

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

2 of 20

13 C / OH NAME Kennedy, Brian	14 Filer ID (Ethics Commission Filers) 00000011
--------------------------------------	---

15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.									
<table border="1" style="width:100%"> <tr> <td style="width:25%;">COMMITTEE TYPE</td> <td>COMMITTEE NAME</td> </tr> <tr> <td><input type="checkbox"/> GENERAL</td> <td>COMMITTEE ADDRESS</td> </tr> <tr> <td><input type="checkbox"/> SPECIFIC</td> <td>COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td></td> <td>COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table>	COMMITTEE TYPE	COMMITTEE NAME	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME		COMMITTEE CAMPAIGN TREASURER ADDRESS		
	COMMITTEE TYPE	COMMITTEE NAME								
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS								
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME								
	COMMITTEE CAMPAIGN TREASURER ADDRESS									

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	21,797.96
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	127,737.14
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	6,382.29
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	231,000.00

17 AFFIDAVIT

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

Brian Kennedy

 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal 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 20

18 FILER NAME Kennedy, Brian		19 Filer ID (Ethics Commission Filers) 00000011
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 19,350.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 2,447.96
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 50,000.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 64,826.28
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 62,910.86
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/4 Rpt: 4/20
2 FILER NAME Kennedy, Brian		3 Filer ID (Ethics Commission Filers) 00000011
4 Date 11/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arias, Gilberto <hr/> 6 Contributor address; City; State; Zip Code 4737 Emery Road El Paso, TX 79922	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) Arias International
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bixler-Marquez, Dennis <hr/> Contributor address; City; State; Zip Code 1101 Stockwell El Paso, TX 79902	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carol, Kennedy <hr/> Contributor address; City; State; Zip Code 517 Markgrafs Lake Alcove Woodbury, MN 55129	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chaffin, Randy <hr/> Contributor address; City; State; Zip Code 3749 Jonesboro Rd Hampton, GA 30228	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Safety Director		Employer (See Instructions) Ford
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curlin, Jackson <hr/> Contributor address; City; State; Zip Code 2020 N. Saint Vrian El Paso, TX 79902	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/4 Rpt: 5/20
2 FILER NAME Kennedy, Brian		3 Filer ID (Ethics Commission Filers) 00000011
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dipp, Suzanne <hr/> 6 Contributor address; City; State; Zip Code 515 Rim Road El Paso, TX 79902	7 Amount of Contribution (\$) \$1,500.00
8 Principal occupation / Job title (See Instructions) Self Employed		9 Employer (See Instructions)
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) El Paso Association of Firefighters PAC <hr/> Contributor address; City; State; Zip Code 3112 Forney El Paso, TX 79935	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fidler, William <hr/> Contributor address; City; State; Zip Code 10300 Jollyville Road #113 Austin, TX 10300	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) HEB
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jessen, Jess <hr/> Contributor address; City; State; Zip Code 6112 N.Mesa #312 El Paso, TX 79912	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Self
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Marcia <hr/> Contributor address; City; State; Zip Code 517 Markgrafs Lake Alcove Woodbury, MN 55129	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/4 Rpt: 6/20
2 FILER NAME Kennedy, Brian		3 Filer ID (Ethics Commission Filers) 00000011
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leeser, Oscar <hr/> 6 Contributor address; City; State; Zip Code 8600 Montana El Paso, TX 79925	7 Amount of Contribution (\$) \$10,000.00
8 Principal occupation / Job title (See Instructions) Business Owner		9 Employer (See Instructions) Hyundai of El Paso
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mallett, Veronica <hr/> Contributor address; City; State; Zip Code 3132 Forrest Park Ave Nashville, TN 37215	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) CommonSpirit
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Vanessa <hr/> Contributor address; City; State; Zip Code 5904 Mira Hermosa El Pao, TX 79912	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) War Eagles Air Museum
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Milazzo, Cindy <hr/> Contributor address; City; State; Zip Code 2631 Altura El Paso, TX 79930	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Priddy, Sara <hr/> Contributor address; City; State; Zip Code 1307 N Kansas #2 El Paso, TX 79902	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/4 Rpt: 7/20
2 FILER NAME Kennedy, Brian		3 Filer ID (Ethics Commission Filers) 00000011
4 Date 11/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saucedo, David <hr/> 6 Contributor address; City; State; Zip Code 711 N. Copia El Paso, TX 79903	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Locksmith		9 Employer (See Instructions) The SAUCEDO Corporation
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wedermeyer, Jacob <hr/> Contributor address; City; State; Zip Code 619-B White Cliffs El Paso, TX 79912	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Estrella Del Paso
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wieland, Patrick <hr/> Contributor address; City; State; Zip Code 1000 Singing Hills Drive El Paso, TX 79912	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zampini, Maria <hr/> Contributor address; City; State; Zip Code 6640 Mesa Grande El Paso, TX 79912	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Administration		Employer (See Instructions) UMC

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 8/20	
2 FILER NAME Kennedy, Brian		3 Filer ID (Ethics Commission Filers) 00000011	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 12/03/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnett, Sherman	8 Amount of contribution (\$) \$500.00	9 In-kind contribution description Facebook Boost
	7 Contributor address; City; State; Zip Code 8272 Gtwy Blvd El Paso, TX 79907	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Owner		11 Employer (FOR NON-JUDICIAL) (See instructions) Barnett Harley Davidson	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnett, Sherman	Amount of contribution (\$) \$1,947.96	In-kind contribution description Direct Mail
	Contributor address; City; State; Zip Code 8272 Gtwy Blvd El Paso, TX 79907	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Owner		Employer (FOR NON-JUDICIAL) (See instructions) Barnett Harley Davidson	
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)			

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 9/20
2 FILER NAME Kennedy, Brian		3 Filer ID (Ethics Commission Filers) 00000011
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 11/06/2024	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Brian	9 Loan Amount (\$) \$50,000.00
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code 5015 Montoya El Paso, TX 79922	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions) Attorney		13 Employer (See Instructions) Kennedy Law
14 Description of Collateral <input checked="" type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input checked="" type="checkbox"/>
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor 18 Guarantor address; City; State; Zip Code	19 Amount Guaranteed (\$)
20 Principal occupation		21 Employer (See Instructions)

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
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
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 F1: Sch: 1/3 Rpt: 10/20	2 FILER NAME Kennedy, Brian	3 Filer ID (Ethics Commission Filers) 00000011
4 Date 11/19/2024	5 Payee name El Paso Mail and Print	
6 Amount (\$) \$3,400.00	7 Payee address; City; State; Zip Code 1144 Vista de Oro El Paso, TX 79935	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/14/2024	Payee name El Paso Mail and Print	
Amount (\$) \$5,100.00	Payee address; City; State; Zip Code 1144 Vista de Oro El Paso, TX 79935	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/14/2024	Payee name El Paso Mail and Print	
Amount (\$) \$5,500.00	Payee address; City; State; Zip Code 1144 Vista de Oro El Paso, TX 79935	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
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 F1: Sch: 2/3 Rpt: 11/20	2 FILER NAME Kennedy, Brian	3 Filer ID (Ethics Commission Filers) 00000011
4 Date 11/27/2024	5 Payee name GODIRECT	
6 Amount (\$) \$24,042.83	7 Payee address; City; State; Zip Code 8400 Boeing Dr. El Paso, TX 79925	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Postage
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/20/2024	Payee name GODIRECT	
Amount (\$) \$19,345.84	Payee address; City; State; Zip Code 8400 Boeing Dr. El Paso, TX 79925	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Postage
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/07/2024	Payee name GODIRECT	
Amount (\$) \$2,387.61	Payee address; City; State; Zip Code 8400 Boeing Dr. El Paso, TX 79925	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Postage
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Credit Card Payment | 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 F1: Sch: 3/3 Rpt: 12/20	2 FILER NAME Kennedy, Brian	3 Filer ID (Ethics Commission Filers) 00000011
--	---------------------------------------	--

4 Date 11/05/2024	5 Payee name Halleluah!BBQ
-----------------------------	--------------------------------------

6 Amount (\$) \$800.00	7 Payee address; City; State; Zip Code 130a N. Cotton St. El Paso, TX 79901
----------------------------------	--

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Election Watch
---------------------------------	--	--

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 11/06/2024	Payee name KVIA
--------------------	--------------------

Amount (\$) \$4,250.00	Payee address; City; State; Zip Code 4140 Rio Bravo El Paso, TX 79902
---------------------------	---

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising
-------------------------------	--	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

--	--

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
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 G: Sch: 1/8 Rpt: 13/20	2 FILER NAME Kennedy, Brian	3 Filer ID (Ethics Commission Filers) 00000011
4 Date 11/05/2024	5 Payee name Facebook	
6 Amount (\$) \$30.22 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code One Hacker Way Menlo Park, CA 94025	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Boost
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 12/04/2024	Payee name Facebook	
Amount (\$) \$187.00 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code One Hacker Way Menlo Park, CA 94025	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Boost
	Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 11/23/2024	Payee name Facebook	
Amount (\$) \$63.92 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code One Hacker Way Menlo Park, CA 94025	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Boost
	Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
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 G: Sch: 2/8 Rpt: 14/20	2 FILER NAME Kennedy, Brian	3 Filer ID (Ethics Commission Filers) 00000011
4 Date 11/26/2024	5 Payee name Facebook	
6 Amount (\$) \$85.00 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code One Hacker Way Menlo Park, CA 94025	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense boost
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 11/29/2024	Payee name Facebook	
Amount (\$) \$115.00 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code One Hacker Way Menlo Park, CA 94025	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Boost
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 11/28/2024	Payee name Facebook	
Amount (\$) \$104.00 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code One Hacker Way Menlo Park, CA 94025	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Boost
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
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 G: Sch: 3/8 Rpt: 15/20	2 FILER NAME Kennedy, Brian	3 Filer ID (Ethics Commission Filers) 00000011
4 Date 11/28/2024	5 Payee name Facebook	
6 Amount (\$) \$104.00 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code One Hacker Way Menlo Park, CA 94025	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Boost
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 11/27/2024	Payee name Facebook	
Amount (\$) \$94.00 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code One Hacker Way Menlo Park, CA 94025	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Boost
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 12/01/2024	Payee name Facebook	
Amount (\$) \$149.00 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code One Hacker Way Menlo Park, CA 94025	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Boost
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
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 G: Sch: 4/8 Rpt: 16/20	2 FILER NAME Kennedy, Brian	3 Filer ID (Ethics Commission Filers) 00000011
4 Date 11/25/2024	5 Payee name Facebook	
6 Amount (\$) \$77.00 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code One Hacker Way Menlo Park, CA 94025	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Boost
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 12/01/2024	Payee name Facebook	
Amount (\$) \$154.00 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code One Hacker Way Menlo Park, CA 94025	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Boost
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 11/30/2024	Payee name Facebook	
Amount (\$) \$127.00 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code One Hacker Way Menlo Park, CA 94025	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Boost
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
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 G: Sch: 5/8 Rpt: 17/20	2 FILER NAME Kennedy, Brian	3 Filer ID (Ethics Commission Filers) 00000011
4 Date 12/02/2024	5 Payee name Facebook	
6 Amount (\$) \$170.00 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code One Hacker Way Menlo Park, CA 94025	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Boost
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 12/03/2024	Payee name Facebook	
Amount (\$) \$128.00 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code One Hacker Way Menlo Park, CA 94025	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Boost
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 12/02/2024	Payee name KFOX	
Amount (\$) \$14,747.50 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 200 S Alto Mesa Dr El Paso, TX 79912	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Marketing
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
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 G: Sch: 6/8 Rpt: 18/20	2 FILER NAME Kennedy, Brian	3 Filer ID (Ethics Commission Filers) 00000011
4 Date 12/04/2024	5 Payee name KVIA	
6 Amount (\$) \$17,780.00 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 4140 Rio Bravo El Paso, TX 79902	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense COMMERCIALS
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/05/2024	Payee name Scale to win	
Amount (\$) \$1,744.96 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 13742 Harper St. Santa Ana, CA 92703	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense texting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/16/2024	Payee name Scale to win	
Amount (\$) \$1,200.73 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 13742 Harper St. Santa Ana, CA 92703	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Texting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
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 G: Sch: 7/8 Rpt: 19/20	2 FILER NAME Kennedy, Brian	3 Filer ID (Ethics Commission Filers) 00000011
4 Date 12/03/2024	5 Payee name Scale to win	
6 Amount (\$) \$6,618.90 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 13742 Harper St. Santa Ana, CA 92703	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Texting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/22/2024	Payee name United Events	
Amount (\$) \$9,855.00 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 6070 Gateway East Suite 209 El Paso, TX 79905	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense door hangers
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/29/2024	Payee name United Events	
Amount (\$) \$8,955.00 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 6070 Gateway East Suite 209 El Paso, TX 79905	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense door hangers
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
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 G: Sch: 8/8 Rpt: 20/20	2 FILER NAME Kennedy, Brian	3 Filer ID (Ethics Commission Filers) 00000011
---	---------------------------------------	--

4 Date 11/27/2024	5 Payee name VOTER ACTIVATION NET DC
-----------------------------	--

6 Amount (\$) \$215.00 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1445 NY AVE NORTH WEST SUITE 200 Washington, DC 20005
--	---

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Access to Voter Information
---------------------------------	---	--

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

Date 11/27/2024	Payee name VOTER ACTIVATION NET DC
--------------------	---------------------------------------

Amount (\$) \$205.63 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1445 NY AVE NORTH WEST SUITE 200 Washington, DC 20005
---	--

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Access to Voter Information
-------------------------------	--	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

--	--