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 (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE/ OFFICEHOLDER NAME	Kendrick P. NICKNAME LAST	MI	OFFICE USE ONLY Date Received Office of Legal Services irving ISD
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / NO BOX; APT / SUITE #: 4234 Madera RL; Irvi	ory; state; zip code	APR 0 6 2018 RECEIVED (2)
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (214) 476-2256	EXTENSION	Date Hand-delivered or Date Postmarked
6 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST Arletha NICKNAME LAST Tackson	MI	Receipt # Amount \$ Date Processed Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SI 4234 Madera Rd; ITVI		ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (2/4) 477-1218	EXTENSION	
9 REPORT TYPE	January 15 30th day before e		15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year 18/18	THROUGH \$ 21880 W	Day Year Year All 8
11 ELECTION	ELECTION DATE Month Day Year Primary 5 / 5 / 18 General	ELECTION TYPE Runoff Other Description Special	2.073630
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (11 known Irving ISO Sch Position	ool Board Trustee,
	GO TO	PAGE 2	

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 G/OH NAME Kei	ndrick Per		ler ID (Ethics Commission Filers)	
THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.				
පා ගැන්නුව සිනුගැන්න වෙන්නුව SI	COMMITTEE TYPE COMMITTEE NAME			
Collination	GENERAL	Committe to Elect Kendrick 1	erry	
JF 34 4		COMMITTEE ADDRESS		
4 - CEVISÓBIA	SPECIFIC 4234 Madera Rd; Irving, TX 75038			
		COMMITTEE CAMPAIGN TREASURER NAME		
Additional Pages		Arletha Jackson		
		COMMITTEE CAMPAIGN TREASURER ADDRESS		
		4234 Madera Rd; Irving	75038	
17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED \$ 345			
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 550			
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED 4. TOTAL POLITICAL EXPENDITURES \$ 1,184.56			
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY \$ 895 —			
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 1,184.56			
18 AFFIDAVIT				
CLAUDIA MORRIS True and correct and includes all information required to be reported by me under Title 15, Election Code. Notary ID # 13101926-2 My Commission Expires				
February 27, 2021				
Signature of Candidate or Officeholder				
AFFIX NOTARY STAMP / SEALABOVE				
Sworn to and subscribed before me, by the said, this the, this the				
day of, 20_18, to certify which, witness my hand and seal of office.				
Claudie Morris He Staffing Host.				
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath				

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundralsing Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out Of District
Other (enter a category not listed above)

Contributions/Donations Made By Candidate/Officeholder/Political Co	Gift/Awards/Memorials Expense ommittee Legal Services	Printing Expense Salaries/Wages/Contract Labor	Travel Out Of District Other (enter a category not listed above)
	The Instruction Guide explai	ns how to complete this form.	
1 Total pages Schedule F4: 2	2 FILER NAME KRADIČK PRVY		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZ	ED EXPENDITURES CHARGED		\$
5 Date (6 Payee name Voter Conta	at	
7 Amount (\$)	8 Payee address; City; State;	Zip Code	
68.60	Frisco,	TX	
9 TYPE OF EXPENDITURE	Political	Non-Political	
10 (6	a) Category (See Categories listed at the top of the	nis schedule) (b) Descripti	on
PURPOSE OF EXPENDITURE	Push Card Printley		if travel outside of Texas, Complete Schedule T. If Austin, TX, officeholder living expense
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 3/28/18	Payee name Edwards & Patt	usor Sighs	
Amount (\$)	Payee address; City; State;		
963.46	Reltline; Irvi	ing TX	
TYPE OF EXPENDITURE	Political	Non-Political	
PURPOSE	Category (See Categories listed at the top of t		Ion If travel outside of Texas. Complete Schedule T.
OF EXPENDITURE	signs	Check	If Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
· · · · · · · · · · · · · · · · · · ·			
		·	
	ATTACH ADDITIONAL COPIES	OF THIS SCHEDULE AS N	EEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

Candidate/Officeholder/Politic	al Committee Legal Services Salaries/Wages/d The Instruction Guida explains how to comple		
1 Total pages Schedule F4: 2of 2	2 FILER NAME Kendlick	3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEM	IIZED EXPENDITURES CHARGED TO A CREDI	T CARD \$ 1,134.56	
5 Date 3/16/18	6 Payee name Fiver		
7 Amount (\$)	8 Payee address; City; State; Zip Code		
44.50	online		
9 TYPE OF EXPENDITURE	Political Non-Political		
10	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	C: Pactor	Check if travel outside of Texas, Complete Schedule T.	
EXPENDITURE	Sign Design	Check If Austin, TX, afficeholder living expense	
11 Complete ONLY if direct expenditure to benefit C/O	OH CONTRACTOR OF THE CONTRACTO	sought Office held D School Board, Dist 4	
Date 3/23/18	Payee name Fiver		
Amount (\$)	Payee address; City; State; Zip Code	The state of the s	
38-	online.		
TYPE OF EXPENDITURE	Political Non-Politica		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	a la lacti	Check if travel outside of Texas. Complete Schedule T.	
OF EXPENDITURE	Push Card Design	Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		sought Office held	
	ATTACH ADDITIONAL COPIES OF THIS SCHE	EDIN E AS NEEDED	

POLITICAL EXPENDITURES MADE 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

Event Expense Fees Food/Beverage Expense Gitt/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Travel Ir Travel C abor Other (e

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 how to complete this form.			
1 Total pages Schedule G:	2 FILER NAME Kendrick Perry 5 Pavee name	3 Filer ID (Ethics Commission Filers)		
4 Date				
3/24/18	Committe to elect Kend	rick Pery		
6 Amount (\$)	7 Payee address; City; State; Zip Code	,		
Reimbursement from political contributions intended	4234 Madera; Irving 75038			
8	(a) Category (See Categories listed at the top of this schedule) (b)	Description		
PURPOSE OF EXPENDITURE	Bank Acit Opening	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/0	011	ffice sought Office held		
expenditure to some and	Kendrick Perry Fruit	y ISD SB, Position 4		
Date	Payes name /			
3/25	Voter Contact			
Amount (\$)	Payee address; City; State; Zip Code			
\$20				
Reimbursement from political contributions intended	Frisco, TX			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Push Card Printing (additey)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/		ffice sought Office held		
Date	Payee name			
Amount (\$)	Payee address; City; State; Zip Code			
Reimbursement from political contributions intended				
PURPOSE	Category (See Categories listed at the top of this schedule) (b)	Description		
OF EXPENDITURE		Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/		ffice sought Office held		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1

	the first transition of the second		_
The	Instruction Guide explains how to complete this form		1 Total pages Schedule A1:
2 FILER NAME	Kendrick Perry		3 Filer ID (Ethics Commission Filers)
4 Date 3/29/18	5 Full name of contributor ut-of-state PAC (ID#_ Marvin & Bobbie Randle	p Code	7 Amount of contribution (\$) 400
B Principal occu	pation / Job title (See Instructions) 9	Employer (See Instruction	nns)
Date	Full name of contributor out-of-state PAC (ID#:_		Amount of contribution (\$)
3/29/18	Patt Necessary Contributor address; City; State; Zi	p Code	150
15.2	1518 Union Bower; Fring, TX		
Principal occup		Employer (See Instruction	ns)
7/29/18	Full name of contributor Cash Contributions Contributor address; Clty; State; Zig	(unitemized)	Amount of contribution (\$)
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ns)
Date	Full name of contributor out-of-state PAC (ID#:	o Code	Amount of contribution (\$)
Principal occup	nation / Job title (See Instructions)	Employer (See Instruction	ns)
	The state of the s		
-	ATTACH ADDITIONAL CODIES OF THE	S SCHEDI II E AS NES	DED

if contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

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

19 FILER NAME 20 Filer ID (Et	thics Commission Filers)
Kendrick Penry	
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	s 895-
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. SCHEDULE E: LOANS	\$
5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. SCHEDULE F3; PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTION	ıs \$
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD Lan (CO/H p. 2	1,184.56
9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS LOAN (10)	Hp.2) \$ \$570-
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF	
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	s