

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: |
| 3 CANDIDATE / OFFICEHOLDER NAME | MS / MRS / MR Mr. Kenny NICKNAME LAST Edwards | MI W SUFFIX | OFFICE USE ONLY Date Received FILE FOR RECORD JAN 14 2026 SUSAN STRICKLAND COUNTY CLERK VAN ZANDT COUNTY BY _____ |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 600 FM 2339 Ben Wheeler, TX 75754 | | Date Hand-delivered or Date Postmarked |
| 5 CANDIDATE / OFFICEHOLDER PHONE | AREA CODE () | PHONE NUMBER () | EXTENSION |
| 6 CAMPAIGN TREASURER NAME | MS / MRS / MR Mrs. Cindy NICKNAME LAST Edwards | MI J SUFFIX | Receipt # Amount \$ Date Processed Date Imaged |
| 7 CAMPAIGN TREASURER ADDRESS (Residence or Business) | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 600 FM 2339 Ben Wheeler, TX 75754 | | |
| 8 CAMPAIGN TREASURER PHONE | AREA CODE () | PHONE NUMBER () | EXTENSION |
| 9 REPORT TYPE | <input checked="" 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 type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH - FR) | | |
| 10 PERIOD COVERED | Month Day Year 7 / 1 / 25 THROUGH 12 / 31 / 25 Month Day Year | | |
| 11 ELECTION | ELECTION DATE Month Day Year / / | ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special | |
| 12 OFFICE | OFFICE HELD (If any) Van Zandt County Treasurer | 13 OFFICE SOUGHT (If known) Van Zandt County Treasurer | |

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME

15 Filer ID (Ethics Commission Filers)

16 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.

COMMITTEE TYPE

COMMITTEE NAME

☐ GENERAL

☐ SPECIFIC

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ Additional Pages

17 CONTRIBUTION
TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ 0.00

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 0.00

EXPENDITURE
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED

\$ 0.00

4. TOTAL POLITICAL EXPENDITURES

\$ 750.00

CONTRIBUTION
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

\$ 0.00

OUTSTANDING
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ 750.00

18 AFFIDAVIT



AFFIX NOTARY SEAL ABOVE

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.

Kenny Edwards
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Kenny Edwards, this the 14 day of January, 2026, to certify which, witness my hand and seal of office.

Christie Taylor
Signature of officer administering oath

CHRISTIE TAYLOR
Printed name of officer administering oath

PUBLIC NOTARY
Title of officer administering oath

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 FILER NAME <i>Kenny Edwards</i> | | 3 Filer ID (Ethics Commission Filers) | |
| 4 TOTAL OF UNITEMIZED LOANS | | \$ | |
| 5 Date of loan <i>11/13/25</i> | 7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Kenny Edwards</i> | 9 Loan Amount (\$) <i>\$ 750.00</i> | |
| 6 Is lender a financial institution? Y <input checked="" type="radio"/> N | 8 Lender address; City; State; Zip Code <i>600 FM 2339 Ben Wheeler, TX 75154</i> | 10 Interest rate | |
| | | 11 Maturity date | |
| 12 Principal occupation / Job title (See Instructions) <i>Van Zandt County Treasurer</i> | | 13 Employer (See Instructions) <i>Van Zandt County</i> | |
| 14 Description of Collateral <input type="checkbox"/> none | | 15 <input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions) | |
| 16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable | 17 Name of guarantor | | 19 Amount Guaranteed (\$) |
| | 18 Guarantor address; City; State; Zip Code | | |
| 20 Principal Occupation (See Instructions) | | 21 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) | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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