

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

<b>The C/OH Instruction Guide explains how to complete this form.</b>		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: <b>9</b>			
<b>3 CANDIDATE / OFFICEHOLDER NAME</b>	MS / MRS / MR <b>Mr.</b>	FIRST <b>Dusty</b>	MI <b>L</b>	<b>OFFICE USE ONLY</b>  Date Received <div style="font-size: 2em; color: blue; font-weight: bold; text-align: center;">RECEIVED</div> <div style="color: red; font-weight: bold; text-align: center;">APR 25 2024</div> <div style="color: blue; font-weight: bold; text-align: center;">2:40pm</div> <div style="color: blue; font-weight: bold; text-align: center;">BY: Joshua Kuykendall</div>		
	NICKNAME	LAST <b>Kuykendall</b>	SUFFIX			
<b>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</b>	ADDRESS / PO BOX; [REDACTED]		APT / SUITE #;			
	CITY; <b>Lucas</b>	STATE; <b>TX</b>	ZIP CODE <b>75002</b>			
<input type="checkbox"/> Change of Address						
<b>5 CANDIDATE / OFFICEHOLDER PHONE</b>	AREA CODE	PHONE NUMBER	EXTENSION	Date Hand-delivered or Date Postmarked <b>4/25/24</b>  Receipt #      Amount \$  Date Processed <b>4/25/24</b> Date Imaged <b>4/25/24</b>		
	[REDACTED]					
<b>6 CAMPAIGN TREASURER NAME</b>	MS / MRS / MR <b>Mr.</b>	FIRST <b>Rajan</b>	MI			
	NICKNAME	LAST <b>Shah</b>	SUFFIX			
<b>7 CAMPAIGN TREASURER ADDRESS</b>						
STREET ADDRESS (NO PO BOX PLEASE); [REDACTED]		APT / SUITE #;	CITY; <b>Lucas</b>	STATE; <b>TX</b>	ZIP CODE <b>75002</b>	
<b>8 CAMPAIGN TREASURER PHONE</b>						
[REDACTED]						
<b>9 REPORT TYPE</b>	<input type="checkbox"/> January 15		<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)	
	<input type="checkbox"/> July 15		<input checked="" type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded Modified Reporting Limit	<input type="checkbox"/> Final Report (Attach C/OH - FR)	
<b>10 PERIOD COVERED</b>	Month	Day	Year	Month	Day	Year
	<b>03</b>	<b>26</b>	<b>2024</b>	THROUGH	<b>04</b>	<b>24</b>
<b>11 ELECTION</b>	ELECTION DATE			ELECTION TYPE		
	Month	Day	Year	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other Description
<b>05 / 04 / 2024</b>			<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special		
<b>12 OFFICE</b>	OFFICE HELD (if any)			OFFICE SOUGHT (if known)		
	<b>City of Lucas City Council Seat 2</b>			<b>City of Lucas Mayor</b>		
<b>14 NOTICE FROM POLITICAL COMMITTEE(S)</b>	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.					
	COMMITTEE TYPE	COMMITTEE NAME				
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS				
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME				
	COMMITTEE CAMPAIGN TREASURER ADDRESS					
<input type="checkbox"/> Additional Pages						


GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

<b>15 C/OH NAME</b> Dusty Kuykendall		<b>16 Filer ID</b> (Ethics Commission Filers)
<b>17 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 2,811.89
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 143.70
	4. TOTAL POLITICAL EXPENDITURES	\$ 3,806.92
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 312.18
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 25.00

**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

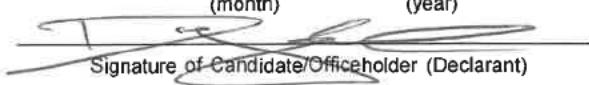
OR

**(2) Unsworn Declaration**

My name is Dusty L Kuykendall, and my date of birth is 10/08/1983

My address is \_\_\_\_\_, Lucas \_\_\_\_\_, TX \_\_\_\_\_, 75002 \_\_\_\_\_, USA \_\_\_\_\_  
(street) (city) (state) (zip code) (country)

Executed in Collin County, State of TX, on the 25 day of April, 2024  
(month) (year)

  
 Signature of Candidate/Officeholder (Declarant)

# SUBTOTALS - C/OH

FORM C/OH  
COVER SHEET PG 3

19 FILER NAME  
Dusty Kuykendall

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 2,661.89
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 150.00
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. <input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 25.00
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 3,806.92
6. <input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 2,221.94
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9. <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
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

# 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: 2
2 FILER NAME Dusty Kuykendall		3 Filer ID (Ethics Commission Filers)
4 Date 4/6/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greg & Linda mith	7 Amount of contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code [REDACTED] Lucas TX 75098		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 4/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dan Holsonback	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code [REDACTED] Lucas TX 75002		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/15/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dennis Black	Amount of contribution (\$) \$1,631.89
Contributor address; City; State; Zip Code [REDACTED] Lucas TX 75002		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deborah & Greg Jacobs	Amount of contribution (\$) \$200.00
Contributor address; City; State; Zip Code [REDACTED] Lucas TX 75002		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> 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.

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 2
<b>2</b> FILER NAME Dusty Kuykendall		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 4/23/24	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dennis Black	<b>7</b> Amount of contribution (\$) \$630.00
	<b>6</b> Contributor address; City; State; Zip Code [REDACTED] Lucas TX 75002	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
<b>Date</b>	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) ..... <b>Contributor address;</b> City; State; Zip Code	<b>Amount of contribution (\$)</b>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b>	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) ..... <b>Contributor address;</b> City; State; Zip Code	<b>Amount of contribution (\$)</b>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b>	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) ..... <b>Contributor address;</b> City; State; Zip Code	<b>Amount of contribution (\$)</b>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>

**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: 1	
2 FILER NAME Dusty Kuykendall		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$150.00	
5 Date	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brad Wilkerson	8 Amount of Contribution \$ \$150.00	9 In-kind contribution description Soda, Snacks, Wine
	7 Contributor address; City; State; Zip Code [REDACTED] Lucas TX 75002	<input type="checkbox"/> 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	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of Contribution \$	In-kind contribution description
		<input type="checkbox"/> 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)			
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>			

# LOANS

# SCHEDULE E

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule E: 1
<b>2</b> FILER NAME Dusty Kuykendall		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> TOTAL OF UNITEMIZED LOANS		\$ 25.00
<b>5</b> Date of loan 12/22/23	<b>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dusty Kuykendall	<b>9</b> Loan Amount (\$) \$25.00
<b>6</b> Is lender a financial institution? Y <input checked="" type="checkbox"/> N	<b>8</b> Lender address; City; State; Zip Code [REDACTED] Lucas TX 75002	<b>10</b> Interest rate 0.00
		<b>11</b> Maturity date 05/05/2024
<b>12</b> Principal occupation / Job title (See Instructions)		<b>13</b> Employer (See Instructions)
<b>14</b> Description of Collateral <input checked="" type="checkbox"/> none		<b>15</b> <input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
<b>16</b> GUARANTOR INFORMATION  <input type="checkbox"/> not applicable	<b>17</b> Name of guarantor	<b>19</b> Amount Guaranteed (\$)
	<b>18</b> Guarantor address; City; State; Zip Code	
<b>20</b> Principal Occupation (See Instructions)		<b>21</b> Employer (See Instructions)
Date of loan	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____ )	Loan Amount (\$)
Is lender a financial institution? Y N	Lender address; City; State; Zip Code	Interest rate
		Maturity date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral <input type="checkbox"/> none		<input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION  <input type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal Occupation (See Instructions)		Employer (See Instructions)

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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.

<b>1</b> Total pages Schedule F1: <b>1</b>	<b>2</b> FILER NAME <b>Dusty Kuykendall</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>4/16/24</b>	<b>5</b> Payee name <b>Precision Reprographics</b>	
<b>6</b> Amount (\$) <b>\$2,879.94</b>	<b>7</b> Payee address; <b>3102 Benton St.</b>	City; State; Zip Code <b>Garland TX 75042</b>
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>Political Advertising</b>	<b>(b)</b> Description <b>Political Mailers</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <b>4/16/2024</b>	Payee name <b>Vimeo</b>	
Amount (\$) <b>\$155.88</b>	Payee address; <b>330 West 34th St</b>	City; State; Zip Code <b>New York NY 10001</b>
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Political Advertising</b>	Description <b>Video Editing &amp; Publishing Software</b>
	<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 <b>4/24/2024</b>	Payee name <b>Precision Reprographics</b>	
Amount (\$) <b>\$627.40</b>	Payee address; <b>3102 Benton St.</b>	City; State; Zip Code <b>Garland TX 75042</b>
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Political Advertising</b>	Description <b>Political Mailers</b>
	<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**



# 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                        | 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.

<b>1</b> Total pages Schedule F2: 1	<b>2</b> FILER NAME Dusty Kuykendall	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS		<b>\$ 2,221.94</b>
<b>5</b> Date 3/24/2024	<b>6</b> Payee name PaceGFX	
<b>7</b> Amount (\$) \$2,221.94	<b>8</b> Payee address; 2605 Technology Dr #360,	City; Plano State; TX Zip Code 75074
<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Political Advertising	<b>(b)</b> Description Political Signs
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>11</b> 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
<b>TYPE OF EXPENDITURE</b>	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political	
<b>PURPOSE OF EXPENDITURE</b>	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

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