

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: 10								
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR MR. FIRST KENNETH MI S NICKNAME LAST CANNATA SUFFIX	OFFICE USE ONLY JUL 6 2026 RCV									
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS ☐ Change of Address	ADDRESS / PO BOX; 1805 CALLAWAY ROSENBERG TX COVE COURT APT / SUITE #; CITY; 77471 STATE; ZIP CODE										
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE (713) PHONE NUMBER 724-8700 EXTENSION										
6 CAMPAIGN TREASURER NAME	MS / MRS / MR MR. FIRST GARY MI D. NICKNAME LAST JANSEN SUFFIX										
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 2551 LIVE OAK DR. ROSENBERG TX APT / SUITE #; CITY; 77471 STATE; ZIP CODE										
8 CAMPAIGN TREASURER PHONE	AREA CODE (281) PHONE NUMBER 433-3555 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 01 / 01 / 2024 THROUGH Month Day Year 06 / 30 / 2026										
11 ELECTION	ELECTION DATE Month Day Year 11 / 03 / 26 ELECTION TYPE ☐ Primary ☐ Runoff ☐ Other Description ☒ General ☐ Special										
12 OFFICE	OFFICE HELD (if any) Justice of the Peace Pct 3 P12	13 OFFICE SOUGHT (if known) Justice of the Peace Pct 3 P12									
14 NOTICE FROM POLITICAL COMMITTEE(S) ☐ Additional Pages	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 style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%; border: 1px solid black; padding: 2px;">COMMITTEE TYPE</td> <td style="border: 1px solid black; padding: 2px;">COMMITTEE NAME</td> </tr> <tr> <td style="border: 1px solid black; padding: 2px;">☐ GENERAL</td> <td style="border: 1px solid black; padding: 2px;">COMMITTEE ADDRESS</td> </tr> <tr> <td style="border: 1px solid black; padding: 2px;">☐ SPECIFIC</td> <td style="border: 1px solid black; padding: 2px;">COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td style="border: 1px solid black; padding: 2px;"></td> <td style="border: 1px solid black; padding: 2px;">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										

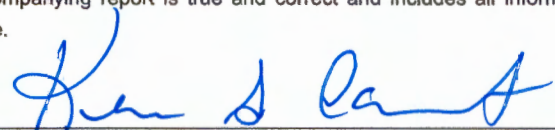
GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME <u>Kenneth S. Cannata</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>0</u>
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <u>1000</u>
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ <u>0</u>
	4. TOTAL POLITICAL EXPENDITURES	\$ <u>11,796.38</u>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ <u>2824.41</u>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>13,500</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.


Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by _____ this the _____ day of _____, 20 _____, to certify which, witness my hand and seal of office.

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

(2) Unsworn Declaration

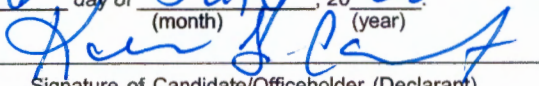
My name is Kenneth S. Cannata, and my date of birth is _____.

My address is 1805 Callaway Cove Ct. Rosenberg, TX 77471 USA.

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

Executed in Fort Bend County, State of Texas, on the 6th day of July, 2026.

(month) (year)


Signature of Candidate/Officeholder (Declarant)

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:

1

2 FILER NAME

Kenneth S. Cannata

3 Filer ID (Ethics Commission Filers)

4 Date

2/2/26

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Gary L. Gillen

7 Amount of contribution (\$)

1,000⁰⁰

6 Contributor address; City; State; Zip Code

1012 Morton St. Richmond TX 77471

8 Principal occupation / Job title (See Instructions)

RETIRED

9 Employer (See Instructions)

N/A

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)

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)

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)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

LOANS

SCHEDULE E

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 E: 2
2 FILER NAME Kenneth S. Cannata		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$ 0
5 Date of loan 1/09/26	7 Name of lender ☐ out-of-state PAC (ID#: _____) Kenneth S. Cannata	9 Loan Amount (\$) 500.00
6 Is lender a financial Institution? Y (N)	8 Lender address; City; State; Zip Code 1805 Callaway Cove Court Rosenberg TX 77471	10 Interest rate 0
		11 Maturity date N/A
12 Principal occupation / Job title (See Instructions) Justice of the Peace		13 Employer (See Instructions) Fort Bend County
14 Description of Collateral ☒ none		15 ☒ Check if personal funds were deposited into political account (See Instructions)
16 GUARANTOR INFORMATION ☒ not applicable	17 Name of guarantor N/A	19 Amount Guaranteed (\$) N/A
18 Guarantor address; City; State; Zip Code N/A		
20 Principal Occupation (See Instructions) N/A		21 Employer (See Instructions) N/A
Date of loan 3/16/26	Name of lender ☐ out-of-state PAC (ID#: _____) Kenneth S. Cannata	Loan Amount (\$) 5000.00
Is lender a financial Institution? Y (N)	Lender address; City; State; Zip Code 1805 Callaway Cove Ct. Rosenberg TX 77071	Interest rate 0
		Maturity date N/A
Principal occupation / Job title (See Instructions) Justice of the Peace		Employer (See Instructions) Fort Bend County
Description of Collateral ☒ none		☒ Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION ☒ not applicable	Name of guarantor N/A	Amount Guaranteed (\$) N/A
Guarantor address; City; State; Zip Code N/A		
Principal Occupation (See Instructions) N/A		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

LOANS

SCHEDULE E

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 E: 2	
2 FILER NAME Kenneth S. Cannata			3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED LOANS			\$	
5 Date of loan 5/1/26	7 Name of lender ☐ out-of-state PAC (ID#:) Kenneth S. Cannata		9 Loan Amount (\$) 24000	
6 Is lender a financial institution? Y (N)	8 Lender address; City; State; Zip Code 1805 Callaway Lane Ct. Rosenberg TX 77471		10 Interest rate 0	
			11 Maturity date N/A	
12 Principal occupation / Job title (See Instructions) Justice of the Peace		13 Employer (See Instructions) Fort Bend County		
14 Description of Collateral ☒ none		15 ☒ Check if personal funds were deposited into political account (See Instructions)		
16 GUARANTOR INFORMATION ☒ not applicable	17 Name of guarantor N/A		19 Amount Guaranteed (\$) N/A	
	18 Guarantor address; City; State; Zip Code N/A			
20 Principal Occupation (See Instructions) N/A		21 Employer (See Instructions) N/A		
Date of loan 6/24/26	Name of lender ☐ out-of-state PAC (ID#:) Kenneth S. Cannata		Loan Amount (\$) 4000.00	
Is lender a financial institution? Y N	Lender address; City; State; Zip Code 1805 Callaway Lane Ct Rosenberg TX 77471		Interest rate 0	
			Maturity date N/A	
Principal occupation / Job title (See Instructions) Justice of the Peace		Employer (See Instructions) Fort Bend County		
Description of Collateral ☒ none		☒ Check if personal funds were deposited into political account (See Instructions)		
GUARANTOR INFORMATION ☒ not applicable	Name of guarantor N/A		Amount Guaranteed (\$) N/A	
	Guarantor address; City; State; Zip Code N/A			
Principal Occupation (See Instructions) N/A		Employer (See Instructions) N/A		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If lender 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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <u>3</u>		2 FILER NAME <u>Kenneth S. Cannata</u>		3 Filer ID (Ethics Commission Filers)	
4 Date <u>1/20/26</u>		5 Payee name <u>Wells Fargo</u>			
6 Amount (\$) <u>46.88</u>		7 Payee address; City; State; Zip Code <u>6511 Reading Rd. Rosenberg TX 77471</u>			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <u>BANK CHARGES</u>		(b) Description <u>Check fee</u>		
	(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 <u>Kenneth S. Cannata</u> Office sought <u>JP 3-2</u> Office held <u>JP 3-2</u>					
Date <u>2/2/26</u>		Payee name <u>Commerce</u> <u>Needville Area Chamber of Needville TX</u>			
Amount (\$) <u>300⁰⁰</u>		Payee address; City; State; Zip Code <u>803 LINE ST. Needville TX 77461</u>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>ADVERTISING</u>		Description <u>Sponsorship of BANQUET</u>		
	☐ 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 <u>Kenneth S. Cannata</u> Office sought <u>JP 3-2</u> Office held <u>JP 3-2</u>					
Date <u>3/14/24</u>		Payee name <u>Fort Bend County Republican Party</u>			
Amount (\$) <u>500⁰⁰</u>		Payee address; City; State; Zip Code <u>14019 Southwest Fwy. #340 SUGAR LAND TX 77478</u>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>ADVERTISING</u>		Description <u>Sponsorship of Senatorial Dist. Convention</u>		
	☐ 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 <u>Kenneth S. Cannata</u> Office sought <u>JP 3-2</u> Office held <u>JP 3-2</u>					
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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 3		2 FILER NAME KENNETH S. Cannata		3 Filer ID (Ethics Commission Filers)	
4 Date 4/4/26		5 Payee name Fort Bend County Republican Party			
6 Amount (\$) 5,000		7 Payee address; City; State; Zip Code 14019 Southwest Fwy #340 SUGAR LAND TX 77478			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions		(b) Description JUDICIAL CANDIDATE FUND		
	(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 KENNETH S. CANNATA					
Date 5/9/26		Payee name Needville Little League Needville TX 77461			
Amount (\$) 500⁰⁰		Payee address; City; State; Zip Code P.O. Box 1135 Needville TX 77461			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) DONATION		Description Auction Item		
	☐ 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 Kenneth S. Cannata					
Date 6/24/26		Payee name Neumann Avel Company Bellaire TX 77401			
Amount (\$) 2828.71		Payee address; City; State; Zip Code 5417 Pine Street Bellaire TX 77401			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) ADVERTISING		Description PRINTING		
	☐ 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 Kenneth S. Cannata					
Date		Payee name			
Amount (\$)		Payee address; City; State; Zip Code			
Candidate / Officeholder name Kenneth S. Cannata					
Date		Payee name			
Amount (\$)		Payee address; City; State; Zip Code			
Candidate / Officeholder name Kenneth S. Cannata					
Date		Payee name			
Amount (\$)		Payee address; City; State; Zip Code			
Candidate / Officeholder name Kenneth S. Cannata					

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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <u>3</u>	2 FILER NAME <u>Kenneth S. Cannata</u>	3 Filer ID (Ethics Commission Filers)
4 Date <u>6/16/26</u>	5 Payee name <u>Fort Bend County Republican Party</u>	
6 Amount (\$) <u>1,000</u>	7 Payee address; City; State; Zip Code <u>14019 Southwest Fwy # 340 SUGAR LAND TX 77478</u>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <u>Fees</u>	(b) Description <u>Filing Fees</u>
	(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 <u>Kenneth S. Cannata</u> Office sought <u>JP 3-2</u> Office held <u>JP 3-2</u>	
Date <u>6/17/26</u>	Payee name <u>David Bijardo</u>	
Amount (\$) <u>1500</u>	Payee address; City; State; Zip Code <u>3880 FM 961 Rd Wharton TX 77478</u>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Event Expenses</u>	Description <u>Event Entertainment</u>
	☐ 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 <u>Kenneth S. Cannata</u> Office sought <u>JP 3-2</u> Office held <u>JP 3-2</u>	
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 <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

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

1 TOTAL PAGES
SCHEDULE F4:

1

2 FILER NAME

Kenneth S. Cannata

3 FILER ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD

\$ 0

5 CREDIT CARD
ISSUER

CHASE

Name of financial institution

J.P. Morgan Chase Bank

6 PAYMENT

4279

(a) Amount Charged

\$ 42.79

(b) Date Expenditure Charged

5/5/26

(c) Date(s) Credit Card Issuer Paid

6/27/26

7 PAYEE

Main-Event

(a) Payee name

MAIN-EVENT

(b) Payee address;

City,

State,

Zip Code

2033 Ave H Rosenberg Tx 77471

8 PURPOSE OF
EXPENDITURE



Political



Non-Political

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

ADVERTISEMENT

(b) Description

Embroidery on shirts

(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

Kenneth S Cannata

Office Sought

JP 3-2

Office Held

JP 3-2

PAYMENT

78.00

(a) Amount Charged

\$ 78.00

(b) Date Expenditure Charged

5/11/26

(c) Date(s) Credit Card Issuer Paid

6/27/26

PAYEE

USPS

(a) Payee name

USPS

(b) Payee address;

City,

State,

Zip Code

3000 School Rd. Needville Tx 77461

PURPOSE OF
EXPENDITURE



Political



Non-Political

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

ADVERTISING

(b) Description

Postage

(c) ☐ 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

PAYMENT

(a) Amount Charged

\$

(b) Date Expenditure Charged

(c) Date(s) Credit Card Issuer Paid

PAYEE

(a) Payee name

(b) Payee address;

City,

State,

Zip Code

PURPOSE OF
EXPENDITURE



Political



Non-Political

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

(b) Description

(c) ☐ 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

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: 1	2 FILER NAME Kenneth S. Cannata	3 Filer ID (Ethics Commission Filers)
4 Date 6/07/26	5 Payee name J.P. Morgan Chase	
6 Amount (\$) 120.79 ☒ Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 270 PARK AVE New York N.Y 10017	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	
	(b) Description USPS / MAIN Event Charges	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held KENNETH S CANNATA JP 3-2 JP 3-2		
Date	Payee name	
Amount (\$) ☐ Reimbursement from political contributions intended	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 <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date	Payee name	
Amount (\$) ☐ Reimbursement from political contributions intended	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 <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		

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