

CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

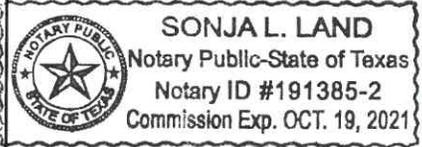
1 Filer ID (Ethics Commission Filers)		2 Total pages filed:		OFFICE USE ONLY					
3 CANDIDATE / OFFICEHOLDER NAME		MS / MRS / MR	FIRST			MI	Date Received RECEIVED NOV 04 2019 CITY OF MESQUITE CITY SECRETARY		
		NICKNAME	LAST	SUFFIX	Date Hand-delivered or Date Postmarked				
4 ORIGINAL REPORT TYPE		<input type="checkbox"/> January 15 <input type="checkbox"/> Runoff <input type="checkbox"/> Other (specify) _____ <input type="checkbox"/> July 15 <input type="checkbox"/> Exceeded \$500 limit _____ <input type="checkbox"/> 30th day before election <input type="checkbox"/> 15th day after treasurer appointment (officeholder only) <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Final report		Receipt #		Amount \$			
5 ORIGINAL PERIOD COVERED		Month	Day	Year	Month	Day	Year	Date Processed	
		09	27	19	THROUGH	10	26	19	Date Imaged

6 EXPLANATION OF CORRECTION
 Last 2 pages were not submitted due to clerical error

7 AFFIDAVIT
 I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check ONLY if applicable:

- Semiannual reports:** I swear, or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.
- Other reports:** I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.



AFFIX NOTARY STAMP / SEAL ABOVE

 Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Kenny Green, this the 4th day of Nov.

20 19, to certify which, witness my hand and seal of office.

Sonja L. Land Sonja L. Land notary
 Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

**Remember To Attach Any Part Of The Campaign Finance Report Form
 Needed To Report And Explain Corrections**

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

**FORM C/OH
COVER SHEET PG 1**

The C/OH Instruction Guide explains how to complete this form. 1 Filer ID 2 Total pages filed:
11

3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Kenneth	MI	OFFICE USE ONLY RECEIVED NOV 04 2019 CITY OF MESQUITE CITY SECRETARY
	NICKNAME	LAST Green	SUFFIX	

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 4530 Gus Thomasson Rd #3119 Mesquite, TX 75150	ZIP CODE	Date Received Date Hand-dumped Receipt # Amount Date Processed Date Imaged
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5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST <i>Mr Kenneth</i>	MI <i>A</i>
	NICKNAME	LAST <i>Kenny Green</i>	SUFFIX <i>Jr</i>

6 CAMPAIGN TREASURER ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <i>4530 Gus Thomasson Rd 3119 Mesquite TX 75150</i>
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7 CAMPAIGN TREASURER PHONE	AREA CODE <i>469</i>	PHONE NUMBER <i>999-5056</i>	EXTENSION
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8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)			
	<input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH-FR)			

9 PERIOD COVERED	Month Day Year 09/27/2019	THROUGH	Month Day Year 10/26/2019
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10 ELECTION	ELECTION DATE Month Day Year 11/05/2019	<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="checkbox"/> Runoff <input type="checkbox"/> Special	<input checked="" type="checkbox"/> Other Local
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11 OFFICE OFFICE HELD (if any)	12 OFFICE SOUGHT (if known) Mesquite City Council District 2
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GO TO PAGE 2

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

**FORM C/OH
COVER SHEET PG 2**

2 of 11

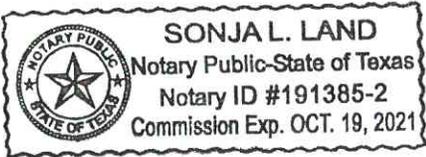
13 C / OH NAME Green, Kenneth	14 Filer ID
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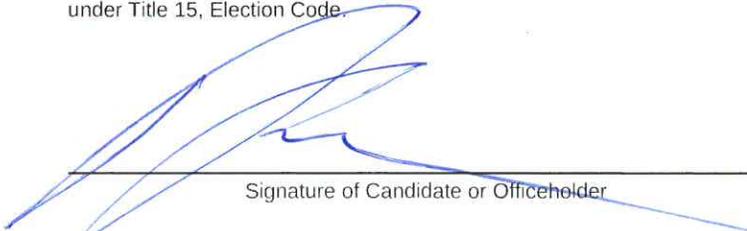
15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.											
<table style="width:100%"> <tr> <td style="width:20%">COMMITTEE TYPE</td> <td style="width:80%">COMMITTEE NAME</td> </tr> <tr> <td><input type="checkbox"/> GENERAL</td> <td rowspan="2">COMMITTEE ADDRESS</td> </tr> <tr> <td><input type="checkbox"/> SPECIFIC</td> </tr> <tr> <td colspan="2">COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td colspan="2">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 POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 2,400.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 877.43
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 1,708.17
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

17 AFFADAVIT

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





 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Kenny Green, this the 4th day of Nov., 20 19, to certify which, witness my hand and seal of office.



 Signature of officer administering

Sonja L. Land

 Printed name of officer administering

notary

 Title of officer administering oath

SUBTOTALS - C/OH

18 FILER NAME Green, Kenneth	19 Filer ID
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20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 2,400.00	
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4. <input type="checkbox"/> SCHEDULE E: LOANS	\$	
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 877.43	
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 type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	
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: 1/2 Rpt: 4/11
2 FILER NAME Green, Kenneth		3 Filer ID
4 Date 10/15/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Apartment Association of Greater Dallas-PAC	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code 5728 LBJ Freeway Suite 100 Dallas, TX 75240	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/14/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Budget Inn of Texas	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code 3911 US 80 Mesquite, TX 75150	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/11/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holmes, Kelly	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 2841 Franklin Dr Apt 1101 Mesquite, TX 75150	
Principal occupation / Job title (See Instructions) Liability Adjuster		Employer (See Instructions) GEICO
Date 10/11/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KJL Hospitality LLC	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code 923 Windbell Mesquite, TX 75149	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/07/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Sabrina	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 3339 Jaimaca Way Mesquite, TX 75150	
Principal occupation / Job title (See Instructions) PE Assistant		Employer (See Instructions) Mesquite ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/2 Rpt: 5/11
2 FILER NAME Green, Kenneth		3 Filer ID
4 Date 10/01/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luna Lodge	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code 3601 US 80 Mesquite, TX 75150		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/01/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruggles-Njo, Lori	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 2812 Waterford Irving, TX 75063		
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self
Date 10/09/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sai JDV Hotels LLC	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 3817 US 80 Mesquite, TX 75150		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/11/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shiv Alpha Strip Corp	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 3517 I-30 Mesquite, TX 75150		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tejas Motel LLC	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 2223 N Clearspring Irving, TX 75063		
Principal occupation / Job title (See Instructions)		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: 1/6 Rpt: 6/11		2 FILER NAME Green, Kenneth		3 Filer ID	
4 Date 10/26/2019		5 Payee name 7-Eleven			
6 Amount (\$) \$9.00		7 Payee address; City; State; Zip Code 4901 Gus Thomasson Rd Mesquite, TX 75150			
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 Ice	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 09/30/2019		Payee name Auto Air Air & Vacuum			
Amount (\$) \$1.75		Payee address; City; State; Zip Code 3201 Hamilton Blvd South Plainview, NY 07080			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Air for inflatable	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 10/01/2019		Payee name Bank of America			
Amount (\$) \$16.00		Payee address; City; State; Zip Code 100 North Tryon Street Charlotte, NC 28255			
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 bank fees	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

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: 2/6 Rpt: 7/11	2 FILER NAME Green, Kenneth	3 Filer ID
4 Date 10/19/2019	5 Payee name Bull Pen Cafe	
6 Amount (\$) \$78.00	7 Payee address; City; State; Zip Code 717 N Bryan Belt Line Rd Mesquite, TX 75149	
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 volunteer dinner, planning meeting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/17/2019	Payee name Cheddars	
Amount (\$) \$130.12	Payee address; City; State; Zip Code 1320 N Peachtree Rd Mesquite, TX 75149	
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 Dinner for Volunteers & Supporters
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/18/2019	Payee name Dick's Sporting Goods	
Amount (\$) \$111.43	Payee address; City; State; Zip Code 2063 N Town East Mall Mesquite, TX 75150	
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 Tent, Table, tent weights for poll location
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: 3/6 Rpt: 8/11		2 FILER NAME Green, Kenneth		3 Filer ID	
4 Date 10/18/2019		5 Payee name Dick's Sporting Goods			
6 Amount (\$) \$64.93		7 Payee address; City; State; Zip Code 2063 N Town East Mall Mesquite, TX 75150			
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 Chairs for polling location	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 10/26/2019		Payee name Dunkin Donuts			
Amount (\$) \$73.60		Payee address; City; State; Zip Code 803 W Centerville Rd Garland, TX 75041			
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 Donuts, coffee for polls	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 09/28/2019		Payee name Green, Kenny			
Amount (\$) \$40.00		Payee address; City; State; Zip Code 4530 Gus Thomasson #3119 Mesquite, TX 75150			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Repay \$40 loan	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

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: 4/6 Rpt: 9/11	2 FILER NAME Green, Kenneth	3 Filer ID
4 Date 10/21/2019	5 Payee name Little Caesar's	
6 Amount (\$) \$19.49	7 Payee address; City; State; Zip Code 4555 Gus Thomasson Rd Mesquite, TX 75150	
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 Poll Volunteer lunch
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/24/2019	Payee name Ollie's	
Amount (\$) \$23.79	Payee address; City; State; Zip Code 2100 N Town E Blvd Mesquite, TX 75150	
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 Goodies for voters at polls
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/18/2019	Payee name Party City	
Amount (\$) \$10.81	Payee address; City; State; Zip Code 1340 N Town E Blvd Mesquite, TX 75150	
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 Tablecloth
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: 5/6 Rpt: 10/11		2 FILER NAME Green, Kenneth		3 Filer ID	
4 Date 10/11/2019		5 Payee name Paypal			
6 Amount (\$) \$3.20		7 Payee address; City; State; Zip Code P.O. Box 45950 Omaha, NE 68145			
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 Service fee	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 10/12/2019		Payee name Porky's Burgers & Wings			
Amount (\$) \$36.47		Payee address; City; State; Zip Code 4612 Gus Thomasson Rd Mesquite, TX 75150			
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 Volunteer lunch	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 10/20/2019		Payee name Sam's Club			
Amount (\$) \$64.76		Payee address; City; State; Zip Code 12000 McCree Rd Dallas, TX 75238			
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 Water, Snacks for poll volunteers and voters	
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
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Gift/Awards/Memorials Expense
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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: 6/6 Rpt: 11/11	2 FILER NAME Green, Kenneth	3 Filer ID
4 Date 10/25/2019	5 Payee name Sam's Club	
6 Amount (\$) \$19.98	7 Payee address; City; State; Zip Code 12000 McCree Rd Dallas, TX 75238	
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 Snacks for volunteers at polls
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 10/25/2019	Payee name Sheila, Lynn	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 3601 Bahamas Mesquite, TX 75150	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Block walking 10hrs @ \$10 p/h
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 10/21/2019	Payee name Walmart	
Amount (\$) \$74.10	Payee address; City; State; Zip Code 555 W Interstate 30 Garland, TX 75043	
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 Cooler, zip ties
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held

