

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: 18								
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / <u>MR</u> FIRST <u>Kristopher</u> MI <u>R</u> NICKNAME <u>Kris</u> LAST <u>Drees</u> SUFFIX _____		OFFICE USE ONLY Date Received Rcvd - 10:30 a.m., April 7, 22 Date Hand-delivered or Date Postmarked Receipt # _____ Amount \$ _____ Date Processed _____ Date Imaged _____								
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX: _____ APT / SUITE #: _____ CITY: _____ STATE: _____ ZIP CODE <u>76117</u> ☐ Change of Address										
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE <u>817</u> PHONE NUMBER <u>254-234-1234</u> EXTENSION _____										
6 CAMPAIGN TREASURER NAME	MS / MRS / <u>MR</u> FIRST <u>Jack</u> MI _____ NICKNAME _____ LAST <u>McCarty</u> SUFFIX _____										
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE): <u>8800 Rumfield Rd</u> CITY: <u>NRH</u> STATE: <u>TX</u> ZIP CODE <u>76182</u> (Residence or Business)										
8 CAMPAIGN TREASURER PHONE	AREA CODE _____ PHONE NUMBER <u>(972) 489-3165</u> 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 Day Year <u>01 / 01 / 2022</u> THROUGH <u>03 / 04 / 2022</u>										
11 ELECTION	ELECTION DATE: Month Day Year <u>5 / 7 / 2022</u> ELECTION TYPE: ☐ Primary ☐ Runoff ☐ Other Description _____ ☒ General ☐ Special										
12 OFFICE	OFFICE HELD (if any) <u>Birdville ISD Board of Trustees Place 7</u> 13 OFFICE SOUGHT (if known) <u>Birdville ISD Board of Trustees Place 7</u>										
14 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. <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 20%; padding: 5px;">COMMITTEE TYPE</td> <td style="padding: 5px;">COMMITTEE NAME</td> </tr> <tr> <td style="padding: 5px;">☐ GENERAL</td> <td style="padding: 5px;">COMMITTEE ADDRESS</td> </tr> <tr> <td style="padding: 5px;">☐ SPECIFIC</td> <td style="padding: 5px;">COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td style="padding: 5px;"></td> <td style="padding: 5px;">COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table>			COMMITTEE TYPE	COMMITTEE NAME	☐ GENERAL	COMMITTEE ADDRESS	☐ SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME		COMMITTEE CAMPAIGN TREASURER ADDRESS
COMMITTEE TYPE	COMMITTEE NAME										
☐ GENERAL	COMMITTEE ADDRESS										
☐ SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME										
	COMMITTEE CAMPAIGN TREASURER ADDRESS										

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

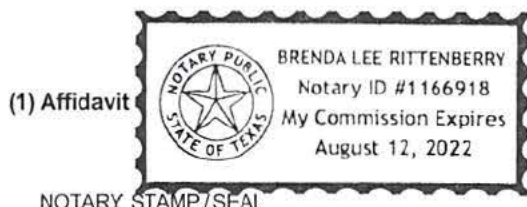
FORM C/OH
COVER SHEET PG 2

15 C/OH NAME <u>Kris Drees</u>		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ <u>65.00</u>
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <u>8645.21</u>
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE	\$ <u>0.00</u>
	4. TOTAL POLITICAL EXPENDITURES	\$ <u>7400.79</u>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ <u>1454.21</u>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>2,170.00</u>

18 SIGNATURE 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.

Kris Drees
Signature of Candidate or Officeholder

Please complete either option below:



Sworn to and subscribed before me by Kris Drees this the 17th day of April, 2022, to certify which, witness my hand and seal of office.

Brenda Rittenberry Brenda Rittenberry Admin Asst.
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.

(street) (city) (state) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20____.

(month) (year)

Signature of Candidate/Officeholder (Declarant)

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

19 FILER NAME <i>Kris Drees</i>		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	☒ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ <i>7550.00</i>
2.	☒ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ <i>1030.21</i>
3.	☐ SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	☐ SCHEDULE E: LOANS	\$
5.	☒ SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>6150.79</i>
6.	☒ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ <i>1250.00</i>
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

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

9

2 FILER NAME

Kris Drees

3 Filer ID (Ethics Commission Filers)

4 Date

1/25/22

5 Full name of contributor

Chris McDonald

☐ out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

100.00

6 Contributor address;

City;

State;

Zip Code

3733 Gene Ln Haltom City, TX 76117

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

1/25/22

Full name of contributor

Lori Dixon

☐ out-of-state PAC (ID#: _____)

Amount of contribution (\$)

100.00

Contributor address;

City;

State;

Zip Code

1537 Shadow Run Weatherford TX 76086

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/25/22

Full name of contributor

Dolores Webb

☐ out-of-state PAC (ID#: _____)

Amount of contribution (\$)

500.00

Contributor address;

City;

State;

Zip Code

8638 Wavyleaf Ln NRH TX 76182

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/26/22

Full name of contributor

Jack McCarty

☐ out-of-state PAC (ID#: _____)

Amount of contribution (\$)

1,000.00

Contributor address;

City;

State;

Zip Code

8800 Rumfield NRH TX 76182

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Management

United Healthcare

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

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A1: 9	
2 FILER NAME Kris Drees				3 Filer ID (Ethics Commission Filers)	
4 Date 1/27/22	5 Full name of contributor ☐ out-of-state PAC (ID#: Mona Bailey			7 Amount of contribution (\$) 1000.00	
	6 Contributor address; City; State; Zip Code 6200 Lake Way NRH TX 76182				
8 Principal occupation / Job title (See Instructions) Retired			9 Employer (See Instructions) Retired		
Date 1/31/22	Full name of contributor ☐ out-of-state PAC (ID#: Ralph Kunkel			Amount of contribution (\$) 300.00	
	Contributor address; City; State; Zip Code [REDACTED] [REDACTED] [REDACTED] [REDACTED]				
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 1/28/22	Full name of contributor ☐ out-of-state PAC (ID#: Scott Maze			Amount of contribution (\$) 50.00	
	Contributor address; City; State; Zip Code 8529 Grand View Dr. NRH TX 76182				
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 2/7/22	Full name of contributor ☐ out-of-state PAC (ID#: Stacy Reddy			Amount of contribution (\$) 100.00	
	Contributor address; City; State; Zip Code 7012 Hardisty St RH TX 76118				
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 9
2 FILER NAME Kris Drees		3 Filer ID (Ethics Commission Filers)
4 Date 2/10/22	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Cristian Villegas	7 Amount of contribution (\$) 100.00
6 Contributor address; City; State; Zip Code 6924 Buenos Aires Dr. NRH, TX 76180		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 2/10/22	Full name of contributor ☐ out-of-state PAC (ID#: _____) Michael Benton	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 5025 Skylark Ct. NRH, TX 76180		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 2/10/22	Full name of contributor ☐ out-of-state PAC (ID#: _____) Melissa Kates	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 6348 Skylark Circle NRH, TX 76180		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 2/10/22	Full name of contributor ☐ out-of-state PAC (ID#: _____) Thongkhoun Inthaphom	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 5375 Desert Falls FW, TX 76137		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 9
2 FILER NAME Kris Drees		3 Filer ID (Ethics Commission Filers)
4 Date 2/10/22	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Susan Sorrells	7 Amount of contribution (\$) 500.00
6 Contributor address; City; State; Zip Code 8920 Martin Dr. NRH TX 76182		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 2/10/22	Full name of contributor ☐ out-of-state PAC (ID#: _____) Dana McCarty	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 8800 Romfield Rd NRH, TX 76182		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 2/10/22	Full name of contributor ☐ out-of-state PAC (ID#: _____) Richard Davis	Amount of contribution (\$) 200.00
Contributor address; City; State; Zip Code [REDACTED] NRH [REDACTED]		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 2/10/22	Full name of contributor ☐ out-of-state PAC (ID#: _____) Troy Dunn	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 6851 NE Loop 820 #102 NRH, TX 76180		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 9
2 FILER NAME Kris Drees		3 Filer ID (Ethics Commission Filers)
4 Date 2/10/22	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Nathan Ross 6 Contributor address; City; State; Zip Code 3834 Lucena Ct Grand Prairie, TX 75052	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 2/11/22	Full name of contributor ☐ out-of-state PAC (ID#: _____) Matt Womble Contributor address; City; State; Zip Code Po Box 820661 NRH, TX 76182	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/23/22	Full name of contributor ☐ out-of-state PAC (ID#: _____) Kelvin Deupree Contributor address; City; State; Zip Code 7500 Woodhaven Dr. NRH, TX 76182	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/23/22	Full name of contributor ☐ out-of-state PAC (ID#: _____) Greg Stamps Contributor address; City; State; Zip Code 9101 Hialeah Circle NRH TX 76182	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 9
2 FILER NAME Kris Drees		3 Filer ID (Ethics Commission Filers)
4 Date 2/24/22	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Joe Procter	7 Amount of contribution (\$) 100.00
6 Contributor address; City; State; Zip Code 8604 Matt Dr. NRH, TX 76182		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 3/2/22	Full name of contributor ☐ out-of-state PAC (ID#: _____) Kristin Wheeler	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 5908 Pedernales Ridge NRH, TX 76180		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 3/2/22	Full name of contributor ☐ out-of-state PAC (ID#: _____) Stephen Wheeler	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 5908 Pedernales Ridge NRH, TX 76180		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 3/12/22	Full name of contributor ☐ out-of-state PAC (ID#: _____) Paul Young	Amount of contribution (\$) 25.00
Contributor address; City; State; Zip Code 9141 High Oaks Dr. NRH, TX 76182		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 9
2 FILER NAME Kris Drees		3 Filer ID (Ethics Commission Filers)
4 Date 3/15/22	5 Full name of contributor ☐ out-of-state PAC (ID#: Steven Peterson	7 Amount of contribution (\$) 100.00
6 Contributor address; City; State; Zip Code 9224 Herringbone Dr. FW, TX 76131		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 3/15/22	Full name of contributor ☐ out-of-state PAC (ID#: Randy Grosenbach	Amount of contribution (\$) 25.00
Contributor address; City; State; Zip Code 4308 Pepperbush Dr. FW, TX 76137		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 3/15/22	Full name of contributor ☐ out-of-state PAC (ID#: Lovie Downey	Amount of contribution (\$) 25.00
Contributor address; City; State; Zip Code 6629 Murel Dr. Watauga, TX 76148		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 3/9/22	Full name of contributor ☐ out-of-state PAC (ID#: Kelvin Dilks	Amount of contribution (\$) 150.00
Contributor address; City; State; Zip Code 		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 9
2 FILER NAME Kris Drees		3 Filer ID (Ethics Commission Filers)
4 Date 3/15/22	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Kelsey & Dacquiri Deavers 6 Contributor address; City; State; Zip Code 6573 Westridge Dr. Watauga, TX 76148	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/15/22	Full name of contributor ☐ out-of-state PAC (ID#: _____) Mindy Monroe Contributor address; City; State; Zip Code 6209 Skylark Cir. NRH TX 76180	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/17/22	Full name of contributor ☐ out-of-state PAC (ID#: _____) Mike Rigby Contributor address; City; State; Zip Code 921 Fall Creek Grapevine, TX 76051	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor ☐ out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 9
2 FILER NAME Kris Drees		3 Filer ID (Ethics Commission Filers)
4 Date 3/28/22	5 Full name of contributor ☐ out-of-state PAC (ID#: Elouise Kennedy 6 Contributor address; City; State; Zip Code 7504 Mapleleaf Dr. NRH, TX 76182	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/29/22	Full name of contributor ☐ out-of-state PAC (ID#: Charles Scoma Contributor address; City; State; Zip Code 8300 Cardinal Ln NRH, TX 76182	Amount of contribution (\$) 200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/1/22	Full name of contributor ☐ out-of-state PAC (ID#: Catherine Harvey Contributor address; City; State; Zip Code 7100 Jeffrey St. NRH, TX 76182	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/6/22	Full name of contributor ☐ out-of-state PAC (ID#: Mona Bailey Contributor address; City; State; Zip Code 6200 Lake Way NRH TX 76180	Amount of contribution (\$) 1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A2: 2	
2 FILER NAME Kris Drees				3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS				\$ 0.00	
5 Date 2/10/22	6 Full name of contributor ☐ out-of-state PAC (ID#: Cary Hancock			8 Amount of Contribution \$ 390.42	9 In-kind contribution description Refreshments for meet & greet
7 Contributor address; City; State; Zip Code 7101 Burns St RH TX 76118				☐ Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)			11 Employer (FOR NON-JUDICIAL)(See Instructions)		
12 Contributor's principal occupation (FOR JUDICIAL)			13 Contributor's job title (FOR JUDICIAL)(See Instructions)		
14 Contributor's employer/law firm (FOR JUDICIAL)			15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 2/10/22	Full name of contributor ☐ out-of-state PAC (ID#: Dana McCarty			Amount of Contribution \$ 30.29	In-kind contribution description Refreshments for meet & greet
Contributor address; City; State; Zip Code 8800 Rumfield Rd NRH, TX 76182				☐ Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)			Employer (FOR NON-JUDICIAL)(See Instructions)		
Contributor's principal occupation (FOR JUDICIAL)			Contributor's job title (FOR JUDICIAL)(See Instructions)		
Contributor's employer/law firm (FOR JUDICIAL)			Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.					

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A2: 2	
2 FILER NAME Kris Drees				3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS				\$ 0.00	
5 Date 3/15/22	6 Full name of contributor ☐ out-of-state PAC (ID#: Mona Bailey			8 Amount of Contribution \$ 169.05	9 In-kind contribution description Refreshments for meet & greet
7 Contributor address; City; State; Zip Code 6200 Lake Way NRH, TX 76180				☐ Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)			11 Employer (FOR NON-JUDICIAL) (See Instructions)		
12 Contributor's principal occupation (FOR JUDICIAL)			13 Contributor's job title (FOR JUDICIAL) (See Instructions)		
14 Contributor's employer/law firm (FOR JUDICIAL)			15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 3/29/22	Full name of contributor ☐ out-of-state PAC (ID#: Chris McDonald			Amount of Contribution \$ 440.00	In-kind contribution description Install large signs
Contributor address; City; State; Zip Code 3733 Gene Ln HC, TX 76117				☐ Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)			Employer (FOR NON-JUDICIAL) (See Instructions)		
Contributor's principal occupation (FOR JUDICIAL)			Contributor's job title (FOR JUDICIAL) (See Instructions)		
Contributor's employer/law firm (FOR JUDICIAL)			Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.					

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

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: 3	2 FILER NAME Kris Drees	3 Filer ID (Ethics Commission Filers)
4 Date 1/28/22	5 Payee name Wix.com	
6 Amount (\$) 116.91	7 Payee address; City; State; Zip Code 500 Terry A Francois Boul. San Francisco CA 94158 6th floor	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Purchase domain and Host Website
	(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 2/13/22	Payee name Birdwell Communications	
Amount (\$) 600.00	Payee address; City; State; Zip Code 10105 Locksley Dr. Benbrook, TX 76126	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Website Creation
	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 2/15/22	Payee name Charles Spaulding	
Amount (\$) 100.00	Payee address; City; State; Zip Code 1228 Greenwood Dr. Hurst TX 76053	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Singer for Valentine event at HC Senior Center
	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

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: 3	2 FILER NAME Kris Drees		3 Filer ID (Ethics Commission Filers)
4 Date 2/23/22	5 Payee name Williams Sign Company		
6 Amount (\$) 4,118.91	7 Payee address; City; State; Zip Code 3933 E. California Pkwy Ste C FW TX 76119		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expenses		(b) Description 4x4 signs and yard signs
	(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date 3/27/22	Payee name Home Depot		
Amount (\$) 224.08	Payee address; City; State; Zip Code 6501 NE Loop 820 NRH TX 76180		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description T posts for 4x4 signs
	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date 4/5/22	Payee name Digital Corporate Companies		
Amount (\$) 853.19	Payee address; City; State; Zip Code 7106 Lighthouse Rd Arlington TX 76002		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description design and print push cards
	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

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: 3	2 FILER NAME Kris Drees	3 Filer ID (Ethics Commission Filers)
4 Date 4/5/22	5 Payee name Anedot	
6 Amount (\$) 137.70	7 Payee address; City; State; Zip Code 5555 Hilton Ave. Ste 106 Baton Rouge LA 70808	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	
	(b) Description Transaction fees for online giving platform	
	(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		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F2:	2 FILER NAME Kris Drees		3 Filer ID (Ethics Commission Filers)			
4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS			\$ 0.00			
5 Date 11/29/22 - 5/31/22	6 Payee name American Education Advocates					
7 Amount (\$) 1,250.00	8 Payee address; 8408 La Fontaine Dr.	City; NRH	State; TX Zip Code 76182			
9 TYPE OF EXPENDITURE	☒ Political ☐ Non-Political					
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor		(b) Description Social Media Campaign Services			
	(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense					
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; border: none;">Candidate / Officeholder name</td> <td style="width: 33%; border: none;">Office sought</td> <td style="width: 33%; border: none;">Office held</td> </tr> </table>				Candidate / Officeholder name	Office sought	Office held
Candidate / Officeholder name	Office sought	Office held				
Date	Payee name					
Amount (\$)	Payee address;	City;	State; Zip Code			
TYPE OF EXPENDITURE	☐ Political ☐ Non-Political					
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 <u>ONLY</u> if direct expenditure to benefit C/OH <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; border: none;">Candidate / Officeholder name</td> <td style="width: 33%; border: none;">Office sought</td> <td style="width: 33%; border: none;">Office held</td> </tr> </table>				Candidate / Officeholder name	Office sought	Office held
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