CANDIDATE / OFFICEHOLDER FORM C/OH CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID Total pages filed: The C/OH Instruction Guide explains how to complete this form. 11 02 CANDIDATE / MS / MRS / MR FIRST М OFFICE USE ONLY **OFFICEHOLDER** Ken NAME Date Received FEB 22 2022 RCM NICKNAME LAST **SUFFIX** DeMerchant CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY; Date Hand-delivered or Date Postmarked ZIP CODE OFFICEHOLDER 60 Schubach Dr. MAILING Receipt # Amount **ADDRESS** Change of Address Sugar Land, TX 77479 Date Processed Date Imaged **CAMPAIGN** MS / MRS / MR **FIRST** Mi TREASURER Harry NAME NICKNAME LAST **SUFFIX** Truong **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #: CITY: STATE: ZIP CODE TREASURER **ADDRESS** 5826 New Territory Blvd. #812 Sugar Land, TX 77479 (Residence or Business) CAMPAIGN AREA CODE PHONE NUMBER **EXTENSION** TREASURER 832-350-8412 **PHONE** REPORT TYPE Runoff 15th day after campaign treasurer January 15 30th day before election appointment (officeholder only) 8th day before election Exceeded modified Final Report (Attach C/OH-FR) July 15 reporting limit Year Day **PERIOD** Month Day Year Month COVERED **THROUGH** 02/19/2022 01/21/2022 **ELECTION TYPE** 10 ELECTION **ELECTION DATE** X Primary Runoff Other Month Day Year 03/01/2022 General Special 12 OFFICE SOUGHT (if known) OFFICE HELD (if any) 11 OFFICE County Commissioner County Commissioner GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTAL S

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

3011 01(1	& TOTALS			2 of 11
13 C / OH NAME	DeMerchant, Ken		14 Filer ID	
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditur These expenditures may have been made without the difference of the contribution of the contributions are required to report this information of the contributions are required to report this information.	he candidate's or officeh	nolder's knowledge or
Additional Pages	COMMITTEE TYPE GENERAL	COMMITTEE NAME		
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	S	
16 CONTRIBUTION TOTALS		I IIZED POLITICAL CONTRIBUTIONS (OTHER THAN ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		\$ 64.21
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 4,309.21
EXPENDITURE TOTALS	3. TOTAL UNITEM	IIZED POLITICAL EXPENDITURES		\$ 15,408.82
	4. TOTAL POLITIC	CAL EXPENDITURES		\$ 26,833.78
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING P	TAL CONTRIBUTIONS MAINTAINED AS OF THE LA ERIOD	AST DAY OF THE	\$ 53,371.74
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOANS AS (RTING PERIOD	OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT	JACKLYNN JACKS Notary Public, State of Ti My Comm. Exp. 10-19-2 ID No. 133401255	2225 \$ 025 \$		be reported by me
AFFIX NO	TARY STAMP / SEAL AB	OVE		
Sworn to and subso	cribed before me, by the s	aid Individual, Kometh Domeso ertify which, witness my hand and seal of office.	hons the 2	day .
Signature of office	Cer administering	Jacklynn Jacksa Printed name of officer administering	UHCAU Title of officer	dministering oath

SUBTOTALS - C/OH

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

3 of 11

_						
18	FILE	R NAN	1E	19 Filer ID		
	DeN	/lercha	nt, Ken			
20	SCH	IEDUL	E SUBTOTALS			CURTOTAL AMOUNT
	NAM	1E OF		SUBTOTAL AMOUNT		
	1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	3,164.21
	2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	1,145.00
	3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
	4.		SCHEDULE E: LOANS		\$	
	5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS					26,833.78
	6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS					
	7.	7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS				
	8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD				
	9.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$		
	10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
	11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
	12.	X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS OF TO FILER	RETURNED	\$	13.15
\vdash						

MONET	TARY POLITICAL CONTRIBUTIO	NS	SCHEDUI	_E A1
	oction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/11	
2 FILER NAME DeMerchant			3 Filer ID	
4 Date 02/09/2022	5 Full name of contributor out-of-state PAC (ID#:_ Jajoo, Harish 6 Contributor address; City; State; Zip Code 62 Bradford Cir Sugar Land, TX 77479	7 Amount of Contribution (\$)	\$1,000.00	
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	5)	
Date 02/09/2022	Full name of contributor out-of-state PAC (ID#:_ Schmidt, Michael Contributor address; City; State; Zip Code 4312 Pine Harvest Ln	·	Amount of Contribution (\$)	\$2,100.00
Principal occu	Manvel, TX 77578 upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instru	uction Guide explains how to complete this f	1 Total pages Schedule A2: Sch: 1/1 Rpt: 5/11					
2 FILER NAME			3 Filer ID				
DeMerchan	ıt, Ken						
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	\$					
5 Date	6 Full name of contributor out-of-state PAC (ID#:		8 Amount of 9 In-kind contribution				
01/24/2022	Sarah DeMerchant Campaign		contribution (\$) description				
	7 Contributor address; City; State; Zip Code	•••••••••••••••••••••••••••••••••••••••	\$1,000.00 ad				
	TX		Check if travel outside of Texas. Complete Schedule T.				
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	I-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 contributo	or's spouse (if any) (FOR JUDICIAL)				
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)						
Date	Full name of contributor out-of-state PAC (ID#:		Amount of In-kind contribution				
01/24/2022	,		contribution (\$) description				
0112412022			\$145.00 ad				
	Contributor address; City; State; Zip Code						
			l L				
	тх						
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Check if travel outside of Texas. Complete Schedule T. Employer (FOR NON-JUDICIAL) (See instructions)					
Principal occu	spation / Job title (FOR NON-JODICIAE) (GGC management)	Ellibloker (FOR NOW	FJODICIAL) (See Instructions)				
O salbudada	(FOR HIDIOIAL)	Cantrib storia job titla	(FOR HIDIOIAL) (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 contributo	Law firm of contributor's spouse (if any) (FOR JUDICIAL)				
If contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)						
·							
			·				

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement
Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		tee L	-ood/Beverage Expens Gift/Awards/Memorials .egal Services The Instruction Gu	Expense		pens ages	se s/Contract Labor		Travel Out of District OTHER (enter a category not listed abo	ove)
1	Total pages Schedule F1:	2 Fil	ER NAME						3	Filer ID	
	Sch: 1/5 Rpt: 6/11	D€	eMerchant	, Ken							
4	Date	5 Pa	yee name								
	02/08/2022	Αſ	DS*MVR*E	BEEVILLE							
6	Amount (\$) \$1,500.00	7 Pa	yee addres	s; City;	State	; Zip Co	de				
		T	<								
8	PURPOSE	(a) Ca	tegory (See	Categories listed at th	ne top of this sch	nedule)	(b)	Description	_		
	OF EXPENDITURE	1	dvertising E					=		le of Texas. Complete Schedule T. officeholder living expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		didate/Offic	eholder name	(Office sou	ght			Office held	
	Date	Pa	yee name	· · · · · · · · · · · · · · · · · · ·							
	02/14/2022	Ar	mazon								
Г	Amount (\$)	Pa	yee addres	s; City;	State	; Zip Co	de				
	\$365.77	21	.11 7th Ave	е							
		Se	eattle, WA	98121							
Г	PURPOSE	(a) Ca	itegory (See	e Categories listed at th	ne top of this sch	nedule)	(b)	Description			
	OF EXPENDITURE	01	ffice Overh	ead/Rental Exp	ense			_		de of Texas. Complete Schedule T. officeholder living expense	
İ								office supplie		onicendider living expense	
ĺ								omee supplie			
	Complete ONLY if direct expenditure to benefit C/O		ididate/Offic	eholder name	(Office soug	ght			Office held	
	Date	Pa	yee name								
	01/24/2022	DI	VERSIFIE	D PRINTING							
	Amount (\$)	Pa	yee addres	s; City;	State	; Zip Co	de				
	\$1,240.00	10	021 EAST	44 Pl.							
		01	KLAHOMA	, OK 74146				···			
	PURPOSE OF			e Categories listed at th	e top of this sch	nedule}	(b)	Description			
ĺ	EXPENDITURE	Pr	inting Expe	ense		[_		le of Texas. Complete Schedule T. officeholder living expense	
						ļ		printing		•	
L											
	Complete ONLY if direct expenditure to benefit C/OI		didate/Offic	eholder name	(Office soug	ght			Office held	
	experience to benefit C/OI										

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

			_
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID	_
	Sch: 2/5 Rpt: 7/11	DeMerchant, Ken	
4	Date 02/10/2022	5 Payee name DJ Teddi	
6	Amount (\$) \$750.00	7 Payee address; City; State; Zip Code 12720 Southwest Fwy Stafford, TX 77477	
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 event	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	02/07/2022	FORT BEND HERALD	
	Amount (\$) \$700.00	Payee address; City; State; Zip Code	
		TX	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense ad	
_	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	02/03/2022	Fort Bend Independent	_
	Amount (\$) \$659.00	Payee address; City; State; Zip Code 10701 Corporate Dr. #377	
		Stafford, TX 77477	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense ad	
_	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
-			

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

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

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

Legal Services OTHER (enter a category not 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: 3/5 Rpt: 8/11 DeMerchant, Ken Date Payee name 02/14/2022 HEB Payee address; 6 Amount (\$) City; State; Zip Code \$696.00 530 Hwy 6 Sugar Land, TX 77478 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense office supplies Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/10/2022 Hazel Lundy Payee address; Amount (\$) City; State: Zip Code \$367.50 TX **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense labor Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/09/2022 ROSENBERG ROTARY Amount (\$) Payee address; State; Zip Code \$258.75 TX 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 donation Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

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

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

Transportation Equipment & Related Expense Travel in District Travel Out of District

Solicitation/Fundraising Expense

Candidate/Officeholder/Politica Credit Card Payment	al Committee	Legal Services . The Instruction Guid	Salaries/ de explains how to co		s/Contract Labor ete this form.		OTHER (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAM	ΛE				3	Filer ID
Sch: 4/5 Rpt: 9/11	DeMercha						
1 Date	5 Payee nam	e .					
02/14/2022	Robert E.	Hightower					
\$1,177.00	7 Payee add	ress; City;	State; Zip Co	ode			
PURPOSE OF EXPENDITURE		See Categories listed at the g Expense	top of this schedule)	(b)	=		le of Texas. Complete Schedule T. officeholder living expense
Complete ONLY if direct expenditure to benefit C/O		fficeholder name	Office sou	ght			Office held
Date	Payee nam	e					
01/31/2022	Steaks 2 (Crepes					
Amount (\$) \$2,165.00	Payee addr steaks2cre	•	State; Zip Co	de			
	TX						
PURPOSE OF EXPENDITURE		See Categories listed at the erage Expense	top of this schedule)	(b)	=		ie of Texas. Complete Schedule T. officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		fficeholder name	Office sou	ght			Office held
Date	Payee nam	e		_			
01/28/2022	Supreme I						
Amount (\$) \$270.46	Payee addr		State; Zip Co	de			
	TX			,, ·			
PURPOSE OF EXPENDITURE		See Categories listed at the erage Expense	top of this schedule)	(D)			e of Texas. Complete Schedule T. officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF		ficeholder name	Office sou	ght			Office held
orms provided by Texas E	thics Commiss	sion ww	w.ethics.state.tx.u	is			Version V1.1.ab979f

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

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
Travel Out of District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - il Com	mittee	Legal Sen				/ages	/Contract Labor		Travel Out of District OTHER (enter a category not listed above)
L	·				ruction Guide	explains f	TOW TO CO	mpie	ete this form.	_	
1	Total pages Schedule F1:	ı								3	Filer ID
	Sch: 5/5 Rpt: 10/11		DeMerchant	, Ken						L	
4	Date	5	Payee name								
ı	01/31/2022		Tshirt Depot	LLC							
6	Amount (\$)	7	Payee addres	ss; (City;	State;	Zip Co	de			
	\$324.75		1306 FM 10	92 Rd	#408						
			Missouri Cit	y, TX 7	7459						
8	PURPOSE	-	Category (Se			an of this cohe	ndulo)	(b)	Description	_	
ľ	OF		Event Exper		ies iisted at trie to	op or wis sche	edule)	(-,		outsi	de of Texas. Complete Schedule T.
	EXPENDITURE		Event Exper				j		Check if Austin,	, TX,	officeholder living expense
									event		
9	Complete ONLY if direct		andidate/Offic	ceholde	r name	С	ffice sou	ght			Office held
	expenditure to benefit C/Ol	н									
Γ	Date		Payee name								
	01/31/2022		WOWPART	YART							
厂	Amount (\$)		Payee addres	ss; (City;	State;	Zip Co	de			
	\$600.00		WOWPART	YART.	com						
		l									
			TX								
┝	PURPOSE	(a)	Category (Se	- Catana	ing tisted at the te	an of this sale	adula)	(b)	Description		
	OF		Event Exper		ies listeu at trie to	op of this sche	edule)	(-)	_	outsi	de of Texas. Complete Schedule T.
l	EXPENDITURE		Event Exper	.50					Check if Austin	, TX.	officeholder living expense
		İ							event		
Г	Complete ONLY if direct		andidate/Offic	ceholde	r name	C	office sou	ght			Office held
1	expenditure to benefit C/O	Н									
F	Date	Г	Payee name								
	01/24/2022	ł	Wix								
\vdash	Amount (\$)	-	Payee addres	ss; (City;	State:	Zip Co	de			
	\$350.73		,		,.		,				
	+5556										
			TX								
\vdash	BURBOSE	├ -						/h)	Di-i-i-		
	PURPOSE OF		Category (Se			op of this sch	edule)	(a)	Description	Outei	ide of Texas. Complete Schedule T.
	EXPENDITURE		Advertising	⊏xpens	e -						officeholder living expense
									website		
	Complete ONLY if direct		andidate/Offic	ceholde	r name	C	Office sou	ght	· · · · · · · · · · · · · · · · · · ·		Office held
	expenditure to benefit C/O	Н									
\vdash										_	
											•
	,										

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 11/11 3 Filer ID 2 FILER NAME DeMerchant, Ken 4 Date 5 Name of person from whom amount is received 8 Amount (\$) 02/18/2022 \$13.15 Frost Bank 6 Address of person from whom amount is received; City; State; Zip Code 620 State Hwy 6 Sugar Land, TX 77478 Check if political contribution returned to filer 7 Purpose for which amount is received interest

•		