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) 00087686 14 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** Mr. Kenneth R. NAME Date Received **ELECTRONICALLY FILED** 01/14/2025 NICKNAME LAST **SUFFIX** Kent Chambers CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** 502 W. Montgomery, Ste. 551 MAILING Receipt # Amount **ADDRESS** Change of Address Willis, TX 77378 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Ms. Rebecca E. NAME NICKNAME LAST **SUFFIX** Groenow **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE: **TREASURER** 240 Bee Balm Ct. **ADDRESS** (Residence or Business) Conroe, TX 77304 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (936) 697-3997 **PHONE** REPORT TYPE 30th day before election 15th day after campaign treasurer January 15 Runoff lx l 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 12/31/2024 10 ELECTION **ELECTION DATE ELECTION TYPE** Day Month Year Primary Runoff Other 11/05/2024

χ General

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Special

12 OFFICE SOUGHT (if known)

Court Of Appeals, Justice Place 4 District 9th

GO TO PAGI

Court Of Appeals, Justice Place 4 District 9th

OFFICE HELD (if any)

Forms provided by Texas Ethics Commission

11 OFFICE

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 14

13 C / OH NAME	Chambers, Kenneth	R. (Mr.)	14 Filer ID (00087686	(Ethics Commiss	sion Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expe These expenditures may have been made with I officeholders are required to report this inform	nout the candidate's or office	eholder's knowle	edge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
ш	X GENERAL	Texas Alliance for Life PAC			
		COMMITTEE ADDRESS			
	SPECIFIC SPECIFIC				
		Ste. 380			
		Austin, TX 78754			
		COMMITTEE CAMPAIGN TREASURER NAM			
		Shaw, James			
		COMMITTEE CAMPAIGN TREASURER ADD	DRESS		
		4505 Corazon			
		Round Rock, TX 78681			
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS(OTHER T ES OF LOANS, OR CONTRIBUTIONS MADE		\$	50.00
	2. TOTAL POLIT	ICAL CONTRIBUTIONS		\$	2,550.00
	(OTHER THAN	PLEDGES, LOANS, OR GUARANTEES OF LO	DANS)	3	2,330.00
EXPENDITURE TOTALS	TOTAL UNITEMIZED POLITICAL EXPENDITURES				0.00
	4. TOTAL POLIT	CAL EXPENDITURES		\$	15,941.52
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF TH RIOD	HE LAST DAY OF THE	\$	1,298.09
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS TING PERIOD	S AS OF THE LAST DAY	\$	5,000.00
17 AFFIDAVIT			enalty of perjury, that the acc les all information required to de.		
		Mr.	. Kenneth R. Chambers		
		Signatu	re of Candidate or Officehol	der	
AFFIX NO	TARY STAMP / SEAL AB	DVE			
Sworn to and subs	cribed before me by the s	aid	, this the	Ч	lay
		ertify which, witness my hand and seal of office		u	
Signature of office	cer administering oath	Printed name of officer administering oat	h Title of officer	r administering o	oath

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

				3 of 14
18 FILER NA	(Ethic	s Commission Filers)		
20 SCHEDU	LE SUBTOTALS SCHEDULE	00087686		SUBTOTAL AMOUNT
1. X	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	2,550.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.	SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	
4.	SCHEDULE E(J): LOANS (JUDICIAL)		\$	
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$	15,000.00
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		\$	741.52
9. X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	200.00
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
12. X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$	6.00

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	The Instruction Guide explains how to complete this form.			Total pages Schedule A(J)1: Sch: 1/1 Rpt: 4/14
2	FILER NAME Chambers, F	FILER NAME Chambers, Kenneth R. (Mr.)			Filer ID (Ethics Commission Filers) 00087686
4	Date 10/04/2024				Amount of Contribution (\$) \$300.00
		Montgomery, TX 77356	_		
8	Contributor's I	Principal Occupation	9 Contributor's Job Title		
10	Contributor's	employer/law firm	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#:)	Т	Amount of Contribution (\$)
	10/10/2024	Liberty Belles Republican Women Contributor address; City; State; Zip Code			\$1,200.00
		Conroe, TX 77305			
	Contributor's I	Principal Occupation	Contributor's Job Title		
	Contributor's	employer/law firm	Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if any)			
	Date	Full name of contributor ut-of-state PAC (ID#:)	Π	Amount of Contribution (\$)
	08/20/2024	Montgomery County Republican Women Contributor address; City; State; Zip Code			\$1,000.00
		Conroe, TX 77305			
	Contributor's I	Principal Occupation	Contributor's Job Title		
	Contributor's e	employer/law firm	Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if any)	1		

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

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 Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
_	Sch: 1/2 Rpt: 5/14	Chambers, Kenneth R. (Mr.)	
4	Date	5 Payee name	_
	07/03/2024	Capital One	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$1,000.00	PO Box 71083	
		Charlotte, NC 28272	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Credit Card Payment	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Credit card payment	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	Н	
	Date	Payee name	
	08/05/2024	Capital One	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,000.00	PO Box 71083	
	•		
		Charlotte, NC 28272	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF	Credit Card Payment Credit Card Payment Credit Card Payment Credit Card Payment	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Credit card payment	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	H	
	Date	Payee name	
	09/03/2024	Capital One	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$1,000.00	PO Box 71083	
		Charlotte, NC 28272	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	\neg
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITORE	Check if Austin, TX, officeholder living expense	
		Credit card payment	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
L	expenditure to benefit C/OI	n 	

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 C

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services 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/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: 2/2 Rpt: 6/14	Chambers, Kenneth R. (Mr.) 00087686
4	Date	5 Payee name
	10/03/2024	Capital One
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	PO Box 71083
		Charlotte, NC 28272
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Credit card payment
		ordan dara paymont
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	10/08/2024	Capital One
	Amount (\$)	Payee address; City; State; Zip Code
	\$10,000.00	PO Box 71083
	, -,	
		Charlotte, NC 28272
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
	-	Check if Austin, TX, officeholder living expense Credit card payment
		orean early payment
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	11/04/2024	Capital One
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	PO Box 71083
		Charlotte, NC 28272
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Credit card payment
		Credit card payment
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	

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

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

Candidate/Officeholder/Politica		ices Sa ruction Guide explains how	laries/Wages/Co		THER (enter a cate	gory not listed al	bove)
4. Tatal name Oak adula 54.		Tuction Guide explains now	to complete	uns ioini.	a =::	+h: Oi	-i Fil\
1 Total pages Schedule F4:		D (14.)			3 Filer ID (E	tnics Commiss	sion Filers)
Sch: 1/4 Rpt: 7/14	Chambers, Kenneth		1		00087686		
4 CREDIT CARD	Name of finar	ncial institution		OF UNITEMIZED DITURES	\$		
ISSUER	Capit	al One		SED TO A CREDIT			
			CARD				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
	\$50.00	07/15/2024					
7 PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
				eside Blvd.			·
	The Woodlands Are	ea Chamber of					
			The Woo	dlands, TX 7738	1		
8 PURPOSE OF	(a) Category		(b) Descrip				
EXPENDITURE	(See Categories listed at the top	of this schedule)	Members				
X Political	Membership						
Non-Political				_			
	(· / L	of Texas. Complete Schedule T.		Check if Austin, TX,		expense	
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held		
expenditure to benefit C/OH		I a	1				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
	\$294.22	07/19/2024					
PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
	C		225 Vario	ck St.			
	Squarespace, Inc.		12th Floo	or			
			New Yorl	k, NY 10014			
PURPOSE OF	(a) Category		(b) Descrip	otion			
EXPENDITURE	(See Categories listed at the top Advertising Expense	of this schedule)	Website				
X Political	Advertising Expense						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, 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	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
	\$50.00	08/15/2024					
	Ψοσ.σσ	00/10/2024					
PAYEE	(a) Payee name		(b) Payee	address:	City,	State,	Zip Code
	(4) 1 1) 11 111111		1 ' '	eside Blvd.	,,		
	The Woodlands Are	ea Chamber of	J GOLG Lan	Colao Biva.			
			The Woo	dlands, TX 7738	1		
PURPOSE OF	(a) Category		(b) Descrip				
EXPENDITURE	(See Categories listed at the top	of this schedule)	Members				
X Political	Membership			· 1-			
ı <u>≒</u>				_			
Non-Political	(· / L	of Texas. Complete Schedule T.		Check if Austin, TX,		expense	
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held		
expenditure to benefit C/OH							
I							

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 Inst	ruction Guide explains hov	v to complete	this form.	(* ** *********************************	.,	,
1 Total pages Schedule	F4: 2 FILER NAME				3 Filer ID (Eth	nics Commis	sion Filers)
Sch: 2/4 Rpt: 8/14	Chambers, Kennet	h R. (Mr.)			00087686		
4 CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid		
	\$50.00	09/16/2024					
7 PAYEE	(a) Payee name The Woodlands Ar	ea Chamber of		keside Blvd.	City,	State,	Zip Code
8 PURPOSE OF	(a) Category		(b) Descri	odlands, TX 7738	1		
8 PURPOSE OF EXPENDITURE X Political	(See Categories listed at the top Membership	of this schedule)	Members				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin TX	officeholder living ex	vnense	
9 Complete ONLY if dire		<u> </u>	ce sought	Check ii Addin, 1X,	Office held	фензе	
expenditure to benefit C/0			· ·				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid		
	\$50.00	11/15/2024					
PAYEE	(a) Payee name	•	(b) Payee	address;	City,	State,	Zip Code
	The Woodlands Ar	ea Chamber of	9320 Lal	keside Blvd.			
				odlands, TX 7738	1		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Membership	of this schedule)	(b) Descri				
Non-Political		of Towns Committee Coloradado T		Observative TV	-#		
Complete ONLY if dire		of Texas. Complete Schedule T.	ce sought	Check if Austin, 1X,	Office held	kpense	
expenditure to benefit C/0	~`		oo ooug		000		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid		
	\$50.00	10/16/2024					
PAYEE	(a) Payee name	1	(b) Payee	address;	City,	State,	Zip Code
	The Woodlands Ar	ea Chamber of	9320 Lal	keside Blvd.			
			The Woo	odlands, TX 7738	1		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Membership	of this schedule)	(b) Descri				
X Political	Membership						
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living ex	kpense	
Complete ONLY if dire		r name Offic	ce sought		Office held		
expenditure to benefit C/0	OH						
1							

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

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)

	Candidate/Officeriolder/Folitica	ŭ	ruction Guide explains how	to complete this form.	OTTLK (enter a catego	ry not listed a	bove)
1	Total pages Schedule F4:		·	·	3 Filer ID (Ethi	ics Commis	sion Filers)
-	Sch: 3/4 Rpt: 9/14	Chambers, Kennetl	h R. (Mr.)		00087686		,
4	CREDIT CARD ISSUER	Name of final	ncial institution revious	5 TOTAL OF UNITEMIZE EXPENDITURES CHARGED TO A CRED CARD	ED \$		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid		
		\$58.66	12/07/2024				
7	PAYEE	(a) Payee name Capital One		(b) Payee address; PO Box 71083	City,	State,	Zip Code
L		() 0		Charlotte, NC 28272			
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Description Interest on credit card b	palance		
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin,	TX, officeholder living exp	oense	
9	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held		
е	xpenditure to benefit C/OH						
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid		
		\$50.00	12/16/2024				
	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
		The Woodlands Are	ea Chamber of	9320 Lakeside Blvd.			
				The Woodlands, TX 77	381		
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Membership	of this schedule)	(b) Description Membership			
	Non-Political	(-) 🗆 a	(7. 0. 1. 0. 1. 7.				
⊢	Complete ONLY if direct	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	e sought	TX, officeholder living exp	pense	
e	xpenditure to benefit C/OH	Candidate/Officeriolder	Tidile Office	c sought	Office field		
Г	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid		
		\$20.00	07/03/2024				
Г	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
		Squarespace, Inc.		225 Varick St. 12th Floor New York, NY 10014			
\vdash	PURPOSE OF	(a) Category		(b) Description			
	EXPENDITURE	(See Categories listed at the top	of this schedule)	Website hosting			
	X Political	Advertising Expense					
1	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin,	TX, officeholder living exp	oense	
e	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		
Г							

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/Award:	rage Expense s/Memorials Expense	Polling Expense Printing Expense	Transportation Equipment & Related Expense Travel in District Travel Out of District DTHER (enter a category not listed above)
	The Inst	ruction 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: 10/14	Chambers, Kennetl	n R. (Mr.)		00087686
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDI CARD	\$
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Paid
	\$68.64	11/07/2024		
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code
	Capital One		PO Box 71083	
			Charlotte, NC 28272	
8 PURPOSE OF	(a) Category		(b) Description	
EXPENDITURE	(See Categories listed at the top	of this schedule)	Interest on credit card ba	alance
X Political				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T	. Check if Austin, T	K, officeholder living expense
9 Complete ONLY if direct	Candidate/Officeholder	name Off	fice sought	Office held
expenditure to benefit C/OH				

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Advertising Expense Accounting/Banking Event 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. Total pages Schedule G: FILER NAME Filer ID (Ethics Commission Filers) Sch: 1/1 Rpt: 11/14 Chambers, Kenneth R. (Mr.) 00087686 Date Payee name 12/02/2024 Capital One 6 Amount (\$) Payee address; City; State; Zip Code \$200.00 PO Box 71083 Reimbursement from political contributions intended Charlotte, NC 28272 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. 8 OF Check if Austin, TX, officeholder living expense Credit Card Payment **EXPENDITURE** Credit card payment Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER The Instruction Guide explains how to complete this form.

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	The Instru	ction Guide explains how to complete this form.	1	•	ages Schedule K: /2 Rpt: 12/14	
2	Priler NAME Chambers, Kenneth R. (Mr.) 3 Filer ID 0008768				(Ethics Commission F	Filers)
4	Date 07/20/2024	 Name of person from whom amount is received Woodforest National Bank Address of person from whom amount is received; City; State; Zip Code 			8 Amount (\$)	\$1.62
		Willis, TX 77378				
		7 Purpose for which amount is received	Check if politi	cal contr	ibution returned to filer	
	Date 08/20/2024	Name of person from whom amount is received Woodforest National Bank Address of person from whom amount is received; City; State; Zip Code Willis, TX 77378			Amount (\$)	\$1.56
		Purpose for which amount is received	Check if polition	cal contr	ibution returned to filer	
	Date 09/20/2024	Name of person from whom amount is received Woodforest National Bank Address of person from whom amount is received; City; State; Zip Code			Amount (\$)	\$1.55
		Willis, TX 77378 Purpose for which amount is received	Check if politi	cal contr	ibution returned to filer	
	Date 10/20/2024	Name of person from whom amount is received Woodforest National Bank Address of person from whom amount is received; City; State; Zip Code			Amount (\$)	\$0.89
		Willis, TX 77378				
		Purpose for which amount is received	Check if polition	cal contr	ibution returned to filer	
	Date 11/20/2024	Name of person from whom amount is received Woodforest National Bank Address of person from whom amount is received; City; State; Zip Code			Amount (\$)	\$0.22
		Willis, TX 77378 Purpose for which amount is received	Check if noliti	cal contr	ibution returned to filer	
		a.pool of milon amount is received	1 ericek ii boliti	oui conti	isation returned to file!	
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INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 2/2 Rpt: 13/14 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Chambers, Kenneth R. (Mr.) 00087686 8 Amount (\$) Date 5 Name of person from whom amount is received 12/20/2024 \$0.16 Woodforest National Bank 6 Address of person from whom amount is received; City; State; Zip Code Willis, TX 77378 7 Purpose for which amount is received Check if political contribution returned to filer

OUTSTANDING LOANS		SCHEDULE L
The Instruction Guide explains how to complete this form. 2 FILER NAME Chambers, Kenneth R. (Mr.)		1 Total pages Schedule L: Sch: 1/1 Rpt: 14/14
		3 Filer ID (Ethics Commission Filers) 00087686
LENDER INFORMATION	4 Name of lender Kent, Chambers	·
	5 Lender address; City; State; Zip Code	
	Willis, TX 77378	
GUARANTOR INFORMATION	6 Name of guarantor	
X not applicable	7 Guarantor address; City; State; Zip Code	
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