

**CANDIDATE / OFFICEHOLDER  
CAMPAIGN FINANCE REPORT**

**FORM C/OH  
COVER SHEET PG 1**

The C/OH Instruction Guide explains how to complete this form.			1 Filer ID (Ethics Commission Filers) 00089957	2 Total pages filed: 18		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST Kevin M.	MI	<b>OFFICE USE ONLY</b>		
	NICKNAME	LAST Jackson	SUFFIX Jr.	Date Received ELECTRONICALLY FILED 01/15/2026		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 1613 Catalan Rd.  Austin, TX 78748			Date Hand-delivered or Date Postmarked		
				Receipt #	Amount	
				Date Processed		
				Date Imaged		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR .....	FIRST Jennifer J.	MI			
	NICKNAME	LAST Jackson	SUFFIX			
6 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 1613 Catalan Rd.  Austin, TX 78748		APT / SUITE #;	CITY;	STATE;	ZIP CODE
7 CAMPAIGN TREASURER PHONE	AREA CODE      PHONE NUMBER      EXTENSION (737) 268-2621					
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)					
9 PERIOD COVERED	Month 08/21/2025	Day	Year	Month 12/31/2025	Day	Year
10 ELECTION	ELECTION DATE Month Day Year 03/03/2026		ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special			
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT (if known) State Board Of Education District 5		

**GO TO PAGE 2**

**CANDIDATE / OFFICEHOLDER REPORT:  
SUPPORT & TOTALS**

**FORM C/OH  
COVER SHEET PG 2**

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13 C / OH NAME	Jackson Jr., Kevin M. (Mr.)		14 Filer ID (Ethics Commission Filers) 00089957
15 NOTICE FROM POLITICAL COMMITTEE(S)	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.		
<input type="checkbox"/> Additional Pages	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME	
		COMMITTEE ADDRESS	
		COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)		\$ 0.00
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 3,657.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		\$ 0.00
	4. <b>TOTAL POLITICAL EXPENDITURES</b>		\$ 2,526.71
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 2,087.71
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 30.67

**17 AFFIDAVIT**

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Mr. Kevin M. Jackson Jr.

\_\_\_\_\_  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day  
of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

\_\_\_\_\_  
Signature of officer administering

\_\_\_\_\_  
Printed name of officer administering

\_\_\_\_\_  
Title of officer administering oath

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

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<b>18</b> FILER NAME	<b>19</b> Filer ID (Ethics Commission Filers) 00089957
Jackson Jr., Kevin M. (Mr.)	
<b>20</b> SCHEDULE SUBTOTALS	
NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 2,857.00
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 800.00
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. <input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 30.67
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 799.97
6. <input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 1,426.74
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9. <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 300.00
10. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12. <input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0.01

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/5 Rpt: 4/18
<b>2</b> FILER NAME Jackson Jr., Kevin M. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089957
<b>4</b> Date 11/02/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayres, Robert	<b>7</b> Amount of Contribution (\$) \$250.00
	<b>6</b> Contributor address; City; State; Zip Code  West Lake Hills, TX 78746-6429	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burke, Cecelia	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Austin, TX 78731-2806	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burke, Cecelia	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  Austin, TX 78731-2806	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Scott	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  Austin, TX 78703-4827	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Scott	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  Austin, TX 78703-4827	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/5 Rpt: 5/18
<b>2</b> FILER NAME Jackson Jr., Kevin M. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089957
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Candelaria, Noel	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78739-4811	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cobb, Gary	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  Austin, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coronado, Santiago	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code  Austin, TX 78731-4508	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DePalma, Richard	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code  Austin, TX 78739-1993	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeTullio, Michael	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Austin, TX 78749-2805	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/5 Rpt: 6/18
<b>2</b> FILER NAME Jackson Jr., Kevin M. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089957
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hyde, Catrina ..... <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78745-4950	<b>7</b> Amount of Contribution (\$) \$50.00
	<b>8</b> Principal occupation / Job title (See Instructions)	<b>9</b> Employer (See Instructions)
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kim, Patricia ..... Contributor address; City; State; Zip Code  Austin, TX 78727-6714	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marston, James ..... Contributor address; City; State; Zip Code  Austin, TX 78703-1645	Amount of Contribution (\$) \$50.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Barbara ..... Contributor address; City; State; Zip Code  Austin, TX 78745-4951	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neaves, Michael ..... Contributor address; City; State; Zip Code  Austin, TX 78748-5268	Amount of Contribution (\$) \$27.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/5 Rpt: 7/18
<b>2</b> FILER NAME Jackson Jr., Kevin M. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089957
<b>4</b> Date 10/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rutishauser, Robert ..... <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78731-6061	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>8</b> Principal occupation / Job title (See Instructions) <b>9</b> Employer (See Instructions)	
Date 11/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rutishauser, Robert ..... Contributor address; City; State; Zip Code  Austin, TX 78731-6061	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rutishauser, Robert ..... Contributor address; City; State; Zip Code  Austin, TX 78731-6061	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stanley, Alfred ..... Contributor address; City; State; Zip Code  Austin, TX 78703-2516	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, James ..... Contributor address; City; State; Zip Code  Austin, TX 78752-4124	Amount of Contribution (\$) \$50.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/5 Rpt: 8/18
<b>2</b> FILER NAME Jackson Jr., Kevin M. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089957
<b>4</b> Date 12/30/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zeller, Charles ..... <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78733-3243	<b>7</b> Amount of Contribution (\$) \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

<p><b>The Instruction Guide explains how to complete this form.</b></p>		<p><b>1</b> Total pages Schedule A2: Sch: 1/1 Rpt: 9/18</p>
<p><b>2</b> FILER NAME Jackson Jr., Kevin M. (Mr.)</p>		<p><b>3</b> Filer ID (Ethics Commission Filers) 00089957</p>
<p><b>4</b> TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS</p>		<p><b>\$</b></p>
<p><b>5</b> Date 10/07/2025</p>	<p><b>6</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Van Osdol, Scott</p> <p><b>7</b> Contributor address; City; State; Zip Code  Austin, TX 78745</p>	<p><b>8</b> Amount of contribution (\$) \$800.00</p> <p><b>9</b> In-kind contribution description Discount on photography and post-production services</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p><b>10</b> Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Photographer</p>		<p><b>11</b> Employer (FOR NON-JUDICIAL) (See instructions) Self</p>
<p><b>12</b> Contributor's principal occupation (FOR JUDICIAL)</p>		<p><b>13</b> Contributor's job title (FOR JUDICIAL) (See instructions)</p>
<p><b>14</b> Contributor's employer/law firm (FOR JUDICIAL)</p>		<p><b>15</b> Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>
<p><b>16</b> If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>		

## LOANS

**SCHEDULE E**

<p><b>The Instruction Guide explains how to complete this form.</b></p>		<p><b>1</b> Total pages Schedule E: Sch: 1/1 Rpt: 10/18</p>
<p><b>2</b> FILER NAME Jackson Jr., Kevin M. (Mr.)</p>		<p><b>3</b> Filer ID (Ethics Commission Filers) 00089957</p>
<p><b>4</b> TOTAL OF UNITEMIZED LOANS</p>		\$
<p><b>5</b> Date of loan 09/03/2025</p>	<p><b>7</b> Name of lender Stanley, Alfred</p> <p><input type="checkbox"/> out-of-state PAC (ID#:</p>	<p><b>9</b> Loan Amount (\$) \$30.67</p>
<p><b>6</b> Is lender a financial institution? No</p>	<p><b>8</b> Lender address; City; State; Zip Code Austin, TX 78763</p>	<p><b>10</b> Interest Rate 0</p> <p><b>11</b> Maturity Date 03/03/2026</p>
<p><b>12</b> Principal occupation / Job title (See Instructions) Political consultant</p>		<p><b>13</b> Employer (See Instructions) Self</p>
<p><b>14</b> Description of Collateral <input checked="" type="checkbox"/> None</p>		<p><b>15</b> Check if personal funds were deposited into political account <input type="checkbox"/> (See Instructions)</p>
<p><b>16</b> GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable</p>	<p><b>17</b> Name of guarantor .....</p> <p><b>18</b> Guarantor address; City; State; Zip Code</p>	<p><b>19</b> Amount Guaranteed (\$)</p>
<p><b>20</b> Principal occupation</p>		<p><b>21</b> Employer (See Instructions)</p>

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 1/4 Rpt: 11/18	2 FILER NAME Jackson Jr., Kevin M. (Mr.)	3 Filer ID (Ethics Commission Filers) 00089957
4 Date 12/31/2025	5 Payee name ActBlue	
6 Amount (\$) \$92.14	7 Payee address; City; State; Zip Code 366 Summer St  Sommerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Aggregated credit-card processing fees during reporting period
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/01/2025	Payee name Austin NAACP	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 1717 E 12th St  Austin, TX 78702	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ticket to event
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/12/2025	Payee name Diggs, Miles	
Amount (\$) \$375.00	Payee address; City; State; Zip Code 4017 Ayala Dr  Austin, TX 78725	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wages for campaign management
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 2/4 Rpt: 12/18	2 FILER NAME Jackson Jr., Kevin M. (Mr.)	3 Filer ID (Ethics Commission Filers) 00089957
4 Date 10/09/2025	5 Payee name Frost Bank	
6 Amount (\$) \$8.00	7 Payee address; City; State; Zip Code 111 W Houston St, Suite 100  San Antonio, TX 78205	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank service charge
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/03/2025	Payee name GoDaddy.com	
Amount (\$) \$30.67	Payee address; City; State; Zip Code 14455 N Hayden Rd Ste 100  Scottsdale, AZ 85260	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Domain name registration
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/05/2025	Payee name Google, Inc.	
Amount (\$) \$64.47	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy  Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Internet services	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign email and software license
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 3/4 Rpt: 13/18	2 FILER NAME Jackson Jr., Kevin M. (Mr.)	3 Filer ID (Ethics Commission Filers) 00089957
4 Date 11/05/2025	5 Payee name Google, Inc.	
6 Amount (\$) \$39.51	7 Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy  Mountain View, CA 94043	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Internet services	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign email and software license
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/03/2025	Payee name Slack Technologies, LLC	
Amount (\$) \$50.68	Payee address; City; State; Zip Code 415 Mission St, 3rd Floor  San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Internet services	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Collaboration platform
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/02/2025	Payee name Slack Technologies, LLC	
Amount (\$) \$34.83	Payee address; City; State; Zip Code 415 Mission St, 3rd Floor  San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Internet services	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Collaboration platform
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 4/4 Rpt: 14/18	2 FILER NAME Jackson Jr., Kevin M. (Mr.)	3 Filer ID (Ethics Commission Filers) 00089957	
4 Date 10/01/2025	5 Payee name Slack Technologies, LLC		
6 Amount (\$) \$4.67	7 Payee address; City; State; Zip Code 415 Mission St, 3rd Floor  San Francisco, CA 94105		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Internet services	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Collaboration platform	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

# UNPAID INCURRED OBLIGATIONS

## SCHEDULE F2

### 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 F2:	2 FILER NAME Sch: 1/1 Rpt: 15/18	3 Filer ID (Ethics Commission Filers) 00089957
4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS		\$
5 Date 10/23/2025	6 Payee name McCulloch, Mark	
7 Amount (\$) \$560.74	8 Payee address; City; State; Zip Code  REDACTED PER 254.0401, ELEC. CODE  Austin, TX 78741	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Logo design, name badges, lapel stickers
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/07/2025	Payee name Van Osdol, Scott	
Amount (\$) \$866.00	Payee address; City; State; Zip Code  REDACTED PER 254.0401, ELEC. CODE  Austin, TX 78745	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Photography and post-production services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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 G: Sch: 1/1 Rpt: 16/18	2 FILER NAME Jackson Jr., Kevin M. (Mr.)	3 Filer ID (Ethics Commission Filers) 00089957	
4 Date 11/24/2025	5 Payee name Texas Democratic Party		
6 Amount (\$) \$300.00  <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 314 E Highland Mall Blvd, Ste 508  Austin, TX 78752		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Filing fee for a place on primary ballot	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

**INTEREST, CREDITS, GAINS, REFUNDS, AND  
CONTRIBUTIONS RETURNED TO FILER****SCHEDULE K**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule K: Sch: 1/1 Rpt: 17/18
<b>2</b> FILER NAME Jackson Jr., Kevin M. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089957
<b>4</b> Date 09/30/2025	<b>5</b> Name of person from whom amount is received Google, Inc. .....  <b>6</b> Address of person from whom amount is received; City; State; Zip Code Mountain View, CA 94043	<b>8</b> Amount (\$) \$0.01
	<b>7</b> Purpose for which amount is received Account verification deposit for billing purposes	<input type="checkbox"/> Check if political contribution returned to filer

## TEXT ANNOTATION

Sch: 1/1 Rpt: 18/18

FILER NAME

Jackson Jr., Kevin M. (Mr.)

Filer ID (Ethics Commission Filers)

00089957

Schedule

E

Information entered by filer as a memo:

Consultant paid for domain name registration at GoDaddy.com reported on Schedule F1.