BBQ			
6	Amount (\$)	7 Payee address; City; State;	Zip Co	de	
	\$1,850.00	130a N. Cotton St.			
	Reimbursement from political contributions intended	El Paso, TX 79901			
_				(h) December 5	Charle if travel outside of Tayon Complete Cabadula T
8	PURPOSE OF	(a) Category (See Categories listed at the top of this sched	dule)	(b) Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	EXPENDITURE	Event Expense		Kick off Event	
				NICK OII EVEIII	
9	Complete ONLY if direct expenditure to benefit	Candidate/Officeholder name		Office sought	Office held
	С/ОН				
	Date	Payee name			
	09/23/2024	IN*L2			
	Amount (\$)	Payee address; City; State;	Zip Co	de	
	\$2,948.60	18912 North Creek Parkway			
	Reimbursement from	Suite 201			
	political contributions intended	Bothell, WA 98011			
	PURPOSE	Category (See Categories listed at the top of this sched	dulo)	Description	Check if travel outside of Texas. Complete Schedule T.
	OF	Voter Data	uuie)	Description	Check if Austin, TX, officeholder living expense
	EXPENDITURE	Voici Bala		Voter Data	_
	Complete ONLY if direct expenditure to benefit	Candidate/Officeholder name		Office sought	Office held
	C/OH				
	Date	Payee name			
	08/09/2024	INFocus Campaigns			
	Amount (\$)	Payee address; City; State;	Zip Co	de	
	\$2,050.00	700 K St. NW.			
	Reimbursement from	Suite 300			
	political contributions intended	Washington , DC 20001			
	PURPOSE OF	Category (See Categories listed at the top of this sched	dule)	Description	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Polling Expense		L	Check if Austin, TX, officeholder living expense
				Poll	
	Complete ONLY if direct	Candidate/Officeholder name		Office sought	Office held
	expenditure to benefit C/OH			-	

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	payment/Reimbursement erhead/Rental Expense kypense expense Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
L			The Instruction Guide explains h	ow to co	omplete this form.	
1	Total pages Schedule G:	2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Sch: 7/18 Rpt: 24/35		Kennedy, Brian			00000011
4	Date	5	Payee name			
	09/03/2024		INFocus Campaigns			
6	Amount (\$)	7	Payee address; City; State;	Zip Co	ode	
	\$2,050.00		700 K St. NW.			
	Reimbursement from		Suite 300			
	political contributions intended		Washington, DC 20001			
8	PURPOSE	(a)	Category (See Categories listed at the top of this sched	dulo)	(b) Description	Check if travel outside of Texas. Complete Schedule T.
ľ	OF	(a)	Polling Expense	uule)	(b) Description	Check if Austin, TX, officeholder living expense
	EXPENDITURE		Folling Expense		□ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	_
9	Complete ONLY if direct	Car	ndidate/Officeholder name		Office sought	Office held
	expenditure to benefit	Cai	ididate/Officeriolder frame		Office Sought	Office field
	C/OH					
	Date		Payee name			
	07/24/2024		Lawlytics			
	Amount (\$)		Payee address; City; State;	Zip Co	ode	
	\$520.00		13835 North Northsite Blvd.			
	Reimbursement from		Suite 100			
	political contributions intended		Scottsdale, AZ 85260			
H	PURPOSE	H	Category (See Categories listed at the top of this sched	dule)	Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Advertising Expense			Check if Austin, TX, officeholder living expense
	EXPENDITURE		.		Website	
	Complete ONLY if direct expenditure to benefit	Car	ndidate/Officeholder name		Office sought	Office held
	C/OH					
厂	Date	Ē	Payee name			
	09/26/2024		Lawlytics			
Г	Amount (\$)		Payee address; City; State;	Zip Co	ode	
	\$520.00		13835 North Northsite Blvd.			
	Reimbursement from		Suite 100			
	political contributions intended		Scottsdale, AZ 85260			
一	PURPOSE	\vdash	Category (See Categories listed at the top of this sched	dule)	Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Advertising Expense			Check if Austin, TX, officeholder living expense
	EXPENDITURE				Website	
	Complete ONLY if direct expenditure to benefit C/OH	Car	ndidate/Officeholder name		Office sought	Office held

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee	Food/Beverage Expense Gift/Awards/Memorials E Legal Services The Instruction Gui	xpense		kpense /ages/Contract Labor		Travel in Distr Travel Out of OTHER (ente		
1	Total pages Schedule G:	2	FILER NAME					3	Filer ID	(Ethics Commission Filers)	
L	Sch: 8/18 Rpt: 25/35	L	Kennedy, B	rian					00000011	1	
4	Date	5	Payee name								
	07/25/2024		Morales, Ve	eronica Aaron							
6	Amount (\$)	7	Payee addre	ss; City;	State;	Zip Co	de				
	\$970.00		4244 Loma	Taurina Ave.							
	Reimbursement from political contributions intended		El Paso, TX	79934							
8	PURPOSE	(a)	Category (S	ee Categories listed at the	top of this sche	edule)	(b) Description	=		utside of Texas. Complete Schedule	T.
	OF EXPENDITURE		Salaries/Wa	ages/Contract Lat	oor		L	_		TX, officeholder living expense	
							Campaign Coord	dinat	tion		
_	Commiste CNUV''.		dialata (C.C.	- aldau w - · · -			O#			Office heal-l	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Can	didate/Office	nolder name			Office sought			Office held	
	Date		Payee name								
	08/07/2024		Morales, Ve	eronica Aaron							
	Amount (\$)		Payee addre	ss; City;	State;	Zip Co	de				
	\$970.00		4244 Loma	Taurina Ave.							
	Reimbursement from political contributions intended		El Paso, TX	79934							
	PURPOSE		Category (S	ee Categories listed at the	top of this sche	edule)	Description	_		utside of Texas. Complete Schedule	T.
	OF EXPENDITURE		Salaries/Wa	ages/Contract Lat	oor		_ [TX, officeholder living expense	
							Campaign coord	linati	ion		
	Complete ONLY if direct expenditure to benefit	Can	didate/Officel	nolder name			Office sought			Office held	
	C/OH										
F	Date		Payee name								
	08/21/2024	ı	•	eronica Aaron							
\vdash	Amount (\$)	<u> </u>	Payee addre		State:	Zip Co	de				
	\$970.00	l	,	Taurina Ave.	,	., 50					
	Reimbursement from										
	political contributions intended	<u> </u>	El Paso, TX				_				
	PURPOSE OF	l	• • • • • • • • • • • • • • • • • • • •	ee Categories listed at the	•	edule)	Description [=		utside of Texas. Complete Schedule TX, officeholder living expense	T.
	EXPENDITURE		Salaries/Wa	ages/Contract Lat	JUT		Campaign coord	_		, zoonoloo irriig oxpense	
							Jampaign 60010	mal	.011		
	Complete ONLY if direct	L Can	didate/Office	nolder name			Office sought			Office held	
	expenditure to benefit C/OH						2oo oougiit				

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense mmittee Legal Services The Instruction Guide expl	Office O Polling E Printing Salaries	Expense /Wages/Contract Labor	Transport Travel in I Travel Ou	n/Fundraising Expense attion Equipment & Related Expense District it of District enter a category not listed above)
1	Total pages Schedule G:	2	FILER NAME			3 Filer ID	(Ethics Commission Filers)
	Sch: 9/18 Rpt: 26/35		Kennedy, Brian			000000	011
4	Date	5	Payee name				
	09/04/2024		Morales, Veronica Aaron				
6	Amount (\$) \$970.00	7	Payee address; City; S 4244 Loma Taurina Ave.	tate; Zip C	code		
	Reimbursement from political contributions intended		El Paso, TX 79934				
8	PURPOSE OF	(a)	Category (See Categories listed at the top of the	is schedule)	(b) Description	₫	el outside of Texas. Complete Schedule T.
	EXPENDITURE		Salaries/Wages/Contract Labor		L	4	tin, TX, officeholder living expense
					Campaign coordi	nation	
Ļ	Complete ONLY if direct		adidata/Officabaldar.sassa		Office country		Office hold
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Car	ndidate/Officeholder name		Office sought		Office held
	Date		Payee name				
	09/18/2024		Morales, Veronica Aaron				
	Amount (\$)		Payee address; City; S	tate; Zip C	ode		
	\$970.00		4244 Loma Taurina Ave.				
	Reimbursement from political contributions intended		El Paso, TX 79934				
	PURPOSE		Category (See Categories listed at the top of the	is schedule)	Description		el outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Salaries/Wages/Contract Labor		Campaign coordi	_	in, TX, officeholder living expense
	Complete ONLY if direct	Car	ndidate/Officeholder name		Office sought		Office held
	expenditure to benefit C/OH	Cai	ididate/Officeriolder Hame		Office Sought		Office field
	Date		Payee name				
	07/31/2024		Outreach circle				
	Amount (\$)		Payee address; City; S	tate; Zip C	ode		
	\$180.00		444 W. Ocean				
	Reimbursement from political contributions		Suite 800				
	intended		Long, CA 90802				
	PURPOSE		Category (See Categories listed at the top of the	is schedule)	Description	4	el outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Advertising Expense		L L	Check if Aust	tin, TX, officeholder living expense
					Texting		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Car	ndidate/Officeholder name		Office sought		Office held

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Salaries/W	pense ages/Contract Labor	Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule G: Sch: 10/18 Rpt: 27/35	2 FILER NAME Kennedy, Brian		:	3 Filer ID (Ethics Commission Filers) 00000011
4	Date				
4	07/10/2024	5 Payee name Ray, Felix			
6	Amount (\$)	7 Payee address; City;	State; Zip Cod	de	
	\$1,153.00	1103 Cimarron			
	Reimbursement from political contributions intended	El Pass, TX 79915			
8	PURPOSE	(a) Category (See Categories listed at the top	o of this schedule)	(b) Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Advertising Expense			Check if Austin, TX, officeholder living expense
	LXI ENDITORE			Hats and T-shirts	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
	Date	Payee name			
	07/17/2024	Ray, Felix			
	Amount (\$)	Payee address; City;	State; Zip Cod	de	
	\$1,065.65	1103 Cimarron			
	Reimbursement from				
	political contributions intended	El Paso, TX 79915			
	PURPOSE	Category (See Categories listed at the top	o of this schedule)	Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Advertising Expense	,	· E	Check if Austin, TX, officeholder living expense
	EXPENDITURE	.		Hats and T-shirts	
	expenditure to benefit	Candidate/Officeholder name	'	Office sought	Office held
	C/OH				
	Date	Payee name			
	08/09/2024	Ray, Felix			
	Amount (\$)	Payee address; City;	State; Zip Cod	de	
	\$841.00	1103 Cimarron			
	Reimbursement from political contributions intended	El Paso, TX 79915			
	PURPOSE	Category (See Categories listed at the top	o of this schedule)	Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Advertising Expense			Check if Austin, TX, officeholder living expense
	_,, _,,,,,,			Hats and T-shirts	
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica		Expense Travel Out of District s/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 G:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 11/18 Rpt: 28/35	Kennedy, Brian	00000011
4	Date	5 Payee name	
	08/13/2024	Ray, Felix	
6	Amount (\$)	7 Payee address; City; State; Zip (Code
	\$841.17	1103 Cimarron	
	Reimbursement from political contributions intended	El Paso, TX 79915	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	OF EXPENDITURE	Advertising Expense	Check if Austin, TX, officeholder living expense
			Hats & T-shirts
9	expenditure to benefit	Candidate/Officeholder name	Office sought Office held
	C/OH		
	Date	Payee name	
	08/31/2024	Rita's burritos	
	Amount (\$)	Payee address; City; State; Zip (Code
	\$206.54	4907 Crossroads Dr.	
	Reimbursement from political contributions intended	El Paso, TX 79922	
	PURPOSE	Category (See Categories listed at the top of this schedule)	Description
	OF EXPENDITURE	Food/Beverage Expense	Check if Austin, TX, officeholder living expense
			Food for canvassers
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
	0,011	<u> </u>	
	Date	Payee name	
	09/07/2024	Rita's burritos	
	Amount (\$)	Payee address; City; State; Zip (Code
	\$230.62	4907 Crossroads Dr.	
	Reimbursement from political contributions		
	intended	El Paso, TX 79922	
	PURPOSE	Category (See Categories listed at the top of this schedule)	Description Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Food/Beverage Expense	Check if Austin, TX, officeholder living expense
	-		Food for canvassers
	Complete ONLY if direct	Landidate/Officeholder name	Office sought Office held
	expenditure to benefit		
	C/OH		

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.				Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule G:	2 FILER NAMI	E			1	•	mission Filers)	
	Sch: 12/18 Rpt: 29/35	Kennedy, E	Brian				00000011		
4	Date	5 Payee name)						
	07/31/2024	Scale to wi	n						
6	Amount (\$)	7 Payee addre	ess; City; State;	Zip Co	ode				
	\$6,690.90	13742 Har							
		==::=:::	33. 34.						
	Reimbursement from political contributions	C A	04.00700						
	intended	Santa Ana,	CA 92703						
8	PURPOSE OF	(a) Category (s	See Categories listed at the top of this sche	edule)	(b) Description	=	eck if travel outside of Texas.		
	EXPENDITURE	Advertising	Expense		L	Che	eck if Austin, TX, officeholder I	iving expense	
					Texting				
9		Candidate/Office	holder name		Office sought		Office held		
	expenditure to benefit C/OH								
	Date	Payee name	•						
	09/03/2024	Scale to wi	n						
	Amount (\$)	Payee address; City; State; Zip Code							
	\$726.74	726.74 13742 Harper St.							
	Reimbursement from								
	political contributions intended	contributions							
	PURPOSE OF		See Categories listed at the top of this scho	edule)	Description	_	eck if travel outside of Texas. eck if Austin, TX, officeholder I		
EXPENDITURE		Advertising	Expense		L	chean in the			
					Texting				
		<u> </u>							
	Complete ONLY if direct expenditure to benefit	Candidate/Office	holder name		Office sought		Office held		
	C/OH								
	Data	1 5							
	Date	Payee name							
	09/18/2024	Shutterstoo							
	Amount (\$)	Payee addre	• • • • • • • • • • • • • • • • • • • •	Zip Co	ode				
	\$85.53	350 5th Av	e.						
	Reimbursement from political contributions	Floor 21							
	intended	New York, NY 10118							
	PURPOSE	Category (s	See Categories listed at the top of this sche	edule)	Description	Che	eck if travel outside of Texas.	Complete Schedule T.	
	OF	Advertising	Expense			Che	eck if Austin, TX, officeholder I	iving expense	
	EXPENDITURE		,		Picture Licensing	g			
	Complete ONLY if direct	L Candidate/Office	holder name		Office sought		Office held		
	expenditure to benefit				eee eeugin		Cilios field		
L	C/OH								

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By

Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense 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 Credit Card Payment		nmittee Legal Services Salaries A The Instruction Guide explains how to co	Vages/Contract Labor		OTHER (enter a category not listed above)		
_			<u> </u>	<u> </u>	_			
1	Total pages Schedule G:	2	FILER NAME		3	Filer ID (Ethics Commission Filers)		
	Sch: 13/18 Rpt: 30/35		Kennedy, Brian			0000011		
4	Date	5	Payee name					
	09/19/2024		Shutterstock					
6	Amount (\$)	7	Davido address: City: State: 7in Co	nde.				
٠	\$85.53	7 Payee address; City; State; Zip Code 350 5th Ave.						
	ψ03.33							
	Reimbursement from political contributions		Floor 21					
	intended		New York, NY 10118					
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b) Description	c	heck if travel outside of Texas. Complete Schedule T.		
	OF EXPENDITURE Advertising Expense				Check if Austin, TX, officeholder living expense			
	EXPENDITORE			Photo Licensing				
9	Complete ONLY if direct	Car	ndidate/Officeholder name	Office sought		Office held		
	expenditure to benefit			· ·				
	C/OH							
	Date	Π	Payee name					
	07/10/2024		Texas Democratic party					
				ada				
	Amount (\$)		Payee address; City; State; Zip Code					
\$1,552.00 314 Highland Blvd.								
Reimbursement from political contributions								
intended Austin, TX 78752								
	PURPOSE		Category (See Categories listed at the top of this schedule)	Description] c	heck if travel outside of Texas. Complete Schedule T.		
OF EXPENDITURE			Advertising Expense		C	heck if Austin, TX, officeholder living expense		
EXPENDITORE				Research access	;			
	Complete ONLY if direct	Car	ndidate/Officeholder name	Office sought		Office held		
	expenditure to benefit			· ·				
	C/OH							
	Date		Payee name					
	08/16/2024		Uline ship supplies					
	Amount (\$)	┢	Payee address; City; State; Zip Co	nde				
	\$646.10		12575 Drive	Juc				
			12373 Drive					
Reimbursement from political contributions								
	intended		Pleasant Prairie, WI 53158					
	PURPOSE		Category (See Categories listed at the top of this schedule)	Description] c	heck if travel outside of Texas. Complete Schedule T.		
OF EXPENDITURE Advertising Expense				heck if Austin, TX, officeholder living expense				
Signposts								
		Car	ndidate/Officeholder name	Office sought		Office held		
	expenditure to benefit			0				
	C/OH							

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		•	Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense			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 G:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)		
	Sch: 14/18 Rpt: 31/35		Kennedy, Brian				0000011		
4	Date	5	Payee name						
	08/22/2024		Uline ship supplies						
6	Amount (\$)	7	Payee address; City; State;	Zip Co	ode				
	\$1,203.03		12575 Drive						
	Reimbursement from political contributions intended		Pleasant Prairie, WI 53158						
8	PURPOSE	(a)	Category (See Categories listed at the top of this sch	edule)	(b) Description	Cł	neck if travel outside of Texas. Complete Schedule T.		
	OF EXPENDITURE		Advertising Expense			Cł	neck if Austin, TX, officeholder living expense		
					Sign post				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Car	ndidate/Officeholder name		Office sought		Office held		
	Date		Payee name						
	07/20/2024		United Events						
	Amount (\$) Payee address; City; State; Zip Code								
	\$12,180.00		6070 Gateway East						
	Reimbursement from political contributions		Suite 209						
	intended		El Pass, TX 79905						
	PURPOSE		Category (See Categories listed at the top of this sch	edule)	Description	Cł	neck if travel outside of Texas. Complete Schedule T.		
OF EXPENDITURE			Salaries/Wages/Contract Labor			Cł	neck if Austin, TX, officeholder living expense		
Canvassers									
	Operation ONLY if allowed		adi daka (Offica badda a sasa		Office a secondary		Off: - -		
	Complete ONLY if direct expenditure to benefit C/OH	Car	ndidate/Officeholder name		Office sought		Office held		
H	Date		Payee name						
	07/27/2024		United Events						
	Amount (\$)	┢		Zip Co	nde				
	\$1,200.00		6070 Gateway East		-				
·			Suite 209						
Reimbursement from political contributions intended EI Paso, TX 79905									
	PURPOSE	\vdash	Category (See Categories listed at the top of this sch	edule)	Description	Cł	neck if travel outside of Texas. Complete Schedule T.		
	OF EXPENDITURE		Salaries/Wages/Contract Labor			Cł	neck if Austin, TX, officeholder living expense		
					Canvassers				
	Complete ONLY if direct expenditure to benefit C/OH	Car	ndidate/Officeholder name		Office sought		Office held		

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Candidate/Officeholder/Politice Credit Card Payment			·		Vages/Contract Labor		OTHER (enter a category not listed above)		
	·	_	The Instruction Guide explains	how to co	omplete this form.				
1	. •	2	FILER NAME			3	Filer ID (Ethics Commission Filers)		
	Sch: 15/18 Rpt: 32/35		Kennedy, Brian				00000011		
4	Date	5	Payee name						
	08/03/2024		United Events						
6	Amount (\$)	7	Payee address; City; State;	Zip Co	ode			_	
	\$13,244.00		6070 Gateway East						
	Reimbursement from		Suite 209						
	political contributions intended		El Paso, TX 79905						
8	PURPOSE	(a)	Category (See Categories listed at the top of this sch	edule)	(b) Description	7 c	theck if travel outside of Texas. Complete Schedule	Т.	
	OF	``	Salaries/Wages/Contract Labor	,	[Ⅎℴ	check if Austin, TX, officeholder living expense		
	EXPENDITURE				Canvassers				
9	Complete ONLY if direct	Car	ndidate/Officeholder name		Office sought		Office held	_	
	expenditure to benefit C/OH								
	C/OTT					_		_	
	Date		Payee name						
	08/10/2024	24 United Events							
	Amount (\$)		Payee address; City; State;	Zip Co	ode				
	\$13,090.00		6070 Gateway East						
	Reimbursement from political contributions		Suite 209						
	intended		El Paso, TX 79905						
	PURPOSE		Category (See Categories listed at the top of this sch	edule)	Description] c	check if travel outside of Texas. Complete Schedule	T.	
	OF EXPENDITURE		Salaries/Wages/Contract Labor			С	check if Austin, TX, officeholder living expense		
					Canvassers				
	Complete ONLY if direct expenditure to benefit	Car	ndidate/Officeholder name		Office sought		Office held		
	C/OH								
	Date		Davies name			_		=	
	08/17/2024		Payee name United Events						
		┝		Zin C	ado.	_		_	
	Amount (\$) \$15,815.00			Zip Co	oue				
		6070 Gateway East							
	Reimbursement from political contributions	Suite 209							
	intended		El Paso, TX 79905			_		_	
	PURPOSE OF		Category (See Categories listed at the top of this sch	edule)	Description	=	Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expense	Τ.	
	EXPENDITURE		Salaries/Wages/Contract Labor		L	」 └	Freek if Austri, 17, Unicertoider living expense		
					Canvases				
	Complete ONU V if alice	<u>_</u>	adidata (Office legisla e es		Office and it		Office Is also		
	Complete ONLY if direct expenditure to benefit	Car	ndidate/Officeholder name		Office sought		Office held		
	C/OH								

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica		Travel Out of District 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 (Ethics Commission Filers)					
	Sch: 16/18 Rpt: 33/35	Kennedy, Brian	0000011					
4	Date	5 Payee name						
	08/24/2024	United Events						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$15,045.00	6070 Gateway East						
	Reimbursement from	Suite 209						
	political contributions intended	El Paso, TX 79905						
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	Check if travel outside of Texas. Complete Schedule T.					
٠	OF	Salaries/Wages/Contract Labor	Check if Austin, TX, officeholder living expense					
	EXPENDITURE	Canvassers	•					
9	Complete ONLY if direct	L Candidate/Officeholder name Office sought	Office held					
	expenditure to benefit							
	C/OH							
	Date	Payee name						
	09/01/2024	United Events						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$14,985.00	6070 Gateway East						
	Reimbursement from political contributions intended	Suite 209						
		El Paso, TX 79905						
	PURPOSE	Category (See Categories listed at the top of this schedule) Description	Check if travel outside of Texas. Complete Schedule T.					
	OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if Austin, TX, officeholder living expense					
		Canvassers						
		Candidate/Officeholder name Office sought	Office held					
	expenditure to benefit C/OH							
	Date	Davis vers						
	09/12/2024	Payee name United Events						
	Amount (\$) \$16,585.00							
	·	1						
	Reimbursement from political contributions	Suite 209						
	intended	El Paso, TX 79905						
	PURPOSE OF	Category (See Categories listed at the top of this schedule) Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
	EXPENDITURE	Salaries/Wages/Contract Labor	1					
		Canvases						
	Complete ONLV if direct	Candidate/Officeholder name Office sought	Office held					
	expenditure to benefit	Candidate/Officeriolder name Office Sought	Office Held					
	C/OH							

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Con Credit Card Payment		- Gift Committee Leg	od/Beverage Expense //wards/Memorials Expense yal Services the Instruction Guide explains		xpense Nages/Contract Labor	Travel in D Travel Out OTHER (er			
1	Total pages Schedule G:	2 FILER NAME	·			3 Filer ID	(Ethics Commission Filers)		
-	Sch: 17/18 Rpt: 34/35	Kennedy, Brian					11		
4	Date	5 Payee name		<u> </u>					
	09/20/2024	United Events							
6	Amount (\$)	7 Payee address;	City; State;	Zip Co	ode				
	\$17,625.00	6070 Gateway	[,] East						
	Reimbursement from	Suite 209							
	political contributions intended	El Paso, TX 79905							
8	PURPOSE	(a) Category (See C	ategories listed at the top of this sch	edule)	(b) Description	Check if travel	outside of Texas. Complete Schedule T.		
	OF EXPENDITURE	Salaries/Wage	es/Contract Labor		[Check if Austir	n, TX, officeholder living expense		
	_/		Canvassers						
_	Complete ONLY if direct	Candidate/Officehold	dar nama		Office cought		Office held		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Landidate/Officeriol	del name		Office sought		Office field		
	Date	Payee name							
	07/12/2024	Vistago Print							
	Amount (\$)	Payee address; City; State; Zip Code							
\$4,636.86 6706 Lohman Ford Road Reimbursement from political contributions									
Lago Vista, TX 78645									
	PURPOSE OF	Category (See C	ategories listed at the top of this sch	edule)	Description	=	outside of Texas. Complete Schedule T.		
EXPENDITURE		Advertising Ex	pense		L	Check if Austir	n, TX, officeholder living expense		
					Signage				
		Candidate/Officehold	der name		Office sought		Office held		
	expenditure to benefit C/OH								
	Date	Payee name							
	08/29/2024	Vistago Print							
	Amount (\$)	Payee address;	City; State;	Zip Co	ode				
	\$3,911.93	6706 Lohman	Ford Road						
	Reimbursement from political contributions intended	Lago Vista, TX	(78645						
	PURPOSE	Category (See C	ategories listed at the top of this sch	edule)	Description	Check if travel	outside of Texas. Complete Schedule T.		
	OF EXPENDITURE	Printing Expen	ise		[Check if Austir	n, TX, officeholder living expense		
	,,,,,,,,				Print signs				
	Complete ONII V if direct	Candidata/Officehele	Hor namo		Office sought		Office hold		
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officehold	uei IIdille		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 Accounting/Banking Event Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. FILER NAME Total pages Schedule G: Filer ID (Ethics Commission Filers) Sch: 18/18 Rpt: 35/35 Kennedy, Brian 00000011 Date Payee name 09/24/2024 Vistago Print 6 Amount (\$) Payee address; City; State; Zip Code 6706 Lohman Ford Road \$2,969.30 Reimbursement from political contributions intended Lago Vista, TX 78645 (a) Category (See Categories listed at the top of this schedule) 8 **PURPOSE** (b) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense **Printing Expense EXPENDITURE** signs Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH