CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to com	plete this form.	1 Filer ID (Ethics Commi 00086032		2 Total pages file	
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE U	SE ONLY
OFFICEHOLDER NAME	The Honorable	Aaron G.			Date Received	
10 WIL					ELECTRONICA	I I V EII ED
					07/15/2025	LLI FILLD
	NICKNAME	LAST		SUFFIX	07/15/2025	
		Kinsey				
4 CANDIDATE /	ADDRESS / PO BOX; AF	PT / SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered or I	Date Postmarked
OFFICEHOLDER MAILING	PO Box 605					_
ADDRESS					Receipt #	Amount
Change of Address	Midland, TX 79702					
					Date Processed	
					Data Incomed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI		
TREASURER	Mr.	Caleb D.		IVII		
NAME	IVII.	Calco D.				
	NIO(ALANE					
	NICKNAME	LAST Richardson		SUFFIX		
		Richaruson				
• • • • • • • • • • • • • • • • • • • •	OTDEET ADDRESS (NO. D	20 00// 0/ 5405)		T / OLUTE // OLT) /	07.1	
6 CAMPAIGN TREASURER	STREET ADDRESS (NO P	O BOX PLEASE);	AP	T / SUITE #; CITY;	STAT	ΓΕ; ZIP CODE
ADDRESS	4173 Elma Dr					
(Residence or Business)						
	Midland, TX 79707					
7 CAMPAIGN	AREA CODE PHO	ONE NUMBER E	EXTENSION			
TREASURER	(806) 470-7876	JNE NOMBER E	LATENSION			
PHONE	(800) 470-7878					
8 REPORT						
TYPE	January 15	30th day before	e election	Runoff	15th day after cam	paign treasurer
				<u></u>	appointment (office	
	X July 15	8th day before	election	Exceeded modified reporting limit	Final Report (Attac	h C/OH-FR)
				Toporting innit		
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	01/01/2025	TH	HROUGH	06/30/202	25	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	f Pi	rimary	Runoff	Other	
		□□G	eneral	Special		
				ш		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT	(if known)	
	State Board Of Education	on District 15			(
		GO T	O PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 11

13 C / OH NAME	Kinsey, Aaron G. (The Honorable) 14 Filer ID 00086032				(Ethics Comr	nission Filers)			
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	These expenditures	accepted or political expenditu may have been made without i quired to report this information	the candidate's or office	eholder's kno	wledge or			
Additional Pages	COMMITTEE TYPE	COMMITTEE NAM	E						
_	GENERAL								
		COMMITTEE ADDI	RESS						
	SPECIFIC								
		COMMITTEE CAM	PAIGN TREASURER NAME						
		COMMITTEE CAM	PAIGN TREASURER ADDRES	SS					
16 CONTRIBUTION TOTALS 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)						0.00			
		CAL CONTRIBUTION PLEDGES, LOANS, (IS OR GUARANTEES OF LOANS	5)	\$	50.00			
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES					0.00			
	4. TOTAL POLITIC		\$	101,174.50					
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE		S MAINTAINED AS OF THE L	AST DAY OF THE	\$	515,153.63			
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	OF THE LAST DAY	\$	500,000.00					
17 AFFIDAVIT	•				-				
		t	swear, or affirm, under penalty rue and correct and includes a under Title 15, Election Code.						
			The Hono	rable Aaron G. Kinse	2 (/				
		-		Candidate or Officehol					
AFFIX NO	TARY STAMP / SEAL AB	OVE							
Sworn to and subs	cribed before me, by the s	aid		, this the		day			
			my hand and seal of office.						
Signature of office	cer administering	Printed name o	of officer administering	Title of officer	r administerir	ng oath			

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

	3 of 11								
18 FILI		ME aron G. (The Honorable)	19 Filer ID 00086032	(Ethics (Commission Filers)				
20 SCI NAI	HEDULI ME OF	SU	BTOTAL AMOUNT						
1.	X	\$	50.00						
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$					
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$					
4.	X	SCHEDULE E: LOANS		\$	500,000.00				
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$	101,174.50				
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$					
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$					
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$					
9.		\$							
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$					
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$					
12.		\$							

	MONETARY POLITICAL CONTRIBUTIONS		SCHEDULE A1
	The Instruction Guide explains how to complete this form.	1	Total pages Schedule A1: Sch: 1/1 Rpt: 4/11
2	FILER NAME Kinsey, Aaron G. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00086032
4	Date 03/13/2025 5 Full name of contributor out-of-state PAC (ID#:) Clark, Deanne 6 Contributor address; City; State; Zip Code	7	Amount of Contribution (\$) \$50.00
8	Lubbock, TX 79413 Principal occupation / Job title (See Instructions) Retired 9 Employer (See Instruction Retired	ns)	

	LOANS			SCHEDULE I	=		
	The Instruction	on Guide explains how to complete t	his form.	1 Total pages Schedule E: Sch: 1/1 Rpt: 5/11			
2	FILER NAME Kinsey, Aaron G	i. (The Honorable)		3 Filer ID (Ethics Commission Filers 00086032)		
4	TOTAL OF UN	IITEMIZED LOANS		\$			
5	Date of loan 06/30/2025	7 Name of lender out-of-sta	ate PAC (ID#:	9 Loan Amount (\$) \$500,000	0.00		
6	Is lender a financial institution?	8 Lender address; City; Sta	ate; Zip Code	10 Interest Rate			
	No	Midland, TX 79707		11 Maturity Date			
12	Principal occupation	on / Job title (See Instructions)	13 Employer (See Instru American Patrols	ictions)			
14	Description of Coll X None	ateral	15 Check if personal fur	nds were deposited into political account (See Instructions)			
16	GUARANTOR INFORMATION	17 Name of guarantor		19 Amount Guaranteed (\$)		
	X not applicable	18 Guarantor address; City; Sta	ate; Zip Code				
20	Principal occupation	on	21 Employer (See Instru	uctions)			
			I				

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

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services The Instruction Guide explai		Vages	/Contract Labor		OTHER (enter a	category not listed above)
1	Total pages Schedule F1:	2 FILER NAM	 E				3	Filer ID	(Ethics Commission Filers)
	Sch: 1/6 Rpt: 6/11		ron G. (The Honorable)					00086032	
4	Date	5 Payee name	,						
	01/13/2025	Amazon							
6	Amount (\$)	7 Payee addre	ess; City; Sta	ate; Zip Co	de				
	\$22.72	410 Terry <i>i</i>	Avenue North						
		Seattle, W	4 98109						
8	PURPOSE	(a) Category (s	See Categories listed at the top of this	schedule)	(b)	Description			
	OF EXPENDITURE	supplies						de of Texas. Com	
						Supplies	, TX,	officeholder living	expense
						supplies			
9	Complete ONLY if direct	Candidate/Of	ficeholder name	Office sou	aht			Office he	ald
9	expenditure to benefit C/O		icenoidei name	Office Sou	ynı			Office fie	au
H	Date	Payee name							
	06/26/2025	1	Young Campaign						
	Amount (\$)	Payee addre	ess; City; Sta	ate; Zip Co	de				
	\$10,000.00	PO Box 26	•	,					
	420,000.00	1 0 Box 20							
		Trinity, TX	75862						
	PURPOSE OF		See Categories listed at the top of this	schedule)	(b)	Description			
	EXPENDITURE		ns/Donations Made By	:		=		de of Texas. Comp officeholder living	
		Candidate/	Officeholder/Political Cor	nmittee					y Young Campaign.
						Campaignio	<i>.</i> 111 (io Dr. Addre	y roung Campaign.
_	Complete ONLY if direct	Candidate/Of	ficeholder name	Office sou	ght			Office he	eld
	expenditure to benefit C/OI	H							
	Date	Payee name	<u> </u>						
	03/11/2025	Edgerton S	Strategies						
	Amount (\$)	Payee addre	ess; City; Sta	ate; Zip Co	de				
	\$525.00	1540 Kelle	r Parkway #108-402						
		Keller, TX	76248						
	PURPOSE	(a) Category (S	See Categories listed at the top of this	schedule)	(b)	Description			
	OF EXPENDITURE	website ex	pense			ш		de of Texas. Com	
						website expe		officeholder living	expense
						Menaile exhe	ııst	•	
_	Complete ONLY if direct	Candidate/Of	ficeholder name	Office sou	ght			Office he	eld
	expenditure to benefit C/OI				J				
l									

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I 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: 2/6 Rpt: 7/11	Kinsey, Aaron G. (The Honorable) 00086032
4	Date	5 Payee name
	01/13/2025	FedEx
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$70.35	4210 82nd St
		Lubbock, TX 79423
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Thank You Cards
		Thank rod Gards
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	02/03/2025	Google
H	Amount (\$)	Payee address; City; State; Zip Code
	\$38.63	1600 Amphitheatre
		Mountain View, CA 94043
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	email expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		email expense
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	03/03/2025	Google
H	Amount (\$)	Payee address; City; State; Zip Code
	\$46.05	1600 Amphitheatre
		Mountain View, CA 94043
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	email expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense email expense
		Giriali expense
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
\vdash		
I		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officenoider/Politica	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 3/6 Rpt: 8/11	Kinsey, Aaron G. (The Honorable) 00086032
4	Date	5 Payee name
	04/02/2025	Google
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$46.05	1600 Amphitheatre
		Mountain View, CA 94043
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	email Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		email
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	05/02/2025	Google
	Amount (\$)	Payee address; City; State; Zip Code
	\$46.05	1600 Amphitheatre
		·
		Mountain View, CA 94043
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	email Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		email
	Complete ONLY if direct	Condidate/Office holder name Office country
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/02/2025	Google
	Amount (\$)	Payee address; City; State; Zip Code
	\$46.05	1600 Amphitheatre
		M1 -1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
		Mountain View, CA 94043
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description We have the complete Schedule T.
	EXPENDITURE	Website Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		website
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	1

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 form.
1	Total pages Schedule F1: Sch: 4/6 Rpt: 9/11	2 FILER NAME Kinsey, Aaron G. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00086032
4	Date 01/13/2025	5 Payee name HostGator
8	Amount (\$) \$20.23	7 Payee address; City; State; Zip Code 5005 Mitchelldale Unit 100 Houston, TX 77092 (a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Website expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Website expense
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 01/13/2025	Payee name HostGator
	Amount (\$) \$38.12	Payee address; City; State; Zip Code 5005 Mitchelldale Unit 100 Houston, TX 77092
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Website expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Website expense
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 01/13/2025	Payee name HostGator
	Amount (\$) \$14.95	Payee address; City; State; Zip Code 5005 Mitchelldale Unit 100 Houston, TX 77092
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Website (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense website
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica		mittee Legal Services			se s/Contract Labor		OTHER (enter a	trict category not listed a	bove)	
	Credit Card Payment	dit Card Payment The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commiss	sion Filers)	
	Sch: 5/6 Rpt: 10/11		Kinsey, Aaron G. (The Ho	onorable)				00086032			
4	Date	5	Payee name								
	05/26/2025		LJ Francis for Texas								
6	Amount (\$)	7	Payee address; City;	State; Zip Co	ode						
	\$90,000.00		4833 Saratoga Blvd #114								
			•								
			Corpus Christi, TX 78413								
8	PURPOSE	⊢	<u> </u>		(h)	Description					
Ü	OF	(a)	Category (See Categories listed a Contributions/Donations I		(5)	Description Check if travel of	outsi	de of Texas. Com	olete Schedule T.		
	EXPENDITURE		Candidate/Officeholder/P					officeholder living			
						Campaign loa	an t	to LJ Francis	for Texas		
9	Complete ONLY if direct		andidate/Officeholder name	Office sou	ught			Office he	eld		
	expenditure to benefit C/OI	Н									
	Date		Payee name								
	03/10/2025		Mailchimp								
	Amount (\$)	H	Payee address; City;	State; Zip Co	ode						
	\$47.97		675 Ponce de Leon Ave I	NE .							
			Suite 5000								
			Atlanta, GA 30308								
	PURPOSE	⊢			(h)	Description					
	OF	(4)	Category (See Categories listed a email expense	at the top of this schedule)	(5)	_ `	outsi	de of Texas. Com	olete Schedule T.		
	EXPENDITURE		email expense			Check if Austin,	TX,	officeholder living	expense		
						email expens	е				
	Complete ONLY if direct expenditure to benefit C/OI		andidate/Officeholder name	Office sou	ught			Office he	eld		
	experiordine to berieff C/O										
	Date		Payee name								
	04/09/2025		Mailchimp								
	Amount (\$)		Payee address; City;	State; Zip Co	ode						
	\$47.97		675 Ponce de Leon Ave I	NE							
			Suite 5000								
			Atlanta, GA 30308								
	PURPOSE	(a)	Category (See Categories listed a	at the top of this schedule)	(b)	Description					
	OF EXPENDITURE		email expense	,		Check if travel of		de of Texas. Com			
	EXPENDITORE							officeholder living	expense		
						email expens	е				
	0 1. 0		P. L. 10		Ļ						
	Complete ONLY if direct expenditure to benefit C/OI		andidate/Officeholder name	Office sou	ught			Office he	ela		
	,										

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 cor	nplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 6/6 Rpt: 11/11	Kinsey, Aaron G. (The Honorable)	00086032
4 Date	5 Payee name	·
05/09/2025	Mailchimp	
6 Amount (\$)	7 Payee address; City; State; Zip Coo	de
\$47.97	675 Ponce de Leon Ave NE	
	Suite 5000	
	Atlanta, GA 30308	
8 PURPOSE OF	,	(b) Description
EXPENDITURE	email	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		email
9 Complete ONLY if direct	Candidate/Officeholder name Office sout	ht Office held
expenditure to benefit C/O	1	
Date	Payee name	
06/09/2025	Mailchimp	
Amount (\$)	Payee address; City; State; Zip Coo	de
\$47.97	675 Ponce de Leon Ave NE	
	Suite 5000	
	Atlanta, GA 30308	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	email	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		email
Complete ONLY if direct	Candidate/Officeholder name Office sout	ht Office held
expenditure to benefit C/OI	1	
Date	Payee name	
02/18/2025	Wordpress	
Amount (\$)	Payee address; City; State; Zip Cod	le
\$68.42	60 29th St #343	
	San Francisco, CA 94110	
PURPOSE OF	,	(b) Description
EXPENDITURE	website	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		website
Complete ONLY if direct	Candidate/Officeholder name Office sout	ht Office held
expenditure to benefit C/OI	1	