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) 00086232 23 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** Mr. Edward M. NAME Date Received **ELECTRONICALLY FILED** 10/06/2024 NICKNAME LAST **SUFFIX** Krenek CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** 6445 FM 1463, Suite 160-101 MAILING Amount Receipt # **ADDRESS** Change of Address Katy, TX 77494 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. David R. NAME NICKNAME LAST **SUFFIX** Melanson STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE **CAMPAIGN** APT / SUITE #; CITY; STATE: **TREASURER** 6445 FM 1463, Suite 160-101 **ADDRESS** (Residence or Business) Katy, TX 77494 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (979) 541-9297 **PHONE** REPORT TYPE 30th day before election 15th day after campaign treasurer January 15 Runoff X appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) reporting limit PERIOD Month Month Day Year Day Year **COVERED THROUGH** 07/01/2024 09/26/2024 10 ELECTION **ELECTION DATE ELECTION TYPE** Day Month Year Primary Runoff Other 11/05/2024 χ General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE District Judge District 400

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

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13 C / OH NAME	Krenek, Edward M. (I	Mr.)		14 Filer ID 00086232	(Ethics Cor	nmission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	These expenditure	ns accepted or political expenditu s may have been made without t required to report this information	the candidate's or of	ficeholder's kı	nowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAI	ME			
ш	GENERAL					
		COMMITTEE ADI	DRESS			
	SPECIFIC					
		COMMITTEE CAI	MPAIGN TREASURER NAME			
		COMMITTEE CAI	MPAIGN TREASURER ADDRES	SS		
16 CONTRIBUTION TOTALS			CONTRIBUTIONS(OTHER THAN CONTRIBUTIONS MADE ELEC		s, \$	0.00
		ICAL CONTRIBU	JTIONS S, OR GUARANTEES OF LOANS	S)	\$	27,465.00
EXPENDITURE TOTALS	+ `	IZED POLITICAL E			\$	0.00
	4. TOTAL POLIT	ICAL EXPENDIT	URES		\$	130,642.96
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE		NS MAINTAINED AS OF THE L	AST DAY OF THE	\$	9,986.83
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR		ALL OUTSTANDING LOANS AS	OF THE LAST DAY	\$	71,779.83
17 AFFIDAVIT						
			I swear, or affirm, under penalty true and correct and includes al under Title 15, Election Code.	/ of perjury, that the Il information require	accompanyin d to be report	g report is ed by me
			Mr. E	dward M. Krenek		
			Signature of	Candidate or Office	holder	
AFFIX NO	TARY STAMP / SEAL AB	OVE				
Sworn to and subs	cribed before me, by the s	aid		, this the		day
			s my hand and seal of office.			
Signature of office	cer administering oath	Printed name	e of officer administering oath	Title of offi	cer administe	ring oath

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

3 of 23

					3 01 23
18 FIL	ER NAM	ME .	19 Filer ID	(Ethi	cs Commission Filers)
Kr	enek, E	dward M. (Mr.)	00086232		
		E SUBTOTALS			SUBTOTAL AMOUNT
N/	ME OF	SCHEDULE			
1.	X	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	24,465.00
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	3,000.00
3.		SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	
4.		SCHEDULE E(J): LOANS (JUDICIAL)		\$	
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$	18,872.10
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$	
8.	X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	49,203.41
9.	X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	62,567.45
10	. 🔲	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (OF C/OH	\$	
11	. 🔲	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
12	. 🔲	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL (CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains how	v to complete this f	form.	1	Total pages Schedule A(J)1: Sch: 1/7 Rpt: 4/23
2	FILER NAME Krenek, Edw	vard M. (Mr.)			3	Filer ID (Ethics Commission Filers) 00086232
4	Date 09/15/2024	Full name of contributor Barnes, Greg (Mr.) Contributor address; City; S	out-of-state PAC (ID#:_		7	Amount of Contribution (\$) \$50.00
		Richmond, TX 77469				
8		Principal Occupation		9 Contributor's Job Title		
	Retired			Retired		
10	Contributor's e Retired	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
12	2 If contributor i	s a child, law firm of parent(s) (if a	any)	1		
_	Date	Full name of contributor	out-of-state PAC (ID#:_)	Ī	Amount of Contribution (\$)
	08/31/2024	Beham, Robert (Mr.) Contributor address; City; S	tate; Zip Code			\$75.00
	0	Katy, TX 77494		I 0		
	Retired	Principal Occupation		Contributor's Job Title Retired		
		employer/law firm		Law firm of contributor's sp	2011	co (if amy)
	Retired	employer/iaw iiim		Law IIIII of Contributor 3 3	Jou.	se (ii diiy)
	If contributor i	s a child, law firm of parent(s) (if a	any)			
H	Date	Full name of contributor	out-of-state PAC (ID#:)	Т	Amount of Contribution (\$)
	08/23/2024	Castaneda, Wendy (Mrs.)	_	,		\$2,500.00
		Contributor address; City; S Conroe, TX 77304	tate; Zip Code		•	
	Contributor's I	Principal Occupation		Contributor's Job Title		
	HR/Account	ing		Office Manager		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	LSEC, LLC					
	If contributor i	s a child, law firm of parent(s) (if a	any)			

	MONET	ARY POLITICAL CONTR	IBUTIC	DNS		SCHEDULE A(J)1
	The Instru	ction Guide explains how to comp	lete this f	orm.	1	Total pages Schedule A(J)1: Sch: 2/7 Rpt: 5/23
2		vard M. (Mr.)			3	Filer ID (Ethics Commission Filers) 00086232
4	Date 09/19/2024	Clemence, JingJing (Mrs.)			7	Amount of Contribution (\$) \$50.00
		Sugar Land, TX 77479				
8		·		9 Contributor's Job Title		
The Instruction Guide explains how to complete this form. Sch: 2/						
10				11 Law firm of contributor's sp	ous	se (if any)
12	If contributor is	s a child, law firm of parent(s) (if any)				
F	Date	Full name of contributor out-of-sta	ate PAC (ID#:_)		Amount of Contribution (\$)
	08/22/2024	Fasullo, Dominick (Mr.) Contributor address; City; State; Zip Cod				\$2,500.00
	0			I 0 12 1 1 1 7 7 7		
_	-			, ,		on (if any)
		япрюуенлам штп		Law IIIII of Contributor's Sp	ous	se (ii ariy)
	If contributor is	s a child, law firm of parent(s) (if any)				
H	Date	Full name of contributor out-of-sta	ate PAC (ID#:)	Т	Amount of Contribution (\$)
						\$100.00
		Contributor address; City; State; Zip Cod Richmond, TX 77406	le		•	
Г	Contributor's I	Principal Occupation		Contributor's Job Title	•	
	Retired			Retired		
	Contributor's	employer/law firm		Law firm of contributor's sp	ous	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	ction Guide explains ho	w to complete this f	form.	1	•	ages Schedule A(J)2 /7 Rpt: 6/23	L:
2	FILER NAME				3	Filer ID	(Ethics Commissi	on Filers)
	Krenek, Edw	vard M. (Mr.)				00086	232	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amoun	t of Contribution (\$)	
	09/10/2024	Jamal, Abdul Hussain S	hakur (Mr.)					\$2,500.00
		6 Contributor address; City; Sugar Land, TX 77479	State; Zip Code					
Ļ	Caratuilar staula I	<u> </u>		O Cometaile storile Joh Title				
8		Principal Occupation		9 Contributor's Job Title				
_	Retail/Whole			Owner				
10		employer/law firm		11 Law firm of contributor's s	pou	se (if any	')	
	Self-Employ							
12	! If contributor i	s a child, law firm of parent(s) (if	any)					
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amoun	t of Contribution (\$)	
	08/23/2024	King, Ronda (Mrs.)	_					\$2,500.00
		Contributor address; City;	State; Zip Code		1			
		New Caney, TX 77357						
	Contributor's I	Principal Occupation		Contributor's Job Title				
	Wastewater	System Services		Operator				
	Contributor's	employer/law firm		Law firm of contributor's s	pou	se (if any	')	
	LSEC, LLC							
	If contributor i	s a child, law firm of parent(s) (if	any)					
		, , , , , , , , , , , , , , , , , , , ,	,,					
	Date	Full name of contributor	out-of-state PAC (ID#:)	Ī	Amoun	t of Contribution (\$)	
	08/23/2024	King, Shelley (Mrs.)	_					\$2,500.00
		Contributor address; City;	State; Zip Code		1			
			·					
		Tomball, TX 77377						
	Contributor's I	Principal Occupation		Contributor's Job Title				
	Wastewater	System Services		Operator				
	Contributor's	employer/law firm		Law firm of contributor's s	pou	se (if any	′)	
	LSEC, LLC							
	If contributor i	s a child, law firm of parent(s) (if	any)	<u>l</u>				

	MONET	ARY POLITICAL	CONTRIBUTION	ONS			SCHEDULE	A(J)1
	The Instru	ction Guide explains ho	ow to complete this	form.	1		ges Schedule A(J)1 7 Rpt: 7/23	L:
2	FILER NAME				3	Filer ID	(Ethics Commissi	on Filers)
	Krenek, Edv	vard M. (Mr.)				000862	32	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount	of Contribution (\$)	
	08/22/2024	Kirk, Darrin (Mr.)						\$2,500.00
		6 Contributor address; City;	State; Zip Code					
		Port O'Connor, TX 7798	33					
8	Contributor's	Principal Occupation		9 Contributor's Job Title				
	Adminstrativ	re		Administrative				
10	Contributor's LSEC, LLC	employer/law firm		11 Law firm of contributor's s	spous	se (if any)		
12		s a child, law firm of parent(s) (i	if anv)					
			- 37					
	Date	Full name of contributor	out-of-state PAC (ID#:	1	T	Amount	of Contribution (\$)	
	09/06/2024			<i></i>		runount	or contribution (¢)	\$40.00
	Contributor address; City; State; Zip Co		State: 7in Code					*
		Continuator address, City,	State, Zip Code					
		Disharand TV 77400						
	0	Richmond, TX 77469		I 0 . 7				
		Principal Occupation		Contributor's Job Title				
	Retired			Retired		"• `		
		employer/law firm		Law firm of contributor's s	spous	se (if any)		
	Retired							
	If contributor i	s a child, law firm of parent(s) (i	it any)					
_	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount	of Contribution (\$)	
	08/08/2024	Montalvo, Evelyn (Mrs.)	—				(.,	\$100.00
		Contributor address; City;						
		Contributor address, Oity,	otato, zip oodo					
		Richmond, TX 77406						
_	Contributor's	Principal Occupation		Contributor's Job Title				
	Retired	тиора Оссараноп		Retired				
_		employer/law firm		Law firm of contributor's s	nous	e (if any)		
	Retired	employer/law lilli		Law initi of contributor 3 3	pour	c (ii aily)		
_		s a child, law firm of parent(s) (i	if any)					
	ii continuator i	s a crina, law initi or parcria(s) (i	i arry)					
\vdash								

	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: 5/7 Rpt: 8/23
2	FILER NAME Krenek, Edw	vard M. (Mr.)			3	Filer ID (Ethics Commission Filers) 00086232
4	Date 09/24/2024	5 Full name of contributor Ortiz, Joe (Mr.) 6 Contributor address; City; 5	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$2,500.00
		Katy, TX 77494				
8		Principal Occupation		9 Contributor's Job Title		
	President			President		
10	Contributor's 6 Merit NDT L	employer/law firm LC		11 Law firm of contributor's sp	oous	se (if any)
12	2 If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	09/06/2024	Pavlock, Rodney (Mr.) Contributor address; City; s Orchard, TX 77464	State; Zip Code			\$250.00
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Retired	Fincipal Occupation		Retired		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
		s a child, law firm of parent(s) (if	any)			
H	Date	Full name of contributor	out-of-state PAC (ID#:	,	Т	Amount of Contribution (\$)
	08/28/2024	Rainey, Kyle (Mr.)	Uni-or-state PAC (ID#.			\$2,500.00
		Contributor address; City; S				
	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>	
	Environment	tal Consultant		Manager		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	LSEC, LLC					
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 6/7 Rpt: 9/23
2	FILER NAME Krenek, Edw	/ard M. (Mr.)			3	Filer ID (Ethics Commission Filers) 00086232
4	Date 08/15/2024	5 Full name of contributor Republican Women's Cl 6 Contributor address; City;			7	Amount of Contribution (\$) \$800.00
Ļ	O a satella sata ela 1	Katy, TX 77494		le Caradharana Iak Fila		
8	Contributors	Principal Occupation		9 Contributor's Job Title		
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
12	2 If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)	ī	Amount of Contribution (\$)
	08/22/2024	Stithem, Justin (Mr.) Contributor address; City;	<u> </u>			\$2,500.00
		Porter, TX 77365				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Wastewater	Contractor		Field Supervisor		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Lone Star E	rosion Control				
	If contributor is	s a child, law firm of parent(s) (i	f any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)
	09/14/2024	Sulak, Al (Mr.)	<u> </u>	·		\$250.00
		Contributor address; City; Orchard, TX 77464	State; Zip Code			
-	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>	
	Retired	- micipal Occupation		Retired		
	Contributor's	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) (i	f any)			

	MONET	SCHEDUL	E A(J)1			
	The Instru	ction Guide explains how to complete this f	form.	1	Total pages Schedule A Sch: 7/7 Rpt: 10/23	A(J)1:
2	FILER NAME				Filer ID (Ethics Comm	nission Filers)
_	Krenek, Edw			↓	00086232	
4	Date 08/22/2024	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution	
	08/22/2024 Williams, Bach (Mrs.) 6 Contributor address; City; State; Zip Code					\$250.00
_	Caratrila stania I	Katy, TX 77494	O Constributorio lob Titlo			
ð	Retired	Principal Occupation	9 Contributor's Job Title Retired			
10		employer/law firm	11 Law firm of contributor's sp	ากมอ	e (if any)	
-0	Retired	anpoyenaw mm	Law min or continuator 5 St	Jous	- (π απ <i>y)</i>	
12		s a child, law firm of parent(s) (if any)				

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 11/23 3 Filer ID (Ethics Commission Filers) FILER NAME Krenek, Edward M. (Mr.) 00086232 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Full name of contributor In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 09/20/2024 Covering Katy News \$2,500.00 Advertising 7 Contributor address; City; State; Zip Code Katy, TX 77450 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) (See instructions) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 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 Full name of contributor Amount of In-kind contribution out-of-state PAC (ID#: contribution (\$) description 09/15/2024 Nerkazhcha Weekly Newspaper \$500.00 | Advertising Contributor address; City; State; Zip Code Stafford, TX 77477 Check if travel outside of Texas. Complete Schedule T. (See instructions) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) 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)

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 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)

	Credit Card Payment	The Instruction Guide explains how to complete this for	m.
1	Total pages Schedule F1: Sch: 1/3 Rpt: 12/23	2 FILER NAME Krenek, Edward M. (Mr.)	3 Filer ID (Ethics Commission Filers) 00086232
4	Date 09/24/2024	5 Payee name 512 New Media	
	Amount (\$) \$18,731.00	7 Payee address; City; State; Zip Code 5959 Richmond Avenue Suite 310 Houston, TX 77057	
8	PURPOSE OF EXPENDITURE	Check	on if travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense Media/Advertising
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 08/08/2024	Payee name Anedot, Inc.	
	Amount (\$) \$4.30	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112	
	PURPOSE OF EXPENDITURE	/ tecounting/ Dariking	if travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date 08/22/2024	Payee name Anedot, Inc.	
	Amount (\$) \$10.30	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112	
	PURPOSE OF EXPENDITURE	Accounting/Banking	if travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OI	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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor, Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (onter a extension pot listed above)

	Credit Card Payment	The Instruction Guide explains how to o	-	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 2/3 Rpt: 13/23	Krenek, Edward M. (Mr.)		00086232
4	Date	5 Payee name		<u>'</u>
	08/31/2024	Anedot, Inc.		
6	Amount (\$)	7 Payee address; City; State; Zip C	ode	
	\$3.30	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.
	LAFENDITORE			Check if Austin, TX, officeholder living expense
				Processing Fee
Ļ	Complete ONLY if direct	Candidate/Officeholder name Office so	ught	Office held
9	Complete ONLY if direct expenditure to benefit C/OI		ugni	Office field
⊨	Data			
	Date	Payee name		
L	09/06/2024	Anedot, Inc.		
	Amount (\$)	Payee address; City; State; Zip C	code	
	\$10.30	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
				Processing Fee
				Troccoming Foo
┢	Complete ONLY if direct	Candidate/Officeholder name Office so	<u>l</u> ught	Office held
	expenditure to benefit C/OI		Ü	
F	Date	Payee name		
	09/14/2024	Anedot, Inc.		
H	Amount (\$)	Payee address; City; State; Zip (Code	
	\$10.30	1340 Poydras Street		
		Suite 1770		
		New Orleans, LA 70112		
L	PURPOSE		(h)	Description
	OF	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(6)	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	/ lecounting/Banking		Check if Austin, TX, officeholder living expense
				Processing Fee
	Complete ONLY if direct	Candidate/Officeholder name Office so	ught	Office held
L	expenditure to benefit C/OI	1		
			_	

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 Comn Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

ment Solicitation/Fundraising Expense
ense Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (outputs a category not listed above)

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee Le	ft/Awards/Memorials gal Services he Instruction Gu			ages/	Contract Labor		Travel Out of Dis OTHER (enter a	strict category not listed above)
1	Total pages Schedule F1: Sch: 3/3 Rpt: 14/23	2	FILER NAME Krenek, Edwa	ard M. (Mr.)						Filer ID 00086232	(Ethics Commission Filers)
4	Date 09/15/2024		Payee name Anedot, Inc.								
6	Amount (\$) \$2.30	7	Payee address 1340 Poydras Suite 1770 New Orleans,	Street	State;	Zip Coo	de 				
8	PURPOSE OF EXPENDITURE	(a)	Category (See Accounting/B		ne top of this sche	edule)		=	, TX,	de of Texas. Com officeholder living	plete Schedule T. g expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Office	holder name	0	ffice soug	ght			Office he	eld
	Date 09/24/2024		Payee name Anedot, Inc.								
	Amount (\$) \$100.30		Payee address 1340 Poydras Suite 1770 New Orleans,	Street	State;	Zip Coo	de				
	PURPOSE OF EXPENDITURE	(a)	Category (See Accounting/B		ne top of this sche	edule)		—	, TX,	de of Texas. Com officeholder living	plete Schedule T. g expense
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Office	holder name	0	ffice souç	ght			Office he	eld

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 Instr	ruction Guide explains how	to complete th	is form.			
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commiss	sion Filers)
Sch: 1/4 Rpt: 15/23	Krenek, Edward M.	(Mr.)			00086232		
4 CREDIT CARD ISSUER		ncial institution cover	EXPEND	F UNITEMIZED ITURES ED TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issuer	Paid		
	\$13,887.93	08/06/2024					
7 PAYEE	(a) Payee name		(b) Payee ad	ddress;	City,	State,	Zip Code
	NBD Graphics Inc.		917 Masor				
			Katy, TX 7				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descripti	on			
X Political	Printing Expense	· · · · · · · · · · · · · · · · · · ·	Signage				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense	
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) C	Credit Card Issuer	Paid		
	\$495.00	07/19/2024					
PAYEE	(a) Payee name		(b) Payee ad	ddress;	City,	State,	Zip Code
	Fort Bend Herald		P.O. Box 1	.088			
			Rosenberg	g, TX 77471			
PURPOSE OF	(a) Category		(b) Descripti	on			
EXPENDITURE	(See Categories listed at the top Advertising Expense	of this schedule)	Advertisen	nent			
X Political	, , , , , , , , , , , , , , , , , , ,						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense	
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issuer	Paid		
	\$5,880.14	07/25/2024					
PAYEE	(a) Payee name		(b) Payee ac	ddress;	City,	State,	Zip Code
	NDD Cooling to		917 Masor	n Road			
	NBD Graphics Inc.						
			Katy, TX 7				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodulo)	(b) Descripti	on			
l <u> </u>	Printing Expense	of this schedule)	Signage				
X Political							
Non-Political	(1)	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense	
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held		
expenditure to benefit C/OH							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Mange/Control Labor

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

Candidate/Officenoider/Politica	-	ruction Guide explains how		THER (enter a category	not listed at	pove)
1 Total pages Schedule F4:	2 FILER NAME	<u> </u>		3 Filer ID (Ethic	s Commiss	sion Filers)
Sch: 2/4 Rpt: 16/23	Krenek, Edward M.	(Mr.)		00086232		,
4 CREDIT CARD ISSUER	Name of finar	ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid		
	\$3,000.00	09/13/2024				
7 PAYEE	(a) Payee name Masala Radio		(b) Payee address; 2721 Fieldstone Street	City,	State,	Zip Code
			Sugar Land, TX 77478			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description			
	Advertising Expense	or this scriedale)	Advertisements			
X Political	,					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	nse	
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid		
	\$1,163.69	09/12/2024				
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
	LP Printing		3029 Crossview Drive			
			Houston, TX 77063			
PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top Printing Expense	of this schedule)	Push Cards			
X Political	Trinking Expense					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	nse	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid		
	\$14,072.50	08/09/2024				
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
	NBD Graphics Inc.		917 Mason Road			
			Katy, TX 77450			
PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top	of this schedule)	Signage			
X Political	Printing Expense					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin. TX.	officeholder living expe	ense	
Complete ONLY if direct	Candidate/Officeholder	·	e sought	Office held		
expenditure to benefit C/OH			-			

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 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
OTHER (enter a cate)

Candidate/Onicendiden/Folitica		uction Guide explains how		mplete th		TTIEN (etitet a categor	y not listed a	bove)
1 Total pages Schedule F4:	2 FILER NAME					3 Filer ID (Ethio	cs Commiss	sion Filers)
Sch: 3/4 Rpt: 17/23	Krenek, Edward M.	(Mr.)				00086232		ŕ
4 CREDIT CARD ISSUER	Name of finan see pro	cial institution		EXPEND	F UNITEMIZED ITURES D TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c)	Date(s) C	Credit Card Issue	r Paid		
	\$2,841.71	08/23/2024						
7 PAYEE	(a) Payee name		(b)	Payee ad	ddress;	City,	State,	Zip Code
	LP Printing		30	29 Cros	sview Drive			
			Но	ouston, T	X 77063			
8 PURPOSE OF	(a) Category		1 ' '	Descripti				
EXPENDITURE	(See Categories listed at the top of Printing Expense	f this schedule)	Pι	ısh Card	S			
X Political	2 Aponoo							
Non-Political	(c) Check if travel outside o	f Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living exp	ense	
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sou	ıght		Office held		
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c)	Date(s) C	Credit Card Issue	r Paid		
	\$2,700.00	08/25/2024						
PAYEE	(a) Payee name		(b)	Payee ad	ddress;	City,	State,	Zip Code
	Fort Bend Herald		P.	O. Box 1	.088			
			Ro	senberg	j, TX 77471			
PURPOSE OF	(a) Category		(b)	Descripti	on			
EXPENDITURE	(See Categories listed at the top of Advertising Expense	of this schedule)	Ac	lvertisen	nent			
X Political	Advertising Expense							
Non-Political	(c) Check if travel outside o	f Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sou	ight	_	Office held		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c)	Date(s) C	Credit Card Issue	r Paid		
PAYEE	(a) Payee name		(b)	Payee ad	ddress;	City,	State,	Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of	of this schedule)	(b)	Descripti	on			
Political								
Non-Political	(c) Check if travel outside o	f Texas. Complete Schedule T.						
Complete ONLY if direct	Candidate/Officeholder	·	e sou	ıght		Office held		
expenditure to benefit C/OH				-				

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	- Gift/Awards	rage Expense s/Memorials Expense	Polling Expense Printing Expense	Fransportation Equipment & Related Expense Fravel in District Fravel Out of District DTHER (enter a category not listed above)
		The Instr	uction Guide explains ho	ow to complete this form.	
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	Sch: 4/4 Rpt: 18/23	Krenek, Edward M.	(Mr.)		00086232
4	CREDIT CARD	Name of finar	ncial institution	5 TOTAL OF UNITEMIZED	
	ISSUER	Bank of	America	EXPENDITURES CHARGED TO A CREDI CARD	T \$
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid
		\$5,162.44	08/17/2024		
7	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code
		NIDD Constitution		917 Mason Road	
		NBD Graphics Inc.			
L				Katy, TX 77450	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	
		Printing Expense	,	Signage	
	X Political			<u> </u>	
Ļ	Non-Political	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T		K, officeholder living expense Office held
	Complete ONLY if direct conditure to benefit C/OH	Candidate/Officeriolder	name On	fice sought	Office field

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Committee	Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Polling Ex Printing E Salaries/V	xpense Nages/Contract Labor	Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
	oroak oara'i aymon	_	The Instruction Guide explains	how to co	omplete this form.	
1	Total pages Schedule G:	2 FILER NAMI	Ē			3 Filer ID (Ethics Commission Filers)
	Sch: 1/3 Rpt: 19/23	Krenek, Ed	ward M. (Mr.)			00086232
4	Date	5 Payee name				
	08/29/2024	512 New M	edia			
6	Amount (\$)	7 Payee addre	ess; City; State	; Zip Co	nde	
ľ	\$8,826.48	_	nond Avenue	., <u>z</u> ip 00	540	
		Suite 310	nona Avenac			
	X Reimbursement from political contributions	00				
	intended	Houston, T	X //05/			
8	PURPOSE	(a) Category (s	ee Categories listed at the top of this scl	nedule)	(b) Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Advertising	Expense		L	Check if Austin, TX, officeholder living expense
					Social Media/Vid	eography
9		Candidate/Office	holder name		Office sought	Office held
	expenditure to benefit C/OH					
	0/011					
	Date	Payee name				
	08/04/2024	Discover				
	Amount (\$)	Payee addre	ess; City; State	; Zip Co	ode	
	\$6,375.14	P.O. Box 2	9013			
	Reimbursement from					
	X political contributions intended	Phoenix A	Z 85038-9013			
_	PURPOSE	_			Description F	Check if travel outside of Texas. Complete Schedule T.
	OF		ee Categories listed at the top of this scl	nedule)	Description	Check if Austin, TX, officeholder living expense
	EXPENDITURE	Credit Card	граушеш		Fort Bend Herald	-
					l on Bena Heraic	, NDD
_	Complete ONLY if direct	Candidata/Office	holder nome		Office sought	Office hold
	expenditure to benefit	Candidate/Office	noider name		Office sought	Office held
	C/OH					
	Date	Payee name				
	08/08/2024	Discover				
			0''	7: 0		
	Amount (\$)	Payee addre	•	e; Zip Co	oae	
	\$13,887.93	P.O. Box 2	9013			
	Reimbursement from political contributions					
	intended	Phoenix, A	Z 85038-9013			
	PURPOSE	Category (S	ee Categories listed at the top of this scl	nedule)	Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Credit Card	l Payment			Check if Austin, TX, officeholder living expense
	LXI LINDITORL				NBD	
	Complete ONLY if direct	Candidate/Office	holder name		Office sought	Office held
	expenditure to benefit C/OH					
_	5,011					

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		
1	Total pages Schedule G:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
_	Sch: 2/3 Rpt: 20/23	Krenek, Edward M. (Mr.)	00086232
4	Date	5 Payee name	
_	08/14/2024	Discover	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$14,072.50	P.O. Box 29013	
	Reimbursement from political contributions intended	Phoenix, AZ 85038-9013	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descrip	
	OF EXPENDITURE	Credit Card Payment	Check if Austin, TX, officeholder living expense
		NBD	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office so	ught Office held
	Date	Payee name	
	08/27/2024	Discover	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$5,541.71	P.O. Box 29013	
	•	1.0.23% 20020	
	X Reimbursement from political contributions intended	Phoenix, AZ 85038-9013	
	PURPOSE OF	Category (See Categories listed at the top of this schedule) Descrip	
	EXPENDITURE	Credit Card Payment	Check if Austin, TX, officeholder living expense
		FB Herald;	LP Printing
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office so	ught Office held
	Date	Payee name	
	09/19/2024	Discover	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$4,163.69	P.O. Box 29013	
		1.0. Box 23010	
	X Reimbursement from political contributions intended	Phoenix, AZ 85038-9013	
	PURPOSE	Category (See Categories listed at the top of this schedule) Descrip	
	OF EXPENDITURE	Credit Card Payment	Check if Austin, TX, officeholder living expense
		Masala	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office so	ught Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(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) Credit Card Payment The Instruction Guide explains how to complete this form. FILER NAME Filer ID Total pages Schedule G: (Ethics Commission Filers) Sch: 3/3 Rpt: 21/23 Krenek, Edward M. (Mr.) 00086232 Date Payee name 08/06/2024 Torres, Marcos 6 Amount (\$) Payee address; City; State; Zip Code \$7,200.00 405 San Jose Street Reimbursement from political contributions intended Х Richmond, TX 77469 **PURPOSE** (b) Description Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Salaries/Wages/Contract Labor **EXPENDITURE** Sign Crew Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 09/07/2024 Torres, Marcos Amount (\$) Payee address; City; State; Zip Code \$2,500.00 405 San Jose Street Reimbursement from political contributions Χ Richmond, TX 77469 intended **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Salaries/Wages/Contract Labor **EXPENDITURE** Sign Crew Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

OUTSTAI	NDING LOANS	SCHEDULE L			
The Instructi	on Guide explains how to complete this form.	1 Total pages Schedule L: Sch: 1/1 Rpt: 22/23			
2 FILER NAME Krenek, Edward	d М. (Mr.)	3 Filer ID (Ethics Commission Filers) 00086232			
LENDER INFORMATION	4 Name of lender Krenek, Edward (Mr.)	•			
	5 Lender address; City; State; Zip Code				
	Fulshear, TX 77441				
GUARANTOR INFORMATION	6 Name of guarantor				
X not applicable	7 Guarantor address; City; State; Zip Code				

Hand As of The Last Day of The Reporting Period	
The Instruction Guide explains how to complete this form.	1 Total pages Schedule M: Sch: 1/1 Rpt: 23/23
P. FILER NAME Krenek, Edward M. (Mr.)	3 Filer ID (Ethics Commission Filers) 00086232
Description of Asset Push Cards; Signage	