CANDIDAT CAMPAIGN	FORM C/OH COVER SHEET PG 1						
The C/OH Instruction	Guide explains how to complete thi	s form.		2 Total pages filed: 24			
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRS		MI	OFFICE USE ONLY			
	NICKNAME LAST Hayo		SUFFIX	Date Received TV ELECTIONS ROLL STREET TO THE PROPERTY OF THE			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUIT P.O. Box 529	E#; CITY;	ZIP CODE	Receipt # 24 pg Amount			
Change of Address	Splendora, TX 77372		·	Date Processed Date Imaged			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRS	Т	MI	<u> </u>			
	NIG. DE NICKNAME LAST	reg vu	SUFFIX				
6 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX F	PLEASE); APT	/ SUITE#; CITY;	STATE; ZIP CODE			
(Residence or Susiness)	9830 Fostoria Ro	1. Clovola	nd. Tx 773	J8			
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUM 819 - 797 - 21090	BER EXTENSION	<i></i>				
3 REPORT TYPE	X January 15 30tl	day before election	Runoff Exceeded modified reporting limit	15th day after campaign treasurer appointment (officeholder only) Final Report (Attach C/OH-FR)			
PERIOD COVERED	Month Day Year 07/11/2024	THROUGH	Month Day 12/31/2024	Year			
LO ELECTION	ELECTION DATE Month Day Year	Primary General	ELECTION TYPE Runoff Special	Other			
1 OFFICE	OFFICE HELD (if any) Place Pct. 4 District Constable N	Montgomery	12 OFFICE SOUGHT (i	if known)			
GO TO PAGE 2							

CANDIDATE / OFFICEHOLDER REPORT:

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

SUPPORT	& IUIALS				2 of 24	
13 C / OH NAME	Hayden, Kenneth		14 Filer ID			
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expendit These expenditures may have been made without d officeholders are required to report this information	the candidate's or officei	holder's kr	now <u>ledge</u> or	
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		,		
<u> </u>	GENERAL					
		COMMITTEE ADDRESS				
	SPECIFIC					
		COMMITTEE CAMPAIGN TREASURER NAME			:	
	and the same of th	COMMITTEE CAMPAIGN TREASURER ADDRE	SS			
and the same	man american					
16 CONTRIBUTION TOTALS		L ZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$	0.00	
	2. TOTAL POLITIC (OTHER THAN F	S)	\$	0.00		
EXPENDITURE TOTALS	3. TOTAL UNITEMI	ZED POLITICAL EXPENDITURES	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	\$	0.00	
	4. TOTAL POLITIC	AL EXPENDITURES	18. U.A.19. (19. 19. 19. 19. 19. 19. 19. 19. 19. 19.	\$	23,117.05	
CONTRIBUTION BALANCE	5. TOTAL POLITICA REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$	260,378.98	
OUTSTANDING LOAN TOTALS	6, TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$	0.00	
17 AFFIDAVIT	PATRICIA JEAN MILLE Notary ID #1127055 My Commission Expir January 25, 2026	Keeren Z		be report		
	cribed before me, by the sa , 20, to ce	Il and Il Mandon	, this the	15 th	day	
Signature of office	cer administering	Printed name of officer administering	Title of officer	administer	ring oath	

FORM C/OH SUBTOTALS - C/OH **COVER SHEET PG 3** 3 of 24 **18 FILER NAME** 19 Filer ID Hayden, Kenneth 20 SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS 2. \$ SCHEDULE B: PLEDGED CONTRIBUTIONS \$ 4. SCHEDULE E: LOANS \$ 5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 23,117.05 \$ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$ SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS 9. \$ SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 10. \$ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 12. \$ TO FILER

SCHEDULE F1

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

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 Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category pot listed above)

	Candidate/Officeholder/Politica Credit Card Payment	al Comr		egal Services The Instruction Gui			-	s/Contract Labor ete this form.		OTHER (enter a category	y not listed above)
1	Total pages Schedule F1:	2 F	-ILER NAME						3	Filer ID	
	Sch: 1/21 Rpt: 4/24		⊣ayden, Ker	neth							
4	Date	1	ayee name								
	11/14/2024	1	L836 Steakh	ouse							
6	Amount (\$)	7 F	ayee addres	s; City;	State; Z	Zip Co	de				
	\$156.94	2	2641 11th St								
			Huntsville, T	X 77340							
8	PURPOSE OF			Categories listed at the	top of this schedul	ile)	(b)	Description	s.d.	Campalata Ca	
	EXPENDITURE	F	Food/Bevera	ge Expense						le of Texas. Complete Sc officeholder living expens	
	!									able Continuing E	
ļ	!										
9	Complete ONLY if direct expenditure to benefit C/OF		ındidate/Office	eholder name	Offic	ce soug	ght			Office held	
	Date	Р	ayee name								
	12/10/2024	Į	AT&T								
	Amount (\$)	Р	ayee address	s; City;	State; Z	Zip Coo	de				
	\$81,18	1	.6778 Inters	tate 45 South							
			Conroe, TX 7		-,1,1					*****	
	PURPOSE OF			Categories listed at the	top of this schedul	le)	(b)	Description	tale!	Tower Complete Sel	Ladde T
	EXPENDITURE	<u> </u>	Event Expens	se				<u> </u>		le of Texas. Complete Scl officeholder living expens	
								<u> </u>		e Christmas luncl	
	Complete ONLY if direct expenditure to benefit C/OF		ndidate/Office	eholder name	Offic	ce soug	jht			Office held	
	Date	Р	ayee name	*************************************							
	09/10/2024	l .	pricity Foun	dation							
	Amount (\$)	P:	ayee address	; City;	State; Z	ip Cod	de				
	\$316.22		-	336 W., Ste. 1	-						
		С	conroe, TX 7	7304							
	PURPOSE	(a) C	ategory (See	Categories listed at the	top of this scheduk	le)	(b)	Description			
	OF EXPENDITURE			/Donations Mad				느		e of Texas, Complete Sci	
			andidate/Oi	ficeholder/Polition	cai Committe) e		table sponsor		officeholder living expense	e
								more specific			
	Complete ONLY if direct	Car	ndidate/Office	holder name	Offic	ce soug	 ht			Office held	
	expenditure to benefit C/OH						1				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense

Consulting Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Food/Beverage Expense

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

Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District OTHER (enter a category not listed above) Legal Services Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID Sch: 2/21 Rpt: 5/24 Hayden, Kenneth 4 Date Payee name 10/01/2024 **CPFA** 6 Amount (\$) Payee address; City; State: Zip Code \$650.00 P.O. Box 306 Conroe, TX 77305 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas, Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense golf tournament sponsor Complete ONLY if direct Candidate/Officeholder name Office held Office sought expenditure to benefit C/OH Date Payee name Caney Creek Cowboy Church 07/22/2024 Amount (\$) Payee address; City; State; Zip Code \$200.00 17703 Nonesuch Rd. Conroe, TX 77306 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas, Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee raffle Complete ONLY if direct Candidate/Officeholder name Office held Office sought expenditure to benefit C/OH Date Payee name 10/27/2024 Caney Creek Cowboy Church Amount (\$) Payee address; City; State; Zip Code \$1,500.00 17703 Nonesuch Rd. Conroe, TX 77306 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas, Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Youth fundraiser Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

Advartising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID	_
	Sch: 3/21 Rpt: 6/24	Hayden, Kenneth	
4	Date	5 Payee name	
	11/16/2024	Caney Creek Wrestling Booster	
6	Amount (\$) \$350.00	7 Payee address; City; State; Zip Code 13470 FM 1485 Conroe, TX 77306	,
8		(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense sponsor	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	-
 _	10/01/2024	Charleston Wrap	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$161.65	321 Anderson Rd.	
_	DUDDOGE	Walterboro, SC 29488	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	
_	1.0/03/2024	Chubby Packing Company	
	Amount (\$) \$948.37	Payee address; City; State; Zip Code 2201 TX-105	
		Liberty, TX 77575	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense EMC Fair Steer processing	
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held	

SCHEDULE F1

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

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 Selarise Magnet/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pot listed above)

	Credit Card Payment	The Instruction Guide explains how to co	_	lete this form.		
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID		
	Sch: 4/21 Rpt: 7/24	Hayden, Kenneth				
4	Date	5 Payee name				
	12/19/2024	Dollar General				
6	Amount (\$)	7 Payee address; City; State; Zip C	ode			
	\$17.32	23412 FM 1485				
		New Caney, TX 77357				
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description Country Strate T		
	EXPENDITURE	Gift/Awards/Memorials Expense		Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense		
				wrapping paper for adopted family for Christmas		
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ught	Office held		
	superiorite to periorit 0.0					
	Date	Payee name				
	09/11/2024	EMCFA				
	Amount (\$)	Payee address; City; State; Zip Co	ode			
	\$450.00	P.O. Box 704				
	*******	Porter, TX 77365				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description Check if travel outside of Texas. Complete Schedule T.		
	EXPENDITURE	Event Expense		Check if Austin, TX, officeholder living expense		
				BBQ cook-off sponsor		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ıght	Office held		
	experientale to beliefit C/OI	1				
	Date	Payee name				
	11/20/2024	EMCFA				
	Amount (\$)	Payee address; City; State; Zip Co	ode			
	\$8,111.63	P.O. Box 704				
		Porter, TX 77365				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description		
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee		Check if travel outside of Texas, Complete Schedule T, Check if Austin, TX, officeholder living expense		
		Garialiaco Ginocifolaci) i Giniga Committee		youth livestock auction		
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ıght	Office held		
	expenditure to benefit C/OF	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: 5/21 Rpt: 8/24	Hayden, Kenneth				
4	Date	5 Payee name				
	08/26/2024	EMCID				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$103.50	21575 US-59 #200				
		New Caney, TX 77357				
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense				
		fundraiser				
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/O	T				
Ţ,	Date	Payee name				
	10/09/2024	EMCID				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$59.27	21575 US-59 #200				
		New Caney, TX 77357				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Taylor Complete Schedule T				
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
		Law Enforcement banquet tickets				
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held				
	experialiture to benefit C/Or					
	Date	Payee name				
	10/16/2024	H-Town Dream Center				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$250.00	26373 E. Holly Ln.				
		Splendora, TX 77372				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made Ry Check if travel outside of Texas. Complete Schedule T.				
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
		golf tournament sponsor				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held				

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	al Committee Leg	/Awards/Memorials Expense pal Services e Instruction Guide explain		iges/Contract Labor	Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2 FILER NAME				3 Filer ID	
	Sch: 6/21 Rpt: 9/24	Hayden, Kenn	eth				
4	Date	5 Payee name			•		
	10/09/2024	Hernandez, Aı	na (Miss)				
6	Amount (\$)	7 Payee address;	City; Stat	e; Zip Cod	e		
	\$100.00	15929 Enloe S	St.				
		Splendora, TX	77372				
8	PURPOSE	(a) Category (See C	ategories listed at the top of this se	chedule) (b) Description		
	OF EXPENDITURE		Donations Made By	l	<u></u>	outside of Texas. Complete Schedule T,	
		Candidate/Offi	ceholder/Political Com	mittee [ш	, TX, officeholder living expense	
					flag sponsor		
_	O	0 11 405		0.00		0.00	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeh	older name	Office soug	nt	Office held	
	Date	Payee name					
	08/06/2024	Hernandez, Ki	mberly (Miss)				
	Amount (\$)	Payee address;	City; Stat	e; Zip Cod	e		
	\$500.00	Fostoria Rd.					
		Cleveland, TX	77328				
	PURPOSE	(a) Category (See C	ategories listed at the top of this so	chedule) (b) Description		
	OF EXPENDITURE	Salaries/Wage	s/Contract Labor		lt	outside of Texas. Complete Schedule T.	
						.TX, officeholder living expense nize campaign signs	
					cican a organ	nze oampaigh signs	
	Complete ONLY if direct	Candidate/Officeh	alder name	Office sough	nt .	Office held	
	expenditure to benefit C/O		older Hame	Office sough	ı	Office field	
	Date	Payee name					
	10/24/2024	La Casita					
	Amount (\$)	Payee address;	City; State	e; Zip Cod	9		
	\$250.00	23355 FM 131	•	o, <u>Lip 00u</u>			
	4200,00	200007101101	т				
		Porter, TX 773	65				
	PURPOSE	(a) Category (see Co	ategories listed at the top of this so	shedule) ((Description	•	
	OF	Food/Beverage		incutic, [outside of Texas. Complete Schedule T.	
	EXPENDITURE		Tr	i	Check if Austin,	TX, officeholder living expense	
					dinner for EM	C Senior Center	
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeh	older name	Office sough	nt	Office held	
	enponditure to belieft G/Of	-1-7					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic	Event Expense Loan Repayment/Reimbursemen Fees Office Overhead/Rental Expense Food/Beverage Expense Polfing Expense Folft/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	t Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1			3 Filer ID
L	Sch: 7/21 Rpt: 10/24	Hayden, Kenneth	
4	Date	5 Payee name	
	11/05/2024	La Casita	
6	Amount (\$) \$255.74	7 Payee address; City; State; Zip Code 23355 FM 1314 Porter, TX 77365	
8	PURPOSE OF EXPENDITURE	Check if Aus	el outside of Texas, Complete Schedule T. tin, TX, officeholder living expense mpaign watch party dinner
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	07/11/2024	Landsdowne Moody	
	Amount (\$) \$999.99	Payee address; City; State; Zip Code 12288 US-59 Bus.	
	NA COL	Splendora, TX 77372	
,	PURPOSE OF EXPENDITURE	Check if Aus	el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense or hurricane relief for hurricane victims
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date 08/12/2024	Payee name Marble Slab Creamery	
	Amount (\$) \$1.09.98	Payee address; City; State; Zip Code 22118 Market Pl. Dr., Ste. 300 New Caney, TX 77357	
	PURPOSE	· · · · · · · · · · · · · · · · · · ·	
	OF EXPENDITURE	Check if Aust	el outside of Texas, Complete Schedule T. tin, TX, officeholder living expense e for New Caney Progress Show
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

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

	Contributions/ Donations Made E Candidate/Officeholder/Politic Credit Card Payment	l Committee Legal Services	ials Expense Printing	Expen s/Wage	se s/Contract Labor	Travel Out of District OTHER (enter a category not listed above)	
Ļ	Total magne Calculula E1.		Calue explains now to	Compi	-	6 F2- 12	_
ľ	Total pages Schedule F1:					3 Filer ID	
	Sch: 8/21 Rpt: 11/24	Hayden, Kenneth					
4	Date	5 Payee name					
	08/16/2024	Marble Slab Creamery					
6	Amount (\$)	7 Payee address; City;	State; Zip (Code	·		_
l	\$109.98	22118 Market Pl. Dr., Ste	e. 300				
		Now Copey TV 772E7					
L	·	New Caney, TX 77357					
8	PURPOSE OF	(a) Category (See Categories listed		(b)	Description		
	EXPENDITURE	Food/Beverage Expense				utside of Texas. Complete Schedule T.	
					ш	TX, officeholder living expense or Splendora Progress Show	
					COOKIE CAKE IC	i Spiendora Progress Show	
Ļ				Щ.			
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name	Office so	ought		Office held	
	experience to perience of						
	Date	Payee name					
	10/18/2024	Max Marketing					
	Amount (\$)	Payee address; City;	State; Zip C	Code	*****		_
	\$173,20	116 W. Lewis St.	outo, mp	3040			
	4110,20	LIO W. LOWIS St.					
		Conroe, TX 77301					
	PURPOSE	(a) Category (See Categories listed	at the top of this schedule)	(b)	Description		
	OF EXPENDITURE	Printing Expense			<u> </u>	utside of Texas. Complete Schedule T.	
					_	FX, officeholder living expense	
					campaign butt	ons	
							_
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name	Office so	ought		Office held	
	- Appointment of the portion of the						
	Date	Payee name					
	09/13/2024	Men's Wearhouse					
	Amount (\$)	Payee address; City;	State; Zip C	Code	· · · · · · · · · · · · · · · · · · ·	6	_
	\$226.24	20125 US-59	, ,				
			•				
		11 11 77/ 77000					
		Humble, TX 77338					
	PURPOSE	(a) Category (See Categories listed	at the top of this schedule)	(b)	Description		_
	OF EXPENDITURE	Event Expense			<u> </u>	atside of Texas, Complete Schedule T.	
	·					TX, officeholder living expense	
					ciotnes for ival	ional Constable Convention	
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name	Office so	ught		Office held	
	experience to perient O/Or						
							

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
Ciff/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

Contributions/ Donations Made E Candidate/Officeholder/Politic Credit Card Payment	
1 Total pages Schedule F1: Sch: 9/21 Rpt: 12/24	2 FILER NAME Hayden, Kenneth
4 Date 09/13/2024	5 Payee name Men's Wearhouse
6 Amount (\$) \$326.89	7 Payee address; City; State; Zip Code 20125 US-59
	Humble, TX 77338
8 PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense clothes for National Constable Convention
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date 08/15/2024	Payee name Microsoft
Amount (\$) \$108.24	Payee address; City; State; Zip Code One Microsoft Way Redmond, WA 98052
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Microsoft software
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date 09/11/2024	Payee name Montgomery High School Choir
Amount (\$) \$250.00	Payee address; City; State; Zip Code 22825 TX-105
	Montgomery, TX 77356
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense sponsor
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) 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/Fundralsing Expense Transportation Equipment & Related Expense Travel in District
Travel Out of District
OTHER (enter a cate

Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID
Sch: 10/21 Rpt: 13/24	Hayden, Kenneth
4 Date	5 Payee name
10/27/2024	Moore, Crystal
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$320.00	17106 Leon Ct.
	Splendora, TX 77372
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Candidate/Officeholder/Political Committee
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/C	н
Date	Payee name
11/15/2024	Mr. Hamburger
Amount (\$)	Payee address; City; State; Zip Code
\$28.03	918 11th St.
	Huntsvilleq, TX 77340
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas, Complete Schedule T.
	Check if Austin, TX, officeholder living expense dinner for Constable Continuing Education
	diffiner for Constable Continuing Education
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	H
Date	Payee name
09/20/2024	National Constable Association
Amount (\$)	Payee address; City; State; Zip Code
\$180.00	1244 Texas Avenue
	Shreveport, LA 71101
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Categories instead at the top of miss scriedule) Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	National Constable Convention materials
Complete ONLY if disect	Candidate/Officebolder name
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
- 1410	

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
Gilt/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
OTHER Capture a graphon pat listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID	
	Sch: 11/21 Rpt: 14/24	Hayden, Kenneth	
4	Date	5 Payee name	_
	11/18/2024	Oakwood Lodge #1444	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$320.00	8314 TX-242	
		Conroe, TX 77385	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas, Complete Schedule T.	
		Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense pork butt fundraiser	
		poik but iditalise	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
,	expenditure to benefit C/OI		
	Data		
	Date 09/18/2024	Payee name Ole Red	
		111 111 111	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$86.09	511 Parkway	
		Gatlinburg, TN 37738	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check If Austin, TX, officeholder living expense	
		dinner at National Constable Convention	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI		
	Date	Payee name	_
	09/20/2024	Ole Red	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$64.07	511 Parkway	
	75 1101		
		Gatlinburg, TN 37738	
	PURPOSE		
	OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		lunch at National Constable Convention	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OF		

SCHEDULE F1

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

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 Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
OTHER (enter a category not listed above)

Contributions/ Donations Made Candidate/Officeholder/Politi Credit Card Payment								
1 Total pages Schedule F1: Sch: 12/21 Rpt: 15/24	2 FILER NAME Hayden, Kenneth							
4 Date 10/27/2024	Payee name On Point Rescue							
6 Amount (\$) \$100.00	Payee address; City; State; Zip Code 16340 Spivey St. Splendora, TX 77372							
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 Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense raffle							
Complete ONLY if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held H							
Date 09/19/2024	Payee name Pancake Pantry							
Amount (\$) \$25.69	Payee address; City; State; Zip Code 628 Parkway Gatlinburg, TN 37738							
PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder fiving expense breakfast at National Constable Convention							
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H							
Date 09/20/2024	Payee name Paula Deens							
Amount (\$) \$200.00	Payee address; City; State; Zip Code 903 Parkway #102							
	Gatlinburg, TN 37738							
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense dinner at National Constable Convention							
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held							
•								

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memorials Expense Legal Services The Instruction Guide explain		Wage:	s/Contract Labor	Travel Out of District OTHER (enter a category not listed above))
1	Total pages Schedule F1:	2 FILED NAM	<u> </u>			3	Filer ID	
Ĺ	Sch: 13/21 Rpt: 16/24	Hayden, K				J	Theris	
4	Date	5 Payee name	!					
	12/09/2024	Porky's						
6	Amount (\$)	7 Payee addre	ss; City; Stat	te; Zip Co	ode	10.		
	\$100.00	18363 TX-:	L05					
Ī								
		Cleveland,	TX 77328					
8	PURPOSE	(a) Category (s	ee Categories listed at the top of this s	chedule)	(b)	Description		
	OF EXPENDITURE	Contributio	ns/Donations Made By			<u> </u>	ide of Texas. Complete Schedule T.	
		Candidate/	Officeholder/Political Com	mittee		_	, officeholder living expense	
						raffle		
9	Complete ONLY if direct expenditure to benefit C/O		iceholder name	Office sou	ight		Office held	
	estportation to contain oron							
	Date	Payee name						
	09/11/2024	Porter VFW	/ #4816					
	Amount (\$)	Payee addre	ss; City; Stat	e; Zip Co	de			
	\$100.00	24411 Cun	ningham Dr.					
	1							
		Porter, TX	77365					
	PURPOSE			···	/b\	Faccinting		
	OF		ee Categories listed at the top of this sons/Donations Made By	chedule)	(D)	Description Check if travel outsi	ide of Texas. Complete Schedule T.	
	EXPENDITURE		าร/Donations Made By Officeholder/Political Com	mittee			officeholder living expense	
		_ =				raffle tickets		
	Complete ONLY if direct	Candidate/Off	ceholder name	Office sou	ght		Office held	
	expenditure to benefit C/O	1						
	Date	Payee name				<u></u>		
	12/19/2024	Rack Room	Shoes					
	Amount (\$)	Payee addre		e; Zip Co	do			
	\$169.37	·	et Place Dr.	e, zip co	ue			
	φτ09.51	ZI440 Mair	et Flace Dr.					
		New Caney	TX 77357					
	PURPOSE OF	(a) Category (So	ee Categories listed at the top of this so	chedule)	(b)	Description		
	EXPENDITURE	Gift/Awards	/Memorials Expense			ш	de of Texas. Complete Schedule T.	
						_	officeholder living expense	
						οποσοποι αυυρικ	ed children for Christmas	
	Complete ONLY if direct	Condidata (C#	as halder name	Office	a b ±		Office hold	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ceholder name	Office sou	ynt		Office held	
	· , - , - , - , - , - , - , - , - , - ,	***						

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Canditate/Officeholder/Political Committee

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
OTHER (enter a category not listed above)

	Candidate/Officeholder/Politic Credit Card Payment								
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID							
	Sch: 14/21 Rpt: 17/24	Hayden, Kenneth							
4	Date	5 Payee name							
	12/14/2024	Rotary EMC							
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$250.00	20700 Mills Branch							
l		Porter, TX 77365							
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
ļ	OF EXPENDITURE	Contributions/Donations Made By							
	AN ENDITORE	Candidate/Officeholder/Political Committee							
		spelling bee fundraiser							
Ļ									
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held							
<u> </u>									
	Date	Payee name							
	08/01/2024	Rusty Buckle							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$80.18	22664 Community Dr.							
		New Caney, TX 77357							
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF EXPENDITURE	Food/Beverage Expense							
		Check if Austin, TX, officeholder living expense							
		Commissioner/JP luncheon							
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	expenditure to benefit C/OI								
\vdash	Data								
	Date	Payee name							
	10/15/2024	Saltgrass							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$88.73	21284 US-59							
		New Caney, TX 77357							
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas, Complete Schedule T.							
		Check if Austin, TX, officeholder living expense dinner with Senator Brandon Creighton							
		diffile with Seriator Brandon Creignton							
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	expenditure to benefit C/O								
	WHI.								

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Foot/Beverage Expense Polling Expense Travel in District by - Gift/Awards/Memorials Expense Printing Expense Travel Out of District cal Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
_	Total pages Schedule F1:	
_	Sch: 15/21 Rpt: 18/24	
4	Date	
4	09/19/2024	5 Payee name Smith & Son Corner Kitchen
_		
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$43.43	812 Parkway #105
		Gatlinburg, TN 37738
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas, Complete Schedule T.
		Check if Austin, TX, officeholder Ilving expense
		dinner at National Constable Convention
_		
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
	Date	Payee name
	11/22/2024	Splendora Project Graduation
	Amount (\$)	Payee address; City; State; Zip Code
	\$150.00	23747 FM 2090
		Splendora, TX 77372
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Contributions/Donations Made By Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee
		donation
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experiditure to benefit C/OI	
	Date	Payee name
	09/12/2024	Square Space Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$74.00	8 Clarkson St.
		New York, NY 10014
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		website
	Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
•	expenditure to benefit C/OI	1
	- 100.71	WALLEST TO THE PARTY OF THE PAR

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

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

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

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

	Candidate/Officeholder/Politice Credit Card Payment		Legal Services The Instruction Guide	Salaries	/Wages	Contract Labor		R (enter a category not listed ab	ove)
1	Total pages Schedule F1:	2 FILER NAM)E				3 Filer	ID	
L	Sch: 16/21 Rpt: 19/24	Hayden, K	enneth						
4	Date	5 Payee name	e						
L	11/22/2024	Square Sp	ace Inc.						
6	Amount (\$)	7 Payee addr	ess; City;	State; Zip C	ode				
	\$294.22	8 Clarkson	St.						
		New York,	NY 10014						
8	PURPOSE OF	(a) Category (See Categories listed at the to	p of this schedule)	(b)	Description			
l	EXPENDITURE	Fees				-		exas, Complete Schedule T.	
						website	rx, oncent	older living expense	
						Website			
9	Complete ONLY if direct	<u> </u> Candidate/Ωf	ficeholder name	Office so	uaht			Office held	
ľ	expenditure to benefit C/O		nocholder hame	Onice 30	ugni			Ande Held	
_	Date	Davis 200							
	08/02/2024	Payee name TMPA	3						
			O. T.	01.22. 75. 0					
	Amount (\$)	Payee addre	=	State; Zip C	oae				
	\$32.00	6200 El Ca	alma Dr., Ste. 200						
		Austin, TX	78752						
	PURPOSE OF	(a) Category (s	See Categories listed at the top	o of this schedule)	(b)	Description			
	EXPENDITURE	Fees						xas. Complete Schedule T.	
						membership	TX, DIRECTO	older living expense	
						Memberomp			
	Complete ONLY if direct	Candidate/Of	ficeholder name	Office so	<u>I</u> uaht			Office held	
	expenditure to benefit C/OI				g				
	Date	Payee name			·				
	09/03/2024	TMPA	•						
	Amount (\$)	Payee addre	ess; City;	State; Zip C	odo				
	\$32.00	•	lma Dr., Ste. 200	otate, zip e	ouc				
	Ψ02. 0 0	0200 El 0 0	and Dii, Ole: 200						
		Austin, TX	78752						
	PURPOSE	(a) Category (S	See Categories listed at the top	of this schedule)	(b)	Description			
	OF EXPENDITURE	Fees						xas, Complete Schedule T.	
	LATERDITORE					∟	TX, officeho	older living expense	
						membership			
	Consider ONLY V. II				<u></u>			and the second	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		iceholder name	Office so	ugnt		C	Office held	
	- -								
ori	ms provided by Texas Et	hics Commiss	OD WAAAA	ethics.state.tx.	IC.			Version V4.1.0	5dd2aca2

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Event Expense Fees Food/Beverage Expense

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

	Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment		, , , , , , , , , , , , , , , , , , , ,
	otal pages Schedule F1: Sch: 17/21 Rpt: 20/24	2 FILER NAME Hayden, Kenneth	3 Filer ID
	oate 0/02/2024	5 Payee name TMPA	
	mount (\$) \$32.00	7 Payee address; City; State; Zip Code 6200 El Calma Dr., Ste. 200 Austin, TX 78752	
8	PURPOSE OF EXPENDITURE	1003	travel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense
	omplete <u>ONLY</u> if direct xpenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
1.	ate 1/21/2024 mount (\$) \$32.00	Payee name TMPA Payee address; City; State; Zip Code 6200 El Calma Dr., Ste. 200	
E	PURPOSE OF EXPENDITURE	1 003	travel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense
	omplete <u>ONLY</u> if direct spenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
12	ate 2/02/2024	Payee name TMPA	
Al	mount (\$) \$32.00	Payee address; City; State; Zip Code 6200 El Calma Dr., Ste. 200 Austin, TX 78752	
E	PURPOSE OF EXPENDITURE	1 000	travel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense
	omplete <u>ONLY</u> if direct penditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense

Loan Repayment/Reimbu

General Court C

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)

Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		Gift/Awards/Memorials Exp Legal Services The Instruction Guide	Salaries/	Wage	s/Contract Labor	Travel Out of E OTHER (enter	astrict a category not listed above)	
_		lo evennan					0 Ell-« ID	
1.	Total pages Schedule F1:						3 Filer ID	
	Sch: 18/21 Rpt: 21/24	Hayden, Ke				-		
4	Date	5 Payee name						
	12/19/2024	Target						
6	Amount (\$)	7 Payee addre	ss; City;	State; Zip C	ode			
	\$236.84	21836 Mari	et Place Dr.					
		New Caney	, TX 77357					
8	PURPOSE	(a) Category (S	ee Categories listed at the to	p of this schedule)	(b)	Description		
	OF EXPENDITURE		/Memorials Expens			$\boldsymbol{\sqcup}$	utside of Texas, Co	·
	EXTENDITORE						TX, officeholder livir	
						ciotnes and to	lys for adopte	d children for Christmas
_		<u> </u>			ᆫ			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		ceholder name	Office sou	ught		Office h	neld
	Date	Payee name						
	08/08/2024	Tuff Founda	ation					
	Amount (\$)	Payee addre	ss; City;	State; Zip Co	ode			
	\$1,036.27	6606 FM 14	188 Ste. 148-686					
		Magnolia, T	X 77354					
	PURPOSE OF		ee Categories listed at the top		(b)	Description		
	EXPENDITURE		ns/Donations Made			<u> </u>	utside of Texas. Cor TX, officeholder livir	•
		Candidate/t	Officeholder/Politica	u Committee		banquet spon:		ну схронос
	Complete ONLY if direct	Candidate/Offi	ceholder name	Office sou	<u>l</u> uaht		Office h	
	expenditure to benefit C/O	4						
	Date	Payee name					· · · · · · · · · · · · · · · · · · ·	
	12/09/2024	USPS						
	Amount (\$)	Payee addres	ss; City;	State; Zip Co	ode.			
	\$365.00	20811 US F	•	Olate, Zip Ct	Juc			
	φ505.00	20011 00 1	1999. 33					
		Name Camara	TV 77057					
		New Caney	, IX //35/					
	PURPOSE OF		e Categories listed at the top	of this schedule)	(b)	Description		
	EXPENDITURE	Food/Bever	age Expense			 	utside of Texas, Cor TX, officeholder livir	
						stamps	IA, omeendeer han	ig expense
	Complete ONLY if direct	Candidate/Offic	ceholder name	Office sou	L Jaht		Office h	neld
	expenditure to benefit C/OF			3				

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	y - Gift/Awards/ al Committee Legal Service	Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/C The Instruction Guide explains how to complete			Travel in District Travel Out of District OTHER (enter a category not listed above)		
1 Total pages Schedule F1:	2 FILER NAME			3	Filer ID		
Sch: 19/21 Rpt: 22/24	Hayden, Kenneth						
4 Date	5 Payee name			······································	****		
11/25/2024	Vista Print						
6 Amount (\$)	7 Payee address; Ci	ty; State; Zip	Code				
\$118.30	275 Wyman St.	•					
	Waltham, MA 02451						
8 PURPOSE	(a) Category (See Categories	s listed at the ton of this schedule)	(b) D	escription			
OF EXPENDITURE	Printing Expense	s listed at the top of this schedule)		_ '	side of Texas. Complete Schedule T.		
EXPENDITURE					(, officeholder living expense		
			C	onstable Pct.	4 Christmas cards		
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder r	name Office	sought		Office held		
Date	Payee name						
11/25/2024	Wal-Mart						
Amount (\$)	Payee address; Cit	ty; State; Zip	Code				
\$63.82	20310 US 59						
	New Caney, TX 7739	57					
PURPOSE	(a) Category (See Categories	: listed at the top of this schedule)	(b) D	escription	11 The State of Control of Contro		
OF EXPENDITURE	Event Expense	,		<u>⊿</u>	ide of Texas, Complete Schedule T.		
EXI ENDITORE				-1	, officeholder living expense		
			"	andy for triani	ksgiving parade		
Complete ONE V Station of	O did-t-tom b-t-t	0.00			061-11		
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder n	iame Office	sought		Office held		
					-		
Date	Payee name						
12/04/2024	Wal-Mart						
Amount (\$)	Payee address; Cit	y; State; Zip	Code				
\$200.00	23561 US-59						
		•					
	Porter, TX 77365						
PURPOSE	(a) Category (See Categories	listed at the top of this schedule)	(b) Di	escription			
OF EXPENDITURE	Event Expense			4	ide of Texas, Complete Schedule T.		
				-1	, officeholder living expense W Christmas luncheon		
			91	ic cairus ioi VE	W Christinas iuncheun		
Complete ONLY if direct	Candidate/Officeholder n	omo 0#			Office held		
Complete ONLY if direct expenditure to benefit C/OF		ame Office	sougni		Office field		
· · · · · · · · · · · · · · · · · · ·							

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services The Instruction Gui		:/Wage	s/Contract Labor		tavel Out of District THER (enter a category not listed	d above)
1	Total pages Schedule F1: Sch: 20/21 Rpt: 23/24	2 FILER NAM Hayden, K					3 Fi	iler ID	
4	12/09/2024	5 Payee name Wal-Mart							
6	Amount (\$) \$835.00	7 Payee addre 20310 US New Cane	•	State; Zip C	Code				
8	PURPOSE OF EXPENDITURE		See Categories listed at the S/Memorials Expe		(b)	Check if Austin,	, ⊤X, off	of Texas. Complete Schedule T. iceholder living expense Senior Center Christn	nas luncheon
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		iceholder name	Office so	ought			Office held	<u> </u>
	Date 12/19/2024	Payee name Wal-Mart						****	
	Amount (\$) \$70.73	Payee addre 20310 US : New Caney	•	State; Zip C	Code			·	
	PURPOSE OF EXPENDITURE	(a) Category (S	ee Categories listed at the		(b)	Check if Austin,	, TX, offi scellar	of Texas. Complete Schedule T. iceholder living expense neous gift wrap for add	ppted
	Complete ONLY if direct expenditure to benefit C/O		iceholder name	Office so	ught			Office held	
	Date 12/19/2024	Payee name Walmart							
	Amount (\$) \$190.94	Payee addre 23561 US I Porter, TX	Hwy. 59	State; Zip C	ode	,			
	PURPOSE OF EXPENDITURE		ee Categories listed at the //Memorials Exper		(b)	Check if Austin,	TX, offi	of Texas, Complete Schedule T. ceholder living expense Diletries for adopted ch	nildren for
	Complete ONLY if direct expenditure to benefit C/OF		ceholder name	Office so	ught			Office held	
or	ms provided by Texas Et	hics Commissi	on ww	w.ethics.state.tx.	us			Version V4.3	1.0.5dd2ace2

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Consulting Expense Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment		Food/Beverage Expense Polling Expense Gitt/Awards/Memorials Expense Printing Expense Committee Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.				Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
┢	Total pages Schedule F1:	2 ELEDNAN		ans now to comp	icte mis rom	3	Filer ID		
	Sch: 21/21 Rpt: 24/24	Hayden, K							
4	Date	·				上			
*	12/08/2024	5 Payee nam Wildcat Cl							
<u>_</u>		ļ							
6	Amount (\$)	7 Payee addr	•	tate; Zip Code					
	\$100.00	23747 FM	2090						
		Splendora	, TX 77372						
8	PURPOSE	(a) Category (See Categories listed at the top of th	is schedule) (b)	Description				
İ	OF EXPENDITURE	Contribution	ons/Donations Made By		<u></u>		side of Texas. Complete Schedule T.		
		Candidate	/Officeholder/Political Co	mmittee	—	1, TX,	K, officeholder living expense		
					raffle				
9	Complete ONLY if direct	Condidate/Of	ficeholder name	Office sought		_	Office held		
	expenditure to benefit C/OI	H	ncenoider name	Office sought			Office field		
	Date	Payee name	9						
	09/11/2024	Wright, Ro	b						
	Amount (\$)	Payee addr	ess; City; S	tate; Zip Code	· · · · · · · · ·		··········		
ſ	\$300.00	15060 Jac	k Gibbs Rd.						
		Willis, TX 7	77378				•		
	PURPOSE	(a) Category (See Categories listed at the top of thi	s schedule) (b)	Description	_			
	OF EXPENDITURE	Event Exp		,		outsi	ide of Texas. Complete Schedule T.		
	EXPENDITORE				L1		, officeholder living expense		
					fair cook-off s	spo	onsor		
	Complete ONLY if direct expenditure to benefit C/Oh		ficeholder name	Office sought			Office held		
	•								