

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 OCT 28 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;		ZIP CODE				
	4530 Gus Thomasson Rd #3119 Mesquite, TX 75150						
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Kenneth	MI A				
	NICKNAME	LAST Green	SUFFIX JR				
6 CAMPAIGN TREASURER ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #;	CITY;	STATE;	ZIP CODE	
	4530 Gus Thomasson Rd		3119	Mesquite	TX	75150	
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
	469	999-5056					
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	THROUGH	Month	Day	Year
		09/27/2019				10/26/2019	
10 ELECTION	ELECTION DATE			ELECTION TYPE			
	Month	Day	Year	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input checked="" type="checkbox"/> Other	
11/05/2019			<input type="checkbox"/> General	<input type="checkbox"/> Special	Local		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT (if known)			
				Mesquite City Council District 2			

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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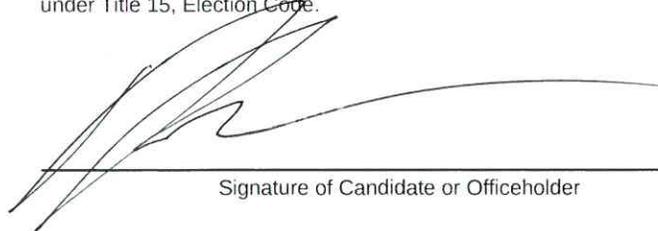
15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.		
	COMMITTEE TYPE	COMMITTEE NAME	
	<input type="checkbox"/> GENERAL		
	<input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS	
		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 27 day of October, 2019, to certify which, witness my hand and seal of office.



 Signature of officer administering

Sabrinakenking

 Printed name of officer administering

Notary Public

 Title of officer administering oath

SUBTOTALS - C/OH

18 FILER NAME Green, Kenneth	19 Filer ID
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20 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
NAME OF SCHEDULE		
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 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 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 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 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 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 Office held
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 Office held
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 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: 2/6 Rpt: 7/11	2 FILER NAME Green, Kenneth	3 Filer ID
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4 Date 10/19/2019	5 Payee name Bull Pen Cafe
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6 Amount (\$) \$78.00	7 Payee address; City; State; Zip Code 717 N Bryan Belt Line Rd Mesquite, TX 75149
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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
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/17/2019	Payee name Cheddars
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Amount (\$) \$130.12	Payee address; City; State; Zip Code 1320 N Peachtree Rd Mesquite, TX 75149
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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
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/18/2019	Payee name Dick's Sporting Goods
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Amount (\$) \$111.43	Payee address; City; State; Zip Code 2063 N Town East Mall Mesquite, TX 75150
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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
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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	Office held
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	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sought	Office held
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	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sought	Office held