

**GENERAL-PURPOSE COMMITTEE
CAMPAIGN FINANCE REPORT**

**FORM GPAC
COVER SHEET PG 1**

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00085018	2 Total pages filed: 15				
3 COMMITTEE NAME Killen, Griffin & Farrimond Political Committee		OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/15/2026 Date Hand-delivered or Date Postmarked Receipt # <input type="text"/> Amount <input type="text"/> Date Processed Date Imaged					
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address							
ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 10101 Reunion Place Suite 250 San Antonio, TX 78216							
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.			FIRST Paul R.	MI		
	NICKNAME Rob	LAST Killen	SUFFIX				
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 10101 Reunion Place Suite 250 San Antonio, TX 78216		APT / SUITE #;	CITY;	STATE;	ZIP CODE	
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; 10101 Reunion Place Ste 250 San Antonio, TX 78216						
8 CAMPAIGN TREASURER PHONE	AREA CODE (210) 960-2750	PHONE NUMBER	EXTENSION				
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff						
10 PERIOD COVERED	Month 07/01/2025	Day	Year	Month 12/31/2025	Day	Year	
11 ELECTION	ELECTION DATE Month 11/04/2025	Day	Year	Primary <input type="checkbox"/> General	Runoff <input type="checkbox"/> Special	Other <input type="checkbox"/>	ELECTION TYPE

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**GENERAL-PURPOSE COMMITTEE REPORT:
PURPOSE AND TOTALS**

**FORM GPAC
COVER SHEET PG 2**

12 COMMITTEE NAME Killen, Griffin & Farrimond Political Committee		13 FILER ID (Ethics Commission Filer) 00085018
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	Ms. Ivalis Meza Gonzalez City of San Antonio District 8, Councilwoman
15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 7,200.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 11,500.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 2,649.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

16 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. Paul R. Killen

Signature of Campaign Treasurer

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 oath

Printed name of officer administering oath

Title of officer administering oath

**GENERAL-PURPOSE COMMITTEE REPORT:
PURPOSE**

**FORM GPAC
ADDENDUM**

Page 3 of 15

12 COMMITTEE NAME Killen, Griffin & Farrimond Political Committee		13 FILER ID (Ethics Commission Filers) 00085018
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	Mr. Marc Whyte City of San Antonio District 10, Councilman
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported B. Opposed
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	Ms. Phyllis Viagran City of San Antonio District 3, Councilwoman
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	Ms. Misty Spears City of San Antonio District 9, Councilwoman

**GENERAL-PURPOSE COMMITTEE REPORT:
PURPOSE**

**FORM GPAC
ADDENDUM**

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12 COMMITTEE NAME Killen, Griffin & Farrimond Political Committee		13 FILER ID (Ethics Commission Filers) 00085018
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	Dr. Sukh Kaur City of San Antonio District 1, Councilwoman
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported B. Opposed
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	Mr. Tommy Calvert Bexar County Commissioner, Precinct 4
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	Ms. Rebeca Clay-Flores Bexar County Commissioner, Precinct 1

**GENERAL-PURPOSE COMMITTEE REPORT:
PURPOSE**

**FORM GPAC
ADDENDUM**

Page 5 of 15

12 COMMITTEE NAME Killen, Griffin & Farrimond Political Committee		13 FILER ID (Ethics Commission Filers) 00085018
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	Mr. Ken King State Representative
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	Judge Peter Sakai Bexar County Judge
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	Mr. Grant Moody Bexar County Commissioner, Precinct 3

SUBTOTALS - GPAC**FORM GPAC**
COVER SHEET PG 3
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17 COMMITTEE NAME Killen, Griffin & Farrimond Political Committee	18 FILER ID (Ethics Commission Filers) 00085018
19 SCHEDULE SUBTOTALS	
NAME OF SCHEDULE	
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 7,200.00
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0.00
3. <input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
4. <input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5. <input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6. <input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7. <input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8. <input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9. <input type="checkbox"/> SCHEDULE E: LOANS	\$
10. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 11,500.00
11. <input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
12. <input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$ 0.00
13. <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
14. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 1/4 Rpt: 7/15
2 FILER NAME Killen, Griffin & Farrimond Political Committee			3 Filer ID (Ethics Commission Filers) 00085018
4 Date 07/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farrimond, Ashley	7 Amount of Contribution (\$) \$400.00	
	6 Contributor address; City; State; Zip Code San Antonio, TX 78216		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Killen, Griffin & Farrimond	
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farrimond, Ashley	Amount of Contribution (\$) \$400.00	
	Contributor address; City; State; Zip Code San Antonio, TX 78216		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Killen, Griffin & Farrimond	
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farrimond, Ashley	Amount of Contribution (\$) \$400.00	
	Contributor address; City; State; Zip Code San Antonio, TX 78216		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Killen, Griffin & Farrimond	
Date 10/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farrimond, Ashley	Amount of Contribution (\$) \$400.00	
	Contributor address; City; State; Zip Code San Antonio, TX 78216		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Killen, Griffin & Farrimond	
Date 11/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farrimond, Ashley	Amount of Contribution (\$) \$400.00	
	Contributor address; City; State; Zip Code San Antonio, TX 78216		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Killen, Griffin & Farrimond	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 2/4 Rpt: 8/15
2 FILER NAME Killen, Griffin & Farrimond Political Committee			3 Filer ID (Ethics Commission Filers) 00085018
4 Date 12/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farrimond, Ashley 6 Contributor address; City; State; Zip Code San Antonio, TX 78216	7 Amount of Contribution (\$) \$400.00	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Killen, Griffin & Farrimond	
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, James Contributor address; City; State; Zip Code San Antonio, TX 78216	Amount of Contribution (\$) \$400.00	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Killen, Griffin & Farrimond	
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, James Contributor address; City; State; Zip Code San Antonio, TX 78216	Amount of Contribution (\$) \$400.00	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Killen, Griffin & Farrimond	
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, James Contributor address; City; State; Zip Code San Antonio, TX 78216	Amount of Contribution (\$) \$400.00	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Killen, Griffin & Farrimond	
Date 10/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, James Contributor address; City; State; Zip Code San Antonio, TX 78216	Amount of Contribution (\$) \$400.00	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Killen, Griffin & Farrimond	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/4 Rpt: 9/15
2 FILER NAME Killen, Griffin & Farrimond Political Committee		3 Filer ID (Ethics Commission Filers) 00085018
4 Date 11/06/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, James	7 Amount of Contribution (\$) \$400.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78216	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Killen, Griffin & Farrimond
Date 12/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, James	Amount of Contribution (\$) \$400.00
	Contributor address; City; State; Zip Code San Antonio, TX 78216	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Killen, Griffin & Farrimond
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Killen, Paul (Rob)	Amount of Contribution (\$) \$400.00
	Contributor address; City; State; Zip Code San Antonio, TX 78216	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Killen, Griffin & Farrimond, PLLC
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Killen, Paul (Rob)	Amount of Contribution (\$) \$400.00
	Contributor address; City; State; Zip Code San Antonio, TX 78216	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Killen, Griffin & Farrimond, PLLC
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Killen, Paul (Rob)	Amount of Contribution (\$) \$400.00
	Contributor address; City; State; Zip Code San Antonio, TX 78216	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Killen, Griffin & Farrimond, PLLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/4 Rpt: 10/15
2 FILER NAME Killen, Griffin & Farrimond Political Committee		3 Filer ID (Ethics Commission Filers) 00085018
4 Date 10/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Killen, Paul (Rob) 6 Contributor address; City; State; Zip Code San Antonio, TX 78216	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Killen, Griffin & Farrimond, PLLC
Date 11/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Killen, Paul (Rob) Contributor address; City; State; Zip Code San Antonio, TX 78216	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Killen, Griffin & Farrimond, PLLC
Date 12/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Killen, Paul (Rob) Contributor address; City; State; Zip Code San Antonio, TX 78216	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Killen, Griffin & Farrimond, PLLC

PLEDGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.			
2 FILER NAME Killen, Griffin & Farrimond Political Committee		1 Total pages Schedule B: Sch: 1/1 Rpt: 11/15	
4 TOTAL OF UNITEMIZED PLEDGES		\$ 0.00	
5 Date	6 Full name of pledgor 7 Pledgor Address; City; State; Zip Code	8 Amount of pledge (\$)	9 In-kind description (If applicable) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
10 Principal occupation / Job title (See Instructions)		11 Employer (See Instructions)	

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: 12/15	2 FILER NAME Killen, Griffin & Farrimond Political Committee	3 Filer ID (Ethics Commission Filers) 00085018
4 Date 10/15/2025	5 Payee name Calvert, Tommy (Commissioner)	
6 Amount (\$) \$2,500.00	7 Payee address; City; State; Zip Code 101 W. Nueva Ste. 1029 San Antonio, TX 78205	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(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 Contribution to Tommy Calvert Campaign, for Bexar County Commissioner, Precinct 4
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/09/2025	Payee name Clay Flores, Rebeca (Commissioner)	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 101 W. Nueva Ste. 1009 San Antonio, TX 78205	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(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 Contribution to Rebeca Clay-Flores Campaign, for Bexar County Commissioner, Precinct
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/30/2025	Payee name Kaur, Sukh (Dr.)	
Amount (\$) \$500.00	Payee address; City; State; Zip Code City Hall 100 Military Plaza San Antonio, TX 78205	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(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 Contribution to Sukh Kaur Campaign, for San Antonio City Council District 1
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: 13/15	2 FILER NAME Killen, Griffin & Farrimond Political Committee	3 Filer ID (Ethics Commission Filers) 00085018
4 Date 12/01/2025	5 Payee name King, Ken (Rep.)	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code PO Box 507 Canadian, TX 79014	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(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 Contribution to Representative Ken King, Texas District 88
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/01/2025	Payee name Meza Gonzalez, Ivalis (Ms.)	
Amount (\$) \$500.00	Payee address; City; State; Zip Code City Hall 100 Military Plaza San Antonio, TX 78205	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(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 Contribution to Ivalis Meza Gonzalez Campaign, for San Antonio City Council District 8
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/21/2025	Payee name Moody, Grant (Commissioner)	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 101 W. Nueva, Ste. 1007 10th Floor San Antonio, TX 78205	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(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 Contribution to Grant Moody Campaign, for Bexar County Commissioner, Precinct 3
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: 14/15	2 FILER NAME Killen, Griffin & Farrimond Political Committee	3 Filer ID (Ethics Commission Filers) 00085018
4 Date 12/16/2025	5 Payee name Sakai, Peter (Judge)	
6 Amount (\$) \$1,000.00	7 Payee address; City; 101 W. Nueva 10th Floor San Antonio, TX 78205	State; Zip Code
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(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 Contribution to Judge Peter Sakai Campaign, for Bexar County Judge
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/10/2025	Payee name Spears, Misty (Ms.)	
Amount (\$) \$500.00	Payee address; City; City Hall 100 Military Plaza San Antonio, TX 78205	State; Zip Code
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(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 Contribution to Misty Spears Campaign, for San Antonio City Council District 9
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/10/2025	Payee name Viagran, Phyllis (Ms.)	
Amount (\$) \$500.00	Payee address; City; 100 Military Plaza San Antonio, TX 78205	State; Zip Code
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(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 Contribution to Phyllis Viagran Campaign, for San Antonio City Council District 3
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: 15/15	2 FILER NAME Killen, Griffin & Farrimond Political Committee	3 Filer ID (Ethics Commission Filers) 00085018
4 Date 08/20/2025	5 Payee name Whyte, Marc (Mr.)	
6 Amount (\$) \$500.00	7 Payee address; City; City Hall 100 Military Plaza San Antonio, TX 78205	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(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 Contribution to Marc Whyte Campaign, for San Antonio City Council District 10
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held