

# 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  | <div style="display: flex; justify-content: space-between;"> <span>MS / MRS / MR</span> <span>FIRST</span> <span>MI</span> </div> <div style="display: flex; justify-content: space-between;"> <span>NICKNAME</span> <span>LAST</span> <span>SUFFIX</span> </div> <div style="font-family: cursive; font-size: 1.2em;">Mr. Kenneth D. Buck Griffin</div>  |                                       | <b>OFFICE USE ONLY</b><br><br>Date Received<br><div style="font-size: 1.5em; font-weight: bold;">RECEIVED</div><br><div style="font-size: 1.2em; font-weight: bold;">JAN 14 2026</div><br><br><br>Date Hand-delivered or Date Postmarked<br><br><div style="display: flex; justify-content: space-between;"> <span>Receipt #</span> <span>Amount \$</span> </div> <div style="display: flex; justify-content: space-between;"> <span>Date Processed</span> <span>Date Imaged</span> </div> |   |  |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS<br><br><input type="checkbox"/> Change of Address | <div style="display: flex; justify-content: space-between;"> <span>ADDRESS / PO BOX;</span> <span>APT / SUITE #;</span> <span>CITY;</span> <span>STATE;</span> <span>ZIP CODE</span> </div> <div style="font-family: cursive; font-size: 1.2em;">7001 FM 2505 Floresville, TX 78114</div>   |                                       |  |   |  |
| 5 CANDIDATE / OFFICEHOLDER PHONE   | <div style="display: flex; justify-content: space-between;"> <span>AREA CODE</span> <span>PHONE NUMBER</span> <span>EXTENSION</span> </div> <div style="font-family: cursive; font-size: 1.2em;">(210) 421-1494</div>   |                                       |  |   |  |
| 6 CAMPAIGN TREASURER NAME  | <div style="display: flex; justify-content: space-between;"> <span>MS / MRS / MR</span> <span>FIRST</span> <span>MI</span> </div> <div style="display: flex; justify-content: space-between;"> <span>NICKNAME</span> <span>LAST</span> <span>SUFFIX</span> </div> <div style="font-family: cursive; font-size: 1.2em;">MRS Marguerite A. Griffin</div>  |                                       |  |   |  |
| 7 CAMPAIGN TREASURER ADDRESS<br><br>(Residence or Business)                                  | <div style="display: flex; justify-content: space-between;"> <span>STREET ADDRESS (NO PO BOX PLEASE);</span> <span>APT / SUITE #;</span> <span>CITY;</span> <span>STATE;</span> <span>ZIP CODE</span> </div> <div style="font-family: cursive; font-size: 1.2em;">7001 FM 2505 Floresville, TX 78114</div>  |                                       |  |   |  |
| 8 CAMPAIGN TREASURER PHONE   | <div style="display: flex; justify-content: space-between;"> <span>AREA CODE</span> <span>PHONE NUMBER</span> <span>EXTENSION</span> </div> <div style="font-family: cursive; font-size: 1.2em;">(210) 685-3703</div>   |                                       |  |   |  |
| 9 REPORT TYPE  | <div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"><input checked="" type="checkbox"/> January 15</div> <div style="width: 50%;"><input type="checkbox"/> 30th day before election</div> <div style="width: 50%;"><input type="checkbox"/> Runoff</div> <div style="width: 50%;"><input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)</div> <div style="width: 50%;"><input type="checkbox"/> July 15</div> <div style="width: 50%;"><input type="checkbox"/> 8th day before election</div> <div style="width: 50%;"><input type="checkbox"/> Exceeded Modified Reporting Limit</div> <div style="width: 50%;"><input type="checkbox"/> Final Report (Attach C/OH - FR)</div> </div>  |                                       |  |   |  |
| 10 PERIOD COVERED  | <div style="display: flex; justify-content: space-between;"> <div> Month      Day      Year<br/> <div style="font-family: cursive; font-size: 1.2em;">12 / 07 / 2025</div> </div> <div>THROUGH</div> <div> Month      Day      Year<br/> <div style="font-family: cursive; font-size: 1.2em;">01 / 14 / 2026</div> </div> </div>  |                                       |  |   |  |
| 11 ELECTION  | <div style="display: flex; justify-content: space-between;"> <div> ELECTION DATE<br/> Month      Day      Year<br/> <div style="font-family: cursive; font-size: 1.2em;">/ /</div> </div> <div> ELECTION TYPE<br/> <input checked="" type="checkbox"/> Primary    <input type="checkbox"/> Runoff    <input type="checkbox"/> Other Description<br/> <input type="checkbox"/> General    <input type="checkbox"/> Special </div> </div>   |                                       |  |   |  |
| 12 OFFICE  | <div style="display: flex; justify-content: space-between;"> <div>OFFICE HELD (if any)<br/><div style="font-family: cursive; font-size: 1.2em;">JP Pct 2</div></div> <div>OFFICE SOUGHT (if known)<br/><div style="font-family: cursive; font-size: 1.2em;">Justice of Peace Pct 2</div></div> </div>   |                                       |  |   |  |
| 14 NOTICE FROM POLITICAL COMMITTEE(S)  | <div style="font-size: 0.8em;">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.</div> <table border="1" style="width:100%; border-collapse: collapse; font-size: 0.8em;"> <tr> <td style="width:20%; padding: 5px;"> <input type="checkbox"/> GENERAL<br/><br/> <input type="checkbox"/> SPECIFIC </td> <td style="padding: 5px;"> COMMITTEE TYPE<br/> COMMITTEE NAME<br/> COMMITTEE ADDRESS<br/> COMMITTEE CAMPAIGN TREASURER NAME<br/> COMMITTEE CAMPAIGN TREASURER ADDRESS </td> </tr> </table> |                                       |  | <input type="checkbox"/> GENERAL<br><br><input type="checkbox"/> SPECIFIC | COMMITTEE TYPE<br>COMMITTEE NAME<br>COMMITTEE ADDRESS<br>COMMITTEE CAMPAIGN TREASURER NAME<br>COMMITTEE CAMPAIGN TREASURER ADDRESS |
| <input type="checkbox"/> GENERAL<br><br><input type="checkbox"/> SPECIFIC                    | COMMITTEE TYPE<br>COMMITTEE NAME<br>COMMITTEE ADDRESS<br>COMMITTEE CAMPAIGN TREASURER NAME<br>COMMITTEE CAMPAIGN TREASURER ADDRESS  |                                       |  |   |  |

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

|                         |   |  |
|-------------------------|---|--|
| 15 C/OH NAME            |   | 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) | \$ $\phi$                              |
|                         | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)  | \$ $\phi$                              |
| EXPENDITURE TOTALS      | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.  | \$ 476.52                              |
|                         | 4. TOTAL POLITICAL EXPENDITURES   | \$ 439.42 = 476.52<br>37.10            |
| CONTRIBUTION BALANCE    | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD  | \$ $\phi$                              |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD   | \$ $\phi$                              |

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.

x 

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

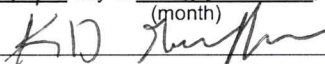
OR

## (2) Unsworn Declaration

My name is Kenneth D. Griffin, and my date of birth is 09-28-1959.

My address is 7001 FM 2505, Ft. Worth, TX, 78114, USA.  
(street) (city) (state) (zip code) (country)

Executed in Wilson County, State of Texas, on the 14 day of Jan, 20 26.  
(month) (year)

  
Signature of Candidate/Officeholder (Declarant)

**SUBTOTALS - C/OH****FORM C/OH  
COVER SHEET PG 3****19 FILER NAME***Kenneth Griffin***20 Filer ID (Ethics Commission Filers)****21 SCHEDULE SUBTOTALS  
NAME OF SCHEDULE****SUBTOTAL  
AMOUNT**

|     |                                     |  |    |               |
|-----|-------------------------------------|--|----|---------------|
| 1.  | <input type="checkbox"/>            | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                                      | \$ | <i>Ø</i>      |
| 2.  | <input type="checkbox"/>            | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS                        | \$ | <i>Ø</i>      |
| 3.  | <input type="checkbox"/>            | SCHEDULE B: PLEDGED CONTRIBUTIONS  | \$ | <i>Ø</i>      |
| 4.  | <input type="checkbox"/>            | SCHEDULE E: LOANS  | \$ | <i>Ø</i>      |
| 5.  | <input type="checkbox"/>            | SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS              | \$ | <i>Ø</i>      |
| 6.  | <input type="checkbox"/>            | SCHEDULE F2: UNPAID INCURRED OBLIGATIONS   | \$ | <i>Ø</i>      |
| 7.  | <input type="checkbox"/>            | SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS             | \$ | <i>Ø</i>      |
| 8.  | <input type="checkbox"/>            | SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD                                      | \$ | <i>Ø</i>      |
| 9.  | <input checked="" type="checkbox"/> | SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS                        | \$ | <i>476.52</i> |
| 10. | <input type="checkbox"/>            | SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH        | \$ | <i>Ø</i>      |
| 11. | <input type="checkbox"/>            | SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS           | \$ | <i>Ø</i>      |
| 12. | <input type="checkbox"/>            | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ | <i>Ø</i>      |