

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 2

15 JC/OH NAME <i>Tricia K. Krenek</i>		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)	\$ <i>0</i>
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <i>5,009.⁰⁰</i>
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ <i>0</i>
	4. TOTAL POLITICAL EXPENDITURES	\$ <i>10,441.³²</i>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ <i>6,363.⁰⁴</i>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <i>5,000.⁰⁰</i>

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.

Tricia K. Krenek

Signature of Candidate/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 *Tricia K. Krenek*, and my date of birth is *5/12/78*.

My address is *6645 FM 1463, Suite 160-101*, *Katy*, *TX*, *77494*, *USA*.
(street) (city) (state) (zip code) (country)

Executed in *Fort Bend* County, State of *Texas*, on the *14* day of *January*, 20 *26*.
(month) (year)

Tricia K. Krenek

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - JC/OH

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

19 FILER NAME <i>Tricia K. Krenek</i>		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ <i>5,009.⁰⁰</i>
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. <input type="checkbox"/> SCHEDULE E: LOANS		\$
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$ <i>91.⁹⁶</i>
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS		\$
8. <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ <i>3,299.⁶⁸</i>
9. <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS		\$ <i>7,049.⁶⁸</i>
10. <input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH		\$
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER		\$

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

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 A(J)1: Rpt: 4/14 Sch: 1/8
2 FILER NAME Tricia K. Krenek		3 Filer ID (Ethics Commission Filers)
4 Date 11/15/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Bach Williams	7 Amount of contribution (\$) 100.⁰⁰
6 Contributor address; City; State; Zip Code 8505 Graceful Oaks Crossing Katy, TX 77494		
8 Contributor's principal occupation retired		9 Contributor's job title retired
10 Contributor's employer/law firm retired		11 Law firm of contributor's spouse (if any) n/a
12 If contributor is a child, law firm of parent(s) (if any)		

Date 11/15/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Melissa Blanscet	Amount of contribution (\$)
Contributor address; City; State; Zip Code 4604 Westerdale Dr., Weston Lakes, TX 77441		200.⁰⁰
Contributor's principal occupation retired		Contributor's job title retired
Contributor's employer/law firm retired		Law firm of contributor's spouse (if any) n/a
If contributor is a child, law firm of parent(s) (if any)		

Date 11/18/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Dennis Scott	Amount of contribution (\$)
Contributor address; City; State; Zip Code 3526 Grayson Gardens Ct. Fulshear, TX 77441		50.⁰⁰
Contributor's principal occupation retired		Contributor's job title retired
Contributor's employer/law firm retired		Law firm of contributor's spouse (if any) n/a
If contributor is a child, law firm of parent(s) (if any)		

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 (JUDICIAL)

SCHEDULE A(J)1

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 A(J)1:

Rpt: 5/14 Sch: 2/8

2 FILER NAME

Tricia K. Krenek

3 Filer ID (Ethics Commission Filers)

4 Date

11/19/25

5 Full name of contributor

Margaret Daniel

out-of-state PAC ID#: _____

6 Contributor address; City; State; Zip Code

25507 Winston Hollow Ln. Katy, TX 77494

7 Amount of contribution (\$)

109.⁰⁰

8 Contributor's principal occupation

retired

9 Contributor's job title

retired

10 Contributor's employer/law firm

retired

11 Law firm of contributor's spouse (if any)

n/a

12 If contributor is a child, law firm of parent(s) (if any)

Date

11/19/25

Full name of contributor

Rebecca Rogers

out-of-state PAC ID#: _____

Contributor address; City; State; Zip Code

9525 Roesler Road Needville, TX 77461

Amount of contribution (\$)

100.⁰⁰

Contributor's principal occupation

Homeschool Teacher

Contributor's job title

Teacher

Contributor's employer/law firm

n/a

Law firm of contributor's spouse (if any)

n/a

If contributor is a child, law firm of parent(s) (if any)

Date

11/19/25

Full name of contributor

Martha Scheibel

out-of-state PAC ID#: _____

Contributor address; City; State; Zip Code

6126 Oxford Lake Dr. Rosenberg, TX 77471

Amount of contribution (\$)

100.⁰⁰

Contributor's principal occupation

Deputy / Law Enforcement

Contributor's job title

Deputy Constable

Contributor's employer/law firm

Fort Bend County

Law firm of contributor's spouse (if any)

n/a

If contributor is a child, law firm of parent(s) (if any)

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
(JUDICIAL)**

SCHEDULE A(J)1

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 A(J)1:

Rpt: 6/14 Sch: 3/8

2 FILER NAME

Tricia K. Krenek

3 Filer ID (Ethics Commission Filers)

4 Date

11/19/25

5 Full name of contributor out-of-state PAC ID#: _____

Rachel Durham

6 Contributor address; City; State; Zip Code

5626 Westerdale Dr. Weston Lakes, TX 77441

7 Amount of contribution (\$)

100.⁰⁰

8 Contributor's principal occupation

Executive/Administrative

9 Contributor's job title

Vice President

10 Contributor's employer/law firm

Fulshear Regional Chamber for Commerce

11 Law firm of contributor's spouse (if any)

n/a

12 If contributor is a child, law firm of parent(s) (if any)

Date

11/19/25

Full name of contributor out-of-state PAC ID#: _____

Melissa Blanscet

Contributor address; City; State; Zip Code

4604 Westerdale Dr. Weston Lakes, TX 77441

Amount of contribution (\$)

50.⁰⁰

Contributor's principal occupation

retired

Contributor's job title

retired

Contributor's employer/law firm

retired

Law firm of contributor's spouse (if any)

n/a

If contributor is a child, law firm of parent(s) (if any)

Date

11/20/25

Full name of contributor out-of-state PAC ID#: _____

Tamara McFarlane

Contributor address; City; State; Zip Code

2002 Anchor Lake Ln. Katy, TX 77494

Amount of contribution (\$)

200.⁰⁰

Contributor's principal occupation

Real Estate

Contributor's job title

Realtor

Contributor's employer/law firm

self

Law firm of contributor's spouse (if any)

n/a

If contributor is a child, law firm of parent(s) (if any)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

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 A(J)1: Rpt: 7 / 14 Sch: 4 / 8
2 FILER NAME Tricia K. Krennek		3 Filer ID (Ethics Commission Filers)
4 Date 11/21/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Jacob Lee	7 Amount of contribution (\$) 100.⁰⁰
6 Contributor address; City; State; Zip Code 627 Royal Lakes Blvd. Richmond, TX 77469		
8 Contributor's principal occupation consultant		9 Contributor's job title consultant
10 Contributor's employer/law firm self		11 Law firm of contributor's spouse (if any) n/a
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/22/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Karen Scott	Amount of contribution (\$) 100.⁰⁰
Contributor address; City; State; Zip Code 3526 Grayson Gardens Ct. Fulshear, TX 77441		
Contributor's principal occupation retired		Contributor's job title retired
Contributor's employer/law firm retired		Law firm of contributor's spouse (if any) n/a
If contributor is a child, law firm of parent(s) (if any)		
Date 12/1/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Thomas Zuccaro	Amount of contribution (\$) 1,000.⁰⁰
Contributor address; City; State; Zip Code 21907 Rustic Canyon Ln. Richmond, TX 77469		
Contributor's principal occupation unk		Contributor's job title unk
Contributor's employer/law firm unk		Law firm of contributor's spouse (if any) unk
If contributor is a child, law firm of parent(s) (if any)		

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
(JUDICIAL)**

SCHEDULE A(J)1

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 A(J)1: Rpt: 8/14 Sch: 5/8
2 FILER NAME Tricia K. Krenek		3 Filer ID (Ethics Commission Filers)
4 Date 11/19/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Michael W. Elliott	7 Amount of contribution (\$) 750.⁰⁰
6 Contributor address; City; State; Zip Code 1207 3rd Street Rosenberg, TX 77471		
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney
10 Contributor's employer/law firm Self		11 Law firm of contributor's spouse (if any) n/a
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/19/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Daniel Wong	Amount of contribution (\$) 500.⁰⁰
Contributor address; City; State; Zip Code 1 Big Trail Missouri City, TX 77459		
Contributor's principal occupation Engineer		Contributor's job title Owner
Contributor's employer/law firm Tolunay - Wong Engineers		Law firm of contributor's spouse (if any) n/a
If contributor is a child, law firm of parent(s) (if any)		
Date 11/19/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Laura S. Cannata	Amount of contribution (\$) 250.⁰⁰
Contributor address; City; State; Zip Code 1805 Callaway Cove Ct. Rosenberg, TX 77471		
Contributor's principal occupation retired		Contributor's job title retired
Contributor's employer/law firm retired		Law firm of contributor's spouse (if any) n/a
If contributor is a child, law firm of parent(s) (if any)		

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
(JUDICIAL)**

SCHEDULE A(J)1

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 A(J)1:

Rpt: 9/14 Sch: 6/8

2 FILER NAME

Tricia K. Krennek

3 Filer ID (Ethics Commission Filers)

4 Date

11/20/25

5 Full name of contributor out-of-state PAC ID#: _____

Elizabeth Hanson

6 Contributor address; City; State; Zip Code

4705 Middlecoak Grove Ln. Katy, TX 77494

7 Amount of contribution (\$)

100.⁰⁰

8 Contributor's principal occupation

retired

9 Contributor's job title

retired

10 Contributor's employer/law firm

retired

11 Law firm of contributor's spouse (if any)

n/a

12 If contributor is a child, law firm of parent(s) (if any)

Date

11/19/25

Full name of contributor out-of-state PAC ID#: _____

Michael Moore

Contributor address; City; State; Zip Code

6028 Rawlings Rd. Needville, TX 77461

Amount of contribution (\$)

100.⁰⁰

Contributor's principal occupation

Municipal Judge

Contributor's job title

Judge

Contributor's employer/law firm

Fort Bend Co.

Law firm of contributor's spouse (if any)

n/a

If contributor is a child, law firm of parent(s) (if any)

Date

11/19/25

Full name of contributor out-of-state PAC ID#: _____

Shena Ureste

Contributor address; City; State; Zip Code

7707 Bayou Green Ln. Sugar Land, TX 77479

Amount of contribution (\$)

100.⁰⁰

Contributor's principal occupation

Healthcare

Contributor's job title

CEO

Contributor's employer/law firm

Texana Center

Law firm of contributor's spouse (if any)

n/a

If contributor is a child, law firm of parent(s) (if any)

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 (JUDICIAL)

SCHEDULE A(J)1

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 A(J)1: Rpt: 10 / 14 Sch: 7 / 8
2 FILER NAME Tricia K. Krennek		3 Filer ID (Ethics Commission Filers)
4 Date 11/19/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Yvonne Ramsey	7 Amount of contribution (\$) 100.⁰⁰
6 Contributor address; City; State; Zip Code 5603 Mimosa Lane Richmond, TX 77406		
8 Contributor's principal occupation retired		9 Contributor's job title retired
10 Contributor's employer/law firm retired		11 Law firm of contributor's spouse (if any) n/a
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/19/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Rodney Pavlock	Amount of contribution (\$) 200.⁰⁰
Contributor address; City; State; Zip Code P.O. Box 66 Orchard TX 77464		
Contributor's principal occupation Real Estate		Contributor's job title Realtor
Contributor's employer/law firm self		Law firm of contributor's spouse (if any) n/a
If contributor is a child, law firm of parent(s) (if any)		
Date 11/19/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Nita Sulak	Amount of contribution (\$) 200.⁰⁰
Contributor address; City; State; Zip Code P.O. Box 252 Orchard TX 77464		
Contributor's principal occupation retired		Contributor's job title retired
Contributor's employer/law firm retired		Law firm of contributor's spouse (if any) n/a
If contributor is a child, law firm of parent(s) (if any)		
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

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 A(J)1:

Rpt: 11/14 Sch: 8/8

2 FILER NAME

Tricia K. Krenek

3 Filer ID (Ethics Commission Filers)

4 Date

11/19/25

5 Full name of contributor out-of-state PAC ID#: _____

Alena Heede

7 Amount of contribution (\$)

5000.00

6 Contributor address; City; State; Zip Code

6011 Cross Creek Harbor Ln.
Fulshear, TX 77441

8 Contributor's principal occupation

retired

9 Contributor's job title

retired

10 Contributor's employer/law firm

retired

11 Law firm of contributor's spouse (if any)

n/a

12 If contributor is a child, law firm of parent(s) (if any)

Date

Full name of contributor out-of-state PAC ID#: _____

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Contributor's principal occupation

Contributor's job title

Contributor's employer/law firm

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

Date

Full name of contributor out-of-state PAC ID#: _____

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Contributor's principal occupation

Contributor's job title

Contributor's employer/law firm

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

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 | 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: <i>Rpt: 12/14 Sch: 1/1</i>	2 FILER NAME <i>Tricia K. Krennek</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>12/1/25</i>	5 Payee name <i>Anedot</i>	
6 Amount (\$) <i>91.96</i>	7 Payee address; <i>1340 Poydras Street</i> <i>Suite 1770</i> City: <i>New Orleans</i> State: <i>LA</i> Zip Code: <i>70112</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Accounting / Banking</i>	(b) Description <i>Service Fee</i>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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 (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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	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)

The Instruction Guide explains how to complete this form.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

1 TOTAL PAGES Rpt 13/14 SCHEDULE F4: Sch 1/1	2 FILER NAME Tricia K. Krennek	3 FILER ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 0	
5 CREDIT CARD ISSUER	Name of financial institution Discover		
6 PAYMENT	(a) Amount Charged \$ 2,137. ⁹⁴	(b) Date Expenditure Charged 11/11/25	(c) Date(s) Credit Card Issuer Paid 11/29/25
7 PAYEE	(a) Payee name NBD Graphics	(b) Payee address; City, State, Zip Code 917 Mason Rd. Katy TX 77450	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description Campaign Signage
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office Sought	Office Held
PAYMENT	(a) Amount Charged \$ 1,161. ⁷⁴	(b) Date Expenditure Charged 11/20/25	(c) Date(s) Credit Card Issuer Paid 11/29/25
PAYEE	(a) Payee name LSU Hacienda Real	(b) Payee address; City, State, Zip Code 11605 S. Fry Rd. #101 Fulshear, TX 77444	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Catering for Kick-off Event
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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 <input type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule)		(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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: Rpt: 1/14 Sch: 1/1	2 FILER NAME Tricia K. Krenek	3 Filer ID (Ethics Commission Filers)
4 Date 11/14/25	5 Payee name Philip Torres	
6 Amount (\$) 2,750. ⁰⁰ <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 405 San Jose Street Richmond, TX 77409	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor	(b) Description Sign Contractor
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> 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 11/29/25	Payee name Discover	
Amount (\$) 3,299. ⁰⁰ <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code P.O. Box 6103 Carol Stream IL 60197-6103	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Credit Card Payment	Description Signage; Catering
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/8/25	Payee name Fort Bend County Republican Party	
Amount (\$) 1,000. ⁰⁰ <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code P.O. Box 461 Sugar Land, TX 77487-0461	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other	Description Candidate Filing Fee
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> 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