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)

2 Total pages filed:

12

3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR: Mr FIRST: Kendric MI: D	OFFICE USE ONLY
	NICKNAME LAST: Jones SUFFIX	Date Received

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

☐ Change of Address

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

PO Box 2180   Prairie View Tx 77446

Waller County Elections
JAN 2 3 2020
Received

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE (832) PHONE NUMBER 660·1809 EXTENSION

Date Hand-delivered or Date Postmarked

6 CAMPAIGN TREASURER NAME

MS / MRS / MR: Mr   FIRST: Modufaro   MI: V

NICKNAME   LAST: Eze   SUFFIX

Receipt #	Amount $
Date Processed	
Date Imaged	

7 CAMPAIGN TREASURER ADDRESS (Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

100 University Dr   Prairie View   TX   77446

8 CAMPAIGN TREASURER PHONE

AREA CODE (832) PHONE NUMBER 576-5993 EXTENSION

9 REPORT TYPE

☑ January 15   ☐ 30th day before election   ☐ Runoff   ☐ 15th day after campaign treasurer appointment (Officeholder Only)

☐ July 15   ☐ 8th day before election   ☐ Exceeded Modified Reporting Limit   ☐ Final Report (Attach C/OH - FR)

10 PERIOD COVERED

Month 7 / Day 01 / Year 19 THROUGH Month 12 / Day 31 / Year 19

11 ELECTION

ELECTION DATE

Month 03 / Day 03 / Year 2020

ELECTION TYPE

☑ Primary   ☐ Runoff   ☐ Other Description

☐ General   ☐ Special

12 OFFICE

OFFICE HELD (if any)

Prairie View City Council Pos #3

13 OFFICE SOUGHT (if known)

Waller County Commissioner Pct. 3

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT

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

14 C/OH NAME	Kendric D. Jones	15 Filer ID (Ethics Commission Filers)

16 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. *THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT.* CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.	
	COMMITTEE TYPE	COMMITTEE NAME
	☐ GENERAL	N/A
	☐ SPECIFIC	COMMITTEE ADDRESS N/A
☐ Additional Pages		COMMITTEE CAMPAIGN TREASURER NAME N/A
		COMMITTEE CAMPAIGN TREASURER ADDRESS N/A

17 CONTRIBUTION TOTALS	1.	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	$ 0
	2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 1,515
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURE.	$ 0
	4.	**TOTAL POLITICAL EXPENDITURES**	$ 500
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 1,015
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 0

18 AFFIDAVIT

MCKENZIE KELLEY
Notary Public, State of Texas
My Commission Expires
December 10, 2023
NOTARY ID 13227856-9

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.

_____
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said __Kendric D. Jones__, this the __23rd__ day of __January__, 20 __20__, to certify which, witness my hand and seal of office.

_____	_Mckenzie Kelley_	_Notary_
Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath
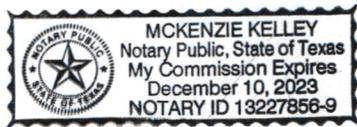
SUBTOTALS - C/OH

19 FILER NAME	20 Filer ID (Ethics Commission Filers)
Kendric D. Jones	

21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	[X] SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	$ 1,515
2.	[ ] SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	$
3.	[ ] SCHEDULE B: PLEDGED CONTRIBUTIONS	$
4.	[ ] SCHEDULE E: LOANS	$
5.	[X] SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	$ 500
6.	[ ] SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	$
7.	[ ] SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	$
8.	[ ] SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	$
9.	[ ] SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	$
10.	[ ] SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	$
11.	[ ] SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	$
12.	[ ] 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: 8

2 FILER NAME Kendric D. Jones	**3** Filer ID (Ethics Commission Filers)

4 Date 11/16/2019	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____) Taeshon Rogers	**7** Amount of contribution ($) $25
	6 Contributor address; City; State; Zip Code 3207 Lightstar Houston TX 77245	

8 Principal occupation / Job title (See Instructions) Human Resources	**9** Employer (See Instructions) Cornerstone Health Group

Date 12/06/19	Full name of contributor ☐ out-of-state PAC (ID#:_____) Mathew Stephens	Amount of contribution ($) $50
	Contributor address; City; State; Zip Code 6913 Andersons Way Laurel MD 20707 Apt 204	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date 12/03/19	Full name of contributor ☐ out-of-state PAC (ID#:_____) Mary Myles	Amount of contribution ($) $25
	Contributor address; City; State; Zip Code 4719 Byront Road Houston TX 77053	

Principal occupation / Job title (See Instructions) Executive Assistant	Employer (See Instructions) UofH

Date 12/02/19	Full name of contributor ☐ out-of-state PAC (ID#:_____) Phyllis Darden-Caldwell	Amount of contribution ($) $25
	Contributor address; City; State; Zip Code 5915 W. Harron Dr Houston 77084 TX	

Principal occupation / Job title (See Instructions) Paralegal	Employer (See Instructions) Wright Close & Barger LLP

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.	**1** Total pages Schedule A1: 8

2 FILER NAME Kendric D. Jones

3 Filer ID (Ethics Commission Filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____)	7 Amount of contribution ($)
12/10/2019	Cherry booden	$25
	6 Contributor address; City; State; Zip Code	
	11815 Gatlinburg Houston TX 77031	

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)
12/20/19	Carrington Johnson	$40
	Contributor address; City; State; Zip Code	
	9615 Harvest Moon Verona WI 53593 Ln, Apt	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Finance	LVNA Mutual Group

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)
12/19/2019	Jessmine Cornelius	$25
	Contributor address; City; State; Zip Code	
	P.O. Box 202 Prairie view TX 77446	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Brand Ambassador	Banana Republic

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)
12/18/2019	John Osby	$100
	Contributor address; City; State; Zip Code	
	15 Shawne Ridge Woodlands TX 77382 Dr	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.	**1** Total pages Schedule A1: 8

2 FILER NAME Kendall D. Jones

3 Filer ID (Ethics Commission Filers)

4 Date	**5** Full name of contributor	☐ out-of-state PAC (ID#:_____)	**7** Amount of contribution ($)
12/18/2019	Kendyll Bolke		$25
	6 Contributor address; City; State; Zip Code		
	6012 Portico Dr Fortworth Tx 76132		

8 Principal occupation / Job title (See Instructions)
Founder/CEO

9 Employer (See Instructions)
KD's Southouse Maintenance

Date	Full name of contributor	☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)
12/28/2019	Boyce McKinney		$25
	Contributor address; City; State; Zip Code		
	2660 Augusta Dr, D801 Houston TX 77057		

Principal occupation / Job title (See Instructions)
HPD Police Officer

Employer (See Instructions)
Houston Police Dept.

Date	Full name of contributor	☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)
12/28/2019	Rotimi Inyang		$15
	Contributor address; City; State; Zip Code		
	7606 AllonNa Dr Houston TX 77083		

Principal occupation / Job title (See Instructions)
Data entry

Employer (See Instructions)
Mangan

Date	Full name of contributor	☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)
12/28/2019	Rogelio Fraire		$25
	Contributor address; City; State; Zip Code		
	4416 Kings Lir s Fortworth Tx 76111		

Principal occupation / Job title (See Instructions)
District Employee

Employer (See Instructions)
HISD

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.	**1** Total pages Schedule A1: 8

2 FILER NAME: Kendric D. Jones

3 Filer ID (Ethics Commission Filers)

4 Date	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____)	**7** Amount of contribution ($)
12/27/19	Roshanda Johnson	$60
	6 Contributor address; City; State; Zip Code	
	2811 Evening Shade Lt Missouri City TX 77489	

8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)
Assistant Principal	Southwest Schools

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)
12/30/19	Tyronne Walker	$50
	Contributor address; City; State; Zip Code	
	1137 Esplanade Ave New Orleans LA 70116	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Vice President	Greater New Orleans Foundation

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)
	TYRONNE WALKER	$50
	Contributor address; City; State; Zip Code	
	1137 ESPLANADE AVE, NO, LA 70116	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)
	JUSTIN LEE	$50
	Contributor address; City; State; Zip Code	
	4830 VENTURA LN HOU; TX 77021	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

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If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.	**1** Total pages Schedule A1: 8

2 FILER NAME KENDRIC D. JONES	**3** Filer ID (Ethics Commission Filers)

4 Date	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____) DANIELE RIDEAU	**7** Amount of contribution ($)
	6 Contributor address; City; State; Zip Code 1050 GALATYN PARKWAY RICHARDSON TX 75082	$50
8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) FEMI AKEREDOLU	Amount of contribution ($)
	Contributor address; City; State; Zip Code 1605 VISTA DEL MAR HOU, TX 77083	$50
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) TAMIAH ROBERTSON	Amount of contribution ($)
	Contributor address; City; State; Zip Code 1520 BAILEY APT 154 HOU, TX 77019	$40
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) MARY O'CONNOR	Amount of contribution ($)
	Contributor address; City; State; Zip Code 1501 BIG BEND HOU, TX 77055	$50
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.	**1** Total pages Schedule A1: 8

2 FILER NAME KENDRIC D. JONES

3 Filer ID (Ethics Commission Filers)

4 Date	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____)	**7** Amount of contribution ($)
	JAMAAL RUTHERFORD	
	6 Contributor address; City; State; Zip Code	$25
	10518 TOWNSQUARE SUGARLAND, TX 77498	

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)
	ROBIN BISSELL	
	Contributor address; City; State; Zip Code	$50
	680 W SAM HOUSTON HOU, TX 77042	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)
	BARBARA FIELDS	$100
	Contributor address; City; State; Zip Code	
	1027 DONOVAN ST HOU, TX 77091	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)
	KENNY AKINOLA	
	Contributor address; City; State; Zip Code	$50
	13006 BECKLIN HOU, TX 77099	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.	**1** Total pages Schedule A1: 8

2 FILER NAME

KENDRIC D. JONES

3 Filer ID (Ethics Commission Filers)

4 Date	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____)	**7** Amount of contribution ($)
	KESHA DUCKWORTH	$50
	6 Contributor address; City; State; Zip Code	
	6222 ATLAS DR HOU, TX 75217	

8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)
	CHERRY GOODEN	$25
	Contributor address; City; State; Zip Code	
	11515 GATLINBURG HOU, TX 77031	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)
	SHEMELLE KING	$50
	Contributor address; City; State; Zip Code	
	23827 BRECKENRIDGE SPRING, TX 77373	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)
	FREDRICK TURNER	$50
	Contributor address; City; State; Zip Code	
	13601 MOORING PEARLAND, TX 77584	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

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Forms provided by Texas Ethics Commission   www.ethics.state.tx.us   Revised 1/1/2020

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.	**1** Total pages Schedule A1: 8

2 FILER NAME KENDRIC D. JONES

3 Filer ID (Ethics Commission Filers)

4 Date	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____)	**7** Amount of contribution ($)
	KEANU FLORENCE	$10
	6 Contributor address; City; State; Zip Code	
	1133 CAST WEST HIGHWAY SPRING, TX 20910	

8 Principal occupation / Job title (See Instructions)   **9** Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)
	MARCILYNN BURKE	$250
	Contributor address; City; State; Zip Code	
	3747 MARCELLA EUGENE, OR 97408	

Principal occupation / Job title (See Instructions)   Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)
	JAMES DURANT	$50
	Contributor address; City; State; Zip Code	
	3327 LAUREL CREST KINGWOOD, TX 77899	

Principal occupation / Job title (See Instructions)   Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)
	Contributor address; City; State; Zip Code	

Principal occupation / Job title (See Instructions)   Employer (See Instructions)

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POLITICAL EXPENDITURES MADE
FROM POLITICAL CONTRIBUTIONS

SCHEDULE **F1**

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 F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
1	KENDRIC D. JONES	

4 Date	5 Payee name
11/15/19	AMBITION STRATEGIES

6 Amount ($)	7 Payee address;	City;	State;	Zip Code
500		HOUSTON	TX	

8 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule)	(b) Description
CONSULTANT	WEBSITE

(c) ☐ Check if travel outside of Texas. Complete Schedule T.   ☐ Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date	Payee name

Amount ($)	Payee address;	City;	State;	Zip Code

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule)	Description

☐ Check if travel outside of Texas. Complete Schedule T.   ☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date	Payee name

Amount ($)	Payee address;	City;	State;	Zip Code

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule)	Description

☐ Check if travel outside of Texas. Complete Schedule T.   ☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

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