#### FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00087906 20 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** Mrs. Kenna M. NAME Date Received **ELECTRONICALLY FILED** 02/26/2024 NICKNAME LAST **SUFFIX** Seiler CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** 7 Lace Point MAILING Amount Receipt # **ADDRESS** Change of Address The Woodlands, TX 77382 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mrs. Alison NAME NICKNAME LAST **SUFFIX** Kerbow STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE **CAMPAIGN** APT / SUITE #; CITY; STATE; **TREASURER** 2700 Research Forest Drive **ADDRESS** Suite 100 (Residence or Business) The Woodlands, TX 77381 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (281) 419-7770 **PHONE** REPORT TYPE 30th day before election 15th day after campaign treasurer January 15 Runoff appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) reporting limit PERIOD Month Month Year Day Year Day **COVERED THROUGH** 01/26/2024 02/24/2024 10 ELECTION **ELECTION DATE ELECTION TYPE** Day Month Year χ Primary Runoff Other 03/05/2024 General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE

**GO TO PAGE 2** 

Court Of Appeals, Justice Place 4 District 9

# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

# FORM JC/OH COVER SHEET PG 2

2 of 20

13 C / OH NAME	Seiler, Kenna M. (Mrs	i.)	<b>14</b> Filer ID 00087906	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	olitical contributions accepted or politi These expenditures may have been n officeholders are required to report th	nade without the candidate's or offic	eholder's knowledge or
X Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	X GENERAL	Republican Voters of Texas PAC		
		COMMITTEE ADDRESS		
	SPECIFIC	30310 Charlie Lane		
		Magnolia, TX 77355		
		COMMITTEE CAMPAIGN TREASUR	RER NAME	
		Stuckey, Linda		
		COMMITTEE CAMPAIGN TREASUR	RER ADDRESS	
		30310 Charlie Lane		
		Magnolia, TX 77355		
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS(C ES OF LOANS, OR CONTRIBUTIONS		\$ 0.00
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEE	ES OF LOANS)	<b>\$</b> 17,704.79
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLIT	CAL EXPENDITURES		<b>\$</b> 154,949.74
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED A RIOD	AS OF THE LAST DAY OF THE	<b>\$</b> 13,663.63
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING TING PERIOD	LOANS AS OF THE LAST DAY	<b>\$</b> 114,556.56
<b>17</b> AFFIDAVIT			under penalty of perjury, that the ac nd includes all information required ction Code.	
			Mrs. Kenna M. Seiler	
			Signature of Candidate or Officeho	lder
AFFIX NO	TARY STAMP / SEAL ABO	DVE		
Sworn to and subs	cribed before me, by the s	aid	, this the	day
		rtify which, witness my hand and seal		
Signature of office	cer administering oath	Printed name of officer administe	ering oath Title of office	er administering oath

# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT SUPPORT & TOTALS

# FORM JC/OH ADDENDUM

Page 3 of 20

				1 490 0 01 20		
C / OH NAME	Seiler, Kenna M. (Mrs	i.)	Filer ID 00087906	(Ethics Commission Filers)		
17 NOTICE FROM POLITICAL COMMITTEE(S)	expenditures may have b	If political expenditures by political committees to s been made without the candidate's or officeholder's d to report this information only if they receive notic	knowledge or co	onsent. Candidates and		
( )	COMMITTEE TYPE COMMITTEE NAME					
	X GENERAL	Texas Alliance for Life PAC				
	SENERAL	COMMITTEE ADDRESS				
	SPECIFIC	8000 Centre Park Drive				
	SFECIFIC	Suite 380				
		Austin, TX 78754				
		COMMITTEE CAMPAIGN TREASURER NAME				
		Shaw, James				
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS			
		4505 Corazon Cv	33			
		4000 00142011 00				
		Round Rock, TX 78681				

### **SUBTOTALS - JC/OH**

### FORM JC/OH **COVER SHEET PG 3**

				4 of 20
<b>18</b> FILER NAME Seiler, Kenna N	(Ethics Commiss	ion Filers)		
20 SCHEDULE SUE NAME OF SCHE			SUBTOTAL	AMOUNT
1. X SCH	HEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	16,550.00
2. X SCH	HEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	1,154.79
3. SCH	HEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	
4. X SCH	HEDULE E(J): LOANS (JUDICIAL)		\$	114,556.56
5. X SCH	HEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$	136,036.02
6. X SCH	HEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	16,319.50
7. SCH	HEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$	
8. X SCH	HEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	1,874.22
9. X SCH	HEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	720.00
10. SCH	HEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (	OF C/OH	\$	
11. SCH	HEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
	HEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F FILER	RETURNED	\$	
			•	

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A(J)1: Sch: 1/5 Rpt: 5/20
2	FILER NAME Seiler, Kenn	a M. (Mrs.)			3	Filer ID (Ethics Commission Filers) 00087906
4	02/15/2024 Allison, Steven (Mr.)  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$100.00		
		Magnolia, TX 77354				
8		Principal Occupation		9 Contributor's Job Title		
	retired			retired		
10	Contributor's e	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
12		s a child, law firm of parent(s) (if	anvi			
	- ii donandator ii	o a orma, law iiiii or paroni(o) (ii	u.,,,			
	Date	Full name of contributor	out-of-state PAC (ID#:	)	T	Amount of Contribution (\$)
	02/23/2024	Barrow, Hunter  Contributor address; City; S	<u> </u>			\$500.00
		Houston, TX 77056				
	Contributor's I	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Attorney			Shareholder		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Andrews My	ers, P.C.				
	If contributor is	s a child, law firm of parent(s) (if	any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:	)	T	Amount of Contribution (\$)
	02/05/2024	Bass, Diane (Mrs.)	_			\$200.00
		Contributor address; City; §	State; Zip Code			
		Conroe, TX 77384				
	Contributor's F	Principal Occupation		Contributor's Job Title	-	
	retired			retired		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	retired					
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	e Instruction Guide explains how to complete this form.			1	Total pages Schedule A(J)1: Sch: 2/5 Rpt: 6/20
2	FILER NAME Seiler, Kenn	a M. (Mrs.)			3	Filer ID (Ethics Commission Filers) 00087906
4	01/30/2024 Briggs, Beverly (Mrs.)  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$50.00		
		The Woodlands, TX 773	81			
8		Principal Occupation		9 Contributor's Job Title		
	retired			retired		
10	Contributor's e	employer/law firm		11 Law firm of contributor's sp	pous	e (if any)
12		s a child, law firm of parent(s) (if	anv)			
			,,			
F	Date	Full name of contributor	out-of-state PAC (ID#:	)	Τ	Amount of Contribution (\$)
	02/06/2024	Butaud, Casey (Mr.)  Contributor address; City;	<u> </u>			\$1,000.00
		Montgomery, TX 77316				
		Principal Occupation		Contributor's Job Title		
	real estate			owner		Ct and
	self employe	employer/law firm		Law firm of contributor's sp	pous	e (II any)
_		s a child, law firm of parent(s) (if	· anv)			
	ii contributor i	o a orma, taw iiiii or pareria(o) (ii	any)			
H	Date	Full name of contributor	out-of-state PAC (ID#:	)	T	Amount of Contribution (\$)
	02/10/2024	Byrd, Betty (Ms.)				\$50.00
		Contributor address; City;	State; Zip Code			
		The Woodlands, TX 773	81			
Г	Contributor's F	rincipal Occupation		Contributor's Job Title	<u> </u>	
	retired			retired		
		employer/law firm		Law firm of contributor's sp	pous	e (if any)
	retired					
	If contributor is	s a child, law firm of parent(s) (if	any)			
L						

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDU	LE A(J)1	
	The Instru	he Instruction Guide explains how to complete this form.				Total pages Schedule Sch: 3/5 Rpt: 7/20	A(J)1:	
2	FILER NAME				3	Filer ID (Ethics Com	mission Filers)	
	Seiler, Kenn	a M. (Mrs.)				00087906		
4	Date 02/05/2024    Solution		7	Amount of Contributio	n (\$) \$100	.00		
		The Woodlands, TX 77:	380					
8	Contributor's	Principal Occupation		9 Contributor's Job Title				
	retired			retired				
10	Contributor's cretired	employer/law firm		11 Law firm of contributor's s	spous	se (if any)		
12		s a child, law firm of parent(s) (	if any)					
-	Date	Full name of contributor	out-of-state PAC (ID#:	)	Т	Amount of Contributio	n (\$)	_
	01/29/2024	Knight, Kevin (Mr.)	out or state 1740 (IBM.				\$1,000	.00
		Contributor address; City;	State: 7in Code				7-,777	
		Contributor address, City,	State, Zip Code					
		Houston, TX 77057						
		Principal Occupation		Contributor's Job Title				
	Attorney			Attorney				
		employer/law firm		Law firm of contributor's s	spous	se (if any)		
	Kevin R. Kn							
	If contributor i	s a child, law firm of parent(s) (	if any)					
-	Date	Full name of contributor	out-of-state PAC (ID#:	)	T	Amount of Contributio	n (\$)	_
	02/09/2024	Kulis, Merrilyn (Ms.)	out or outs 1710 (1577)				\$2,500	.00
		Contributor address; City;	State: Zin Code					
		Contributor address, Only,	otato, zip oodo					
		The Woodlands, TX 773	381					
	Contributor's	Principal Occupation		Contributor's Job Title				
	retired	Throipar Goodpation		retired				
		employer/law firm		Law firm of contributor's s	ะทดแร	se (if any)		
	retired	employer/law mm		Edw IIIII of contributor 3 3	pous	se (ii uiiy)		
		s a child, law firm of parent(s) (	if any)					
	ii continuator i	o a crima, law initi or parcria(o) (	ii airy)					
_								

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 4/5 Rpt: 8/20
2	FILER NAME Seiler, Kenn	a M. (Mrs.)			3	Filer ID (Ethics Commission Filers) 00087906
4	Date 01/28/2024	Full name of contributor     Patel, Mahesh (Mr.)     Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$1,000.00
		Spring, TX 77379				
8		Principal Occupation		9 Contributor's Job Title		
	Hotelier			owner		
10		employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
12		nagement Company s a child, law firm of parent(s) (if	i anu)			
12	i ii contributor ii	s a crilid, law liffil of parefil(s) (ii	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	02/05/2024	Scott, Patrick (Mr.)  Contributor address; City;	State; Zip Code			\$2,500.00
		Conroe, TX 77301				
	Contributor's F	Principal Occupation		Contributor's Job Title		
	atorney			attorney		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Scott Law Fi		: \			
	If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)	T	Amount of Contribution (\$)
	02/05/2024	Shipp, Hamilton (Mr.)				\$50.00
		Contributor address; City; S  The Woodlands, TX 773				
	Contributor's I	Principal Occupation		Contributor's Job Title	_	
	retired			retired		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	retired					
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	TARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	action Guide explains how to complete this	form.	1 Total pages Schedule A(J)1: Sch: 5/5 Rpt: 9/20
2	FILER NAME	a M. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087906
4	Date 02/12/2024	Full name of contributor		7 Amount of Contribution (\$) \$5,000.00
		Spring, TX 77382		
8	Contributor's	Principal Occupation	9 Contributor's Job Title	•
	owner		owner	
10	Contributor's Viking Hiline	employer/law firm	11 Law firm of contributor's s	pouse (if any)
12		is a child, law firm of parent(s) (if any)		
	Date	Full name of contributor  out-of-state PAC (ID#	·· )	Amount of Contribution (\$)
	02/23/2024	Vinson & Elkins Texas Political Action Commit		\$2,500.00
		Contributor address; City; State; Zip Code  Houston, TX 77002		
	Contributor's	Principal Occupation	Contributor's Job Title	1
	Contributor's	employer/law firm	Law firm of contributor's s	nouse (if any)
		- F- <b>3</b>		, ( ),
	If contributor i	is a child, law firm of parent(s) (if any)		

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

### SCHEDULE A2

	The Instru	ection Guide explains how to complete this f	orm	1 Total pages Schedule A2:		
	The Instruction Guide explains how to complete this form.			Sch: 1/1 Rpt: 10/20		
2	FILER NAME			3 Filer ID (Ethics Commission Filers)		
	Seiler, Kenr	na M. (Mrs.)		00087906		
4	TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$		
5	5 Date 6 Full name of contributor out-of-state PAC (ID#: 8		8 Amount of 9 In-kind contribution			
	01/29/2024	Maggio, Marie (Ms.)		contribution (\$) description \$310.37 food for reception		
		7 Contributor address; City; State; Zip Code		I		
				į		
		Beaumont, TX 77706				
10	Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	<ul> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>JUDICIAL) (See instructions)</li> </ul>		
		,		,		
12	Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)		
	retired		retired			
		employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)		
	retired					
16	If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of In-kind contribution contribution (\$) description		
	02/05/2024	Maggio, Pearl (Ms.)		\$422.21 food and beverages for		
		Contributor address; City; State; Zip Code		reception		
				<u> </u>		
		The Woodlands, TX 77384		Check if travel outside of Texas. Complete Schedule T.		
	Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See instructions)		
		principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)		
	retired		retired			
		employer/law firm (FOR JUDICIAL)	Law firm of contributor's spouse (if any) (FOR JUDICIAL)			
	retired	is a shild law firm of margarite) (if any) (FOR HIDICIAL)				
	ii contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
$\vdash$	Dete	Full name of contributor.		Amount of Indian continues		
	Date 02/05/2024	Full name of contributor out-of-state PAC (ID#: Melancon, Alice (Mrs.)	)	Amount of In-kind contribution contribution (\$) description		
	02/00/2024	Contributor address; City; State; Zip Code		\$422.21 food and drink for event		
		Continuator address, City, State, 219 Code		į		
				į į		
		Conroe, TX 77385		Check if travel outside of Texas. Complete Schedule T.		
	Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See instructions)		
	Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)		
	retired retired					
	Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)		
	retired					
	If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
1						

	LOANS (J	UDICIAL)			SCHEDULE <b>E(J)</b>
	The Instruction	on Guide explains how to complete this f	orm.	1	ges Schedule E(J): 2 Rpt: 11/20
2	FILER NAME Seiler, Kenna M	. (Mrs.)		3 Filer ID 000879	(Ethics Commission Filers) 06
4	TOTAL OF UN	IITEMIZED LOANS			\$
5	Date of loan 02/23/2024	7 Name of lender Out-of-state PA	C (ID#:	)	9 Loan Amount (\$) \$22,226.56
6	Is lender a financial institution?	8 Lender address; City; State;	Zip Code		10 Interest Rate 0 11 Maturity Date
		The Woodlands, TX 77382			04/23/2024
12	Lender's Principal	Occupation	13 Lender's Job Title		
	Attorney		Attorney		
14	Lender's Employe		15 Law Firm of lender's spous	se (if any)	
	Seiler Rapp & G		Seiler Rapp & Guerra		
16	If lender is child, la	w firm of parent(s) (if any)			
17	Description of Coll  X None	ateral	18 Check if personal funds were deposited into political account  (See Instructions)		
19	GUARANTOR INFORMATION	20 Name of guarantor			22 Amount Guaranteed (\$)
	X not applicable	21 Guarantor address; City; State;	Zip Code		
23	Guarantor's Princi	pai Occupation	24 Guarantor's Job Title		
25	Guarantor's Emplo	oyer/Law Firm	26 Law Firm of guarantor's sp	ouse (if any)	
27	If guarantor is child	d, law firm of parent(s) (if any)			

	LOANS (J	UDICIAL)			SCHEDULE E(J)
	The Instruction	on Guide explains how to complete this	form.	1	ges Schedule E(J): 2 Rpt: 12/20
2	FILER NAME Seiler, Kenna M	. (Mrs.)		3 Filer ID 000879	(Ethics Commission Filers) 06
4	TOTAL OF UN	IITEMIZED LOANS		1	\$
5	Date of loan 02/13/2024	7 Name of lender Out-of-state PA	AC (ID#:		9 Loan Amount (\$) \$92,330.00
6	Is lender a financial institution?	8 Lender address; City; State;	Zip Code		10 Interest Rate 11 Maturity Date
		The Woodlands, TX 77382			04/13/2024
12	Lender's Principal	Occupation	13 Lender's Job Title		
	Attorney		Attorney		
14	Lender's Employe		15 Law Firm of lender's spous	se (if any)	
	Seiler Rapp & G		Seiler Rapp & Guerra		
16	6 If lender is child, la	aw firm of parent(s) (if any)			
17	Description of Coll  X None	ateral	18 Check if personal funds we	ere deposited	into political account (See Instructions)
19	GUARANTOR INFORMATION	20 Name of guarantor			22 Amount Guaranteed (\$)
23	X not applicable  Guarantor's Princi	21 Guarantor address; City; State; pal Occupation	Zip Code  24 Guarantor's Job Title		
25	Guarantor's Emplo	oyer/Law Firm	26 Law Firm of guarantor's sp	oouse (if any)	
27	If guarantor is child	d, law firm of parent(s) (if any)	•		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment	Committee 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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 1/4 Rpt: 13/20	Seiler, Kenna M. (Mrs.) 00087906
4	Date	5 Payee name
	01/28/2024	Anedot, Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$40.30	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		transaction fee
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experiantare to benefit eror	
	Date	Payee name
	01/30/2024	Anedot, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$2.30	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		transaction fee
	Complete ONLY if direct	Constitute / Office helder no year.
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
	Date	Payee name
	02/05/2024	Anedot, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.30	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		transaction fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

### SCHEDULE F1

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarice Magnet/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·						
	Sch: 2/4 Rpt: 14/20	Seiler, Kenna M. (Mrs.)						
4	Date	5 Payee name						
	02/06/2024	Anedot, Inc.						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$40.30	1340 Poydras Street						
		Suite 1770						
		New Orleans, LA 70112						
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.						
	LAI LIIDITORE	Check if Austin, TX, officeholder living expense						
		transaction fee						
_	Complete ONL V if direct	Candidate/Officeholder name Office sought Office held						
9	Complete ONLY if direct expenditure to benefit C/OH							
_	Date	Power name						
	02/09/2024	Payee name Anedot, Inc.						
Amount (\$)		Payee address; City; State; Zip Code						
\$100.30		1340 Poydras Street						
		Suite 1770						
		New Orleans, LA 70112						
PURPOSE OF		(a) Category (See Categories listed at the top of this schedule)						
EXPENDITURE		Accounting/Banking Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense						
		transaction fee						
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/O	н -						
H	Date	Payee name						
	02/12/2024	Anedot, Inc.						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$200.30	1340 Poydras Street						
		Suite 1770						
		New Orleans, LA 70112						
	PURPOSE							
	OF	(a) Category (See Categories listed at the top of this schedule)  Accounting/Banking  (b) Description  Check if travel outside of Texas. Complete Schedule T.						
	EXPENDITURE	Check if Austin, TX, officeholder living expense						
		transaction fee						
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/O	4						

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

Advertising Expense Event 8
Accounting/Banking Fees
Consulting Expense Food/B
Contributions/ Donations Made By Candidate/Officeholder/Political Committee Legal \$

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 3/4 Rpt: 15/20	Seiler, Kenna M. (Mrs.) 00087906
4	Date	5 Payee name
	02/15/2024	Anedot, Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$4.30	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		transaction fee
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/23/2024	Anedot, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$20.30	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	-	Check if Austin, TX, officeholder living expense transaction fee
		transaction rec
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/08/2024	Neumann and Company
	Amount (\$)	Payee address; City; State; Zip Code
	\$20,971.06	5417 Pine Street
		Bellaire, TX 77401
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Print services, design services, mail services and
		postage
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·

### POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense

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

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

	Candidate/Officeholder/Politica Credit Card Payment			Legal Services  The Instruction Gu	Sal		s/Contract Labor		OTHER (enter a	a category not listed above)
<u> </u>	T-4-1	_			onplanto now	USpi		1_	Ell ID	(Fibine Committee Files)
1	Total pages Schedule F1:	ı						3	Filer ID	(Ethics Commission Filers)
	Sch: 4/4 Rpt: 16/20		Seiler, Kenr	a M. (Mrs.)					00087906	
4	Date	5	Payee name							
	02/20/2024			nd Company						
6	Amount (\$)	7	Payee addres	ss; City;	State; Zi	n Code				
ľ		ı	5417 Pine S		State, Zi	p Couc				
	\$22,226.56		341 <i>i</i> Fille 3	oueet						
			Bellaire, TX	77401						
8	PURPOSE	(a)	Category (Se	e Categories listed at th	ne top of this schedule	(b)	Description			
	OF		Advertising					outs	ide of Texas. Com	plete Schedule T.
	EXPENDITURE		Ţ.	•			Check if Austin	n, TX	, officeholder living	g expense
							printing and p	pos	tage	
9	Complete ONLY if direct		Candidate/Offic	ceholder name	Office	e sought			Office he	eld
	expenditure to benefit C/O	Н								
_	Date	Г	Payee name							
	02/13/2024	ı		odio Convicos Ir	10					
		╙		edia Services, Ir						
	Amount (\$)	ı	Payee addres		State; Zi	p Code				
	\$92,330.00		4601 North	Fairfax Drive						
			Suite 730							
			Arlington, V	A 22203						
	PURPOSE	(a)	Category (so	e Categories listed at the	no ton of this schodulo	(b)	Description			
	OF		Advertising		ie top of this schedule	'  ` ´	:	outs	ide of Texas. Com	plete Schedule T.
	EXPENDITURE		, ia. c. i.eg				Check if Austin	n, TX	, officeholder living	g expense
							media and pr	rod	uction	
	Complete ONLY if direct		Candidate/Offic	ceholder name	Office	e sought			Office he	eld
	expenditure to benefit C/O	Н								
	ms provided by Tevas E	tla i a	- 0		4 -!4-4-	4				Version V3 5 1 9000c47

#### UNPAID INCURRED OBLIGATIONS SCHEDULE F2 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 Total pages Schedule F2: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 1/1 Rpt: 17/20 Seiler, Kenna M. (Mrs.) 00087906 \$ TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS 5 Date Payee name 02/24/2024 Farrell Gjesdal Strategy Group Amount (\$) Payee address; City; State; Zip Code \$16,319.50 4040 Highway 6 Suite 200 College Station, TX 77845 TYPE OF Political Non-Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Advertising Expense Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign Consulting, texting, meta ad buy, OTTA video placement Office sought 11 Complete ONLY if direct Candidate/Officeholder name Office held expenditure to benefit C/OH

### **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 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 F4:	2 FILER NAME			3 Filer ID (E	thics Commiss	sion Filers)
Sch: 1/1 Rpt: 18/20	Seiler, Kenna M. (M	۸rs.)		00087906		
4 CREDIT CARD ISSUER		ncial institution	5 TOTAL OF UNITEMIZ EXPENDITURES CHARGED TO A CRI CARD	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card I	ssuer Paid		
	\$1,726.22	02/15/2024				
7 PAYEE	(a) Payee name  Rush Order Tees		(b) Payee address; 2727 Commerce Way	City,	State,	Zip Code
			Philadelphia, PA 191	54		
8 PURPOSE OF	(a) Category (See Categories listed at the top	of this cohodula)	(b) Description			
EXPENDITURE	Advertising Expense	of this schedule)	tee shirts			
X Political						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Aust	tin, TX, officeholder living	expense	
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card I	ssuer Paid		
	\$48.00	01/28/2024				
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
Lake Conroe Area Republican		P.O. Box 737				
			Montgomery, TX 773	56		
PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of the		of this schedule)	(b) Description meal			
X Political	Event Expense					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Aust	tin, TX, officeholder living	expense	
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged \$100.00	(b) Date of Charge 02/09/2024	(c) Date(s) Credit Card I	ssuer Paid		
PAYEE	(a) Payee name  Conroe/Lake Conro	L De Chamber of	(b) Payee address; P.O. Box 2347  Conroe, TX 77305	City,	State,	Zip Code
PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Event Expense	of this schedule)	(b) Description Go Texan parade			
Non-Political	Check if Aust	tin, TX, officeholder living	expense			
Complete ONLY if direct expenditure to benefit C/OH	e sought	Office held				

### POLITICAL EXPENDITURES FROM PERSONAL FUNDS

### SCHEDULE G

### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memo Legal Services The Instruction	•		expense Wages/Contract Labor  complete this form.	Travel Out of District OTHER (enter a category	not listed above)
1	Total pages Schedule G:	2 FILER	NAME				3 Filer ID (Ethics C	ommission Filers)
	Sch: 1/1 Rpt: 19/20	Seiler	Kenna M. (Mrs.)				00087906	·
4	Date	<b>5</b> Payee	name					
	02/16/2024	Nancy	Hart Republican \	Vomen				
6	Amount (\$)	<b>7</b> Payee	address; City;	State	; Zip Co	ode		
	\$100.00	P.O. E	30x 597					
	Reimbursement from political contributions intended	Cleve	and, TX 77328					
8	PURPOSE	(a) Catego	ory (See Categories listed	at the top of this sch	nedule)	(b) Description	Check if travel outside of Tex	·
	OF EXPENDITURE	Event	Expense			l L	Check if Austin, TX, officehol	der living expense
						fee for table		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/	Officeholder name			Office sought	Office he	eld
	Date	Payee	name					
	02/23/2024	Polk C	County Republican	Club				
	Amount (\$)	Payee	address; City;	State	; Zip Co	ode		
	\$500.00	P.O. E	3ox 674					
	Reimbursement from							
	political contributions intended	Living	ston, TX 77351					
	PURPOSE	Catego	Ory (See Categories listed	at the top of this sch	nedule)	Description	Check if travel outside of Tex	·
	OF EXPENDITURE	Event	Expense			[	Check if Austin, TX, officehol	der living expense
						auction item pur	chase	
_	Complete ONLY if direct	Candidate/	Officeholder name			Office sought	Office he	eld
	expenditure to benefit					ŭ		
	C/OH							
	Date	Payee	name					
	02/11/2024	Zamz	ow, Melissa (Mrs.)					
Н	Amount (\$)	Payee	address; City;	State	; Zip Co	ode		
	\$120.00		eadow Lane					
	Reimbursement from							
	political contributions intended	Bowie	, TX 76230					
	PURPOSE	Catego	ory (See Categories listed	at the top of this sch	nedule)	Description	Check if travel outside of Tex	·
	OF EXPENDITURE	Food/	Beverage Expense	<b>!</b>		l L	Check if Austin, TX, officehol	der living expense
	-					Cookies for Can	didate Forum	
L								
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/	Officeholder name			Office sought	Office he	eld
l								

	OUTSTAN	NDING LOANS	SCHEDULE L			
	The Instruction	on Guide explains how to complete this form.	1 Total pages Schedule L: Sch: 1/1 Rpt: 20/20			
2	FILER NAME Seiler, Kenna M	1. (Mrs.)	3 Filer ID (Ethics Commission Filers) 00087906			
	LENDER INFORMATION	4 Name of lender Seiler, Kenna (Mrs.)				
		5 Lender address; City; State; Zip Code				
	GUARANTOR INFORMATION	The Woodlands, TX 77382  6 Name of guarantor				
	X not applicable	7 Guarantor address; City; State; Zip Code				