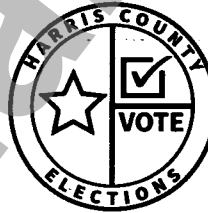


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**Official Filing Authority of Harris County
Beth Stevens
Interim Elections Administrator**

Campaign Finance Report



B. Stevens

**Interim Elections Administrator
Harris County, TX**

FileNo: 2022391
Received By Clerk: 07/07/2022
File Date: July 07, 2022
Office: County Treasurer
Candidate: Scott, Kyle
Treasurer: Scott, Bethany
Category: Contributions And Expenditures (COH / JCOH)
Delivered By: Electronically Filed
Type: COR

Harris County No Fee

**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	2 Total pages filed: 10			
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Kyle	MI			
	NICKNAME	LAST Scott	SUFFIX			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY;		ZIP CODE			
	20607 Dawn Rose Court					
	Spring, TX 77379		Date Hand-delivered or Date Postmarked			
	Receipt #	Amount				
		Date Processed				
		Date Imaged				
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Bethany	MI			
	NICKNAME	LAST Scott	SUFFIX			
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #;	CITY; STATE; ZIP CODE		
	20607 Dawn Rose Court					
		Spring, TX 773790				
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION			
		(713) 865-3590				
8 REPORT TYPE	<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 checked="" 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)					
9 PERIOD COVERED	Month	Day	Year	Month	Day	Year
		02/20/2022		THROUGH	06/30/2022	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month	Day	Year	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other
			11/08/2022	<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT (if known)		
				Harris County Treasurer		

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

**FORM C/OH
COVER SHEET PG 2**
2 of 10

13 C / OH NAME Scott, Kyle	14 Filer ID
-----------------------------------	--------------------

15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> 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

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 2,309.82
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 5,340.78
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 719.46
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 23,000.00

17 AFFIDAVIT

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

AFFIX NOTARY STAMP / SEAL ABOVE

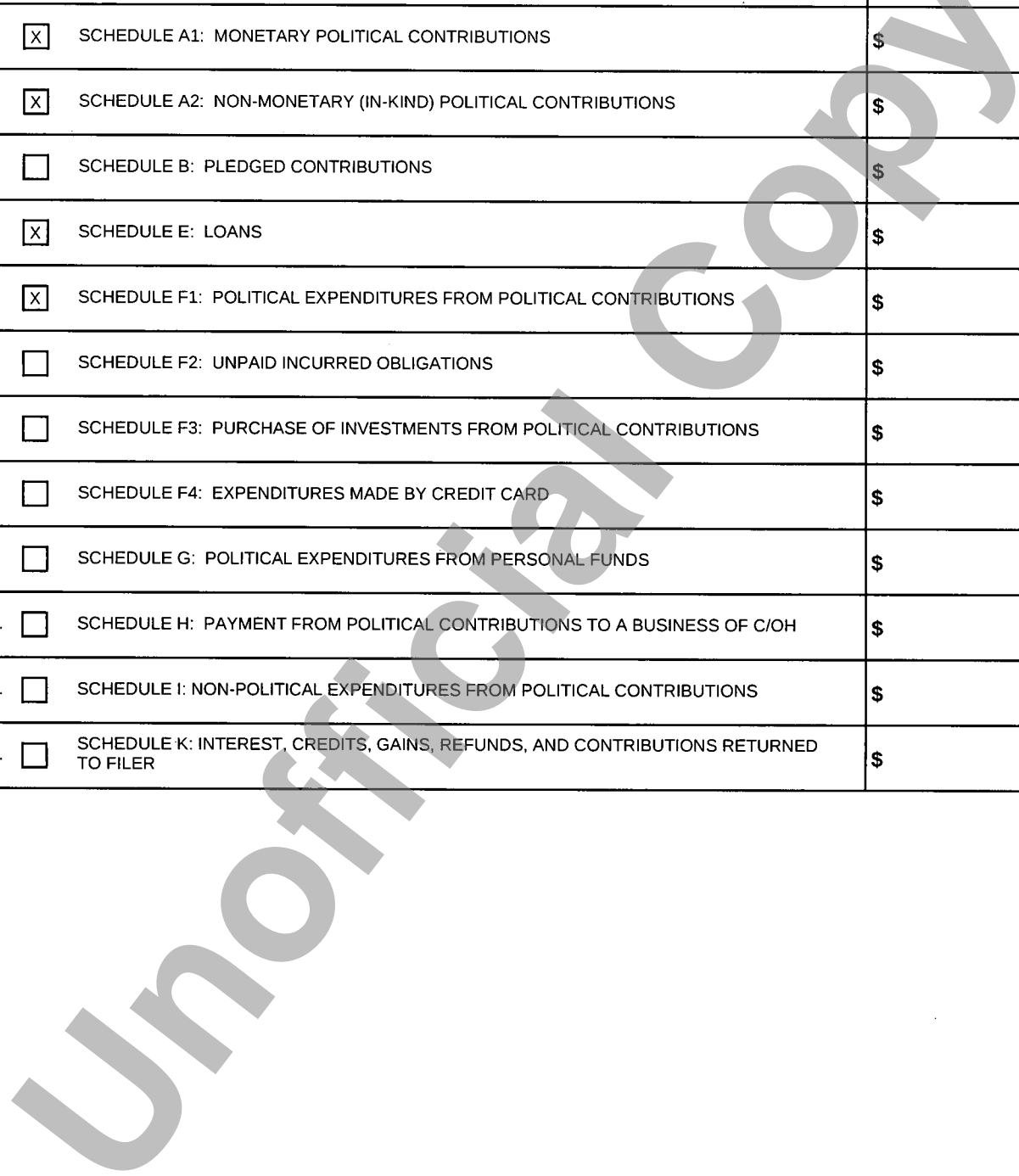
Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

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

SUBTOTALS - C/OH

18 FILER NAME Scott, Kyle	19 Filer ID
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20 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
NAME OF SCHEDULE		
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 1,700.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 609.82
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 4,000.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 5,340.78
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$



MONETARY POLITICAL CONTRIBUTIONS

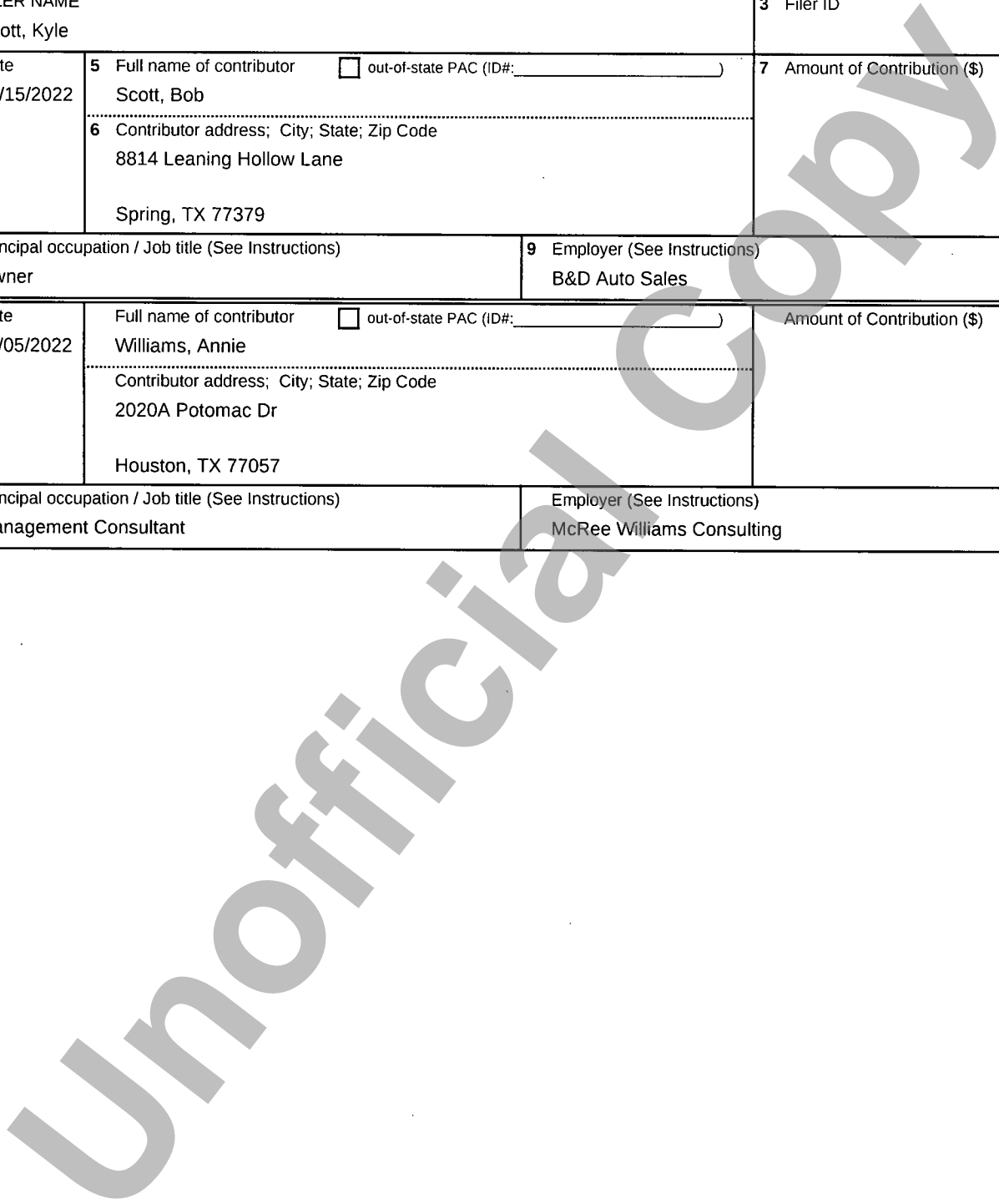
SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/2 Rpt: 4/10
2 FILER NAME Scott, Kyle		3 Filer ID
4 Date 06/03/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cavazos, Carmen	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code 1430 Marleen St Houston, TX 77034		
8 Principal occupation / Job title (See Instructions) Flight Attendant		9 Employer (See Instructions) Southwest Airlines
Date 06/03/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Danna, Joe	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code PO Box 924033 Houston, TX 77292		
Principal occupation / Job title (See Instructions) Deputy Sheriff		Employer (See Instructions) The Dana Book Inc
Date 06/01/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flynn, Josh	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code PO Box 431158 Houston, TX 77243		
Principal occupation / Job title (See Instructions) Accounting		Employer (See Instructions) Associated Services
Date 03/02/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hardey, Thomas	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 8502 Stone Village Ln Houston, TX 77040		
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Enhanced Electrical Sales
Date 04/24/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hardey, Thomas	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 8502 Stone Village Ln Houston, TX 77040		
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Enhanced Electrical Sales

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

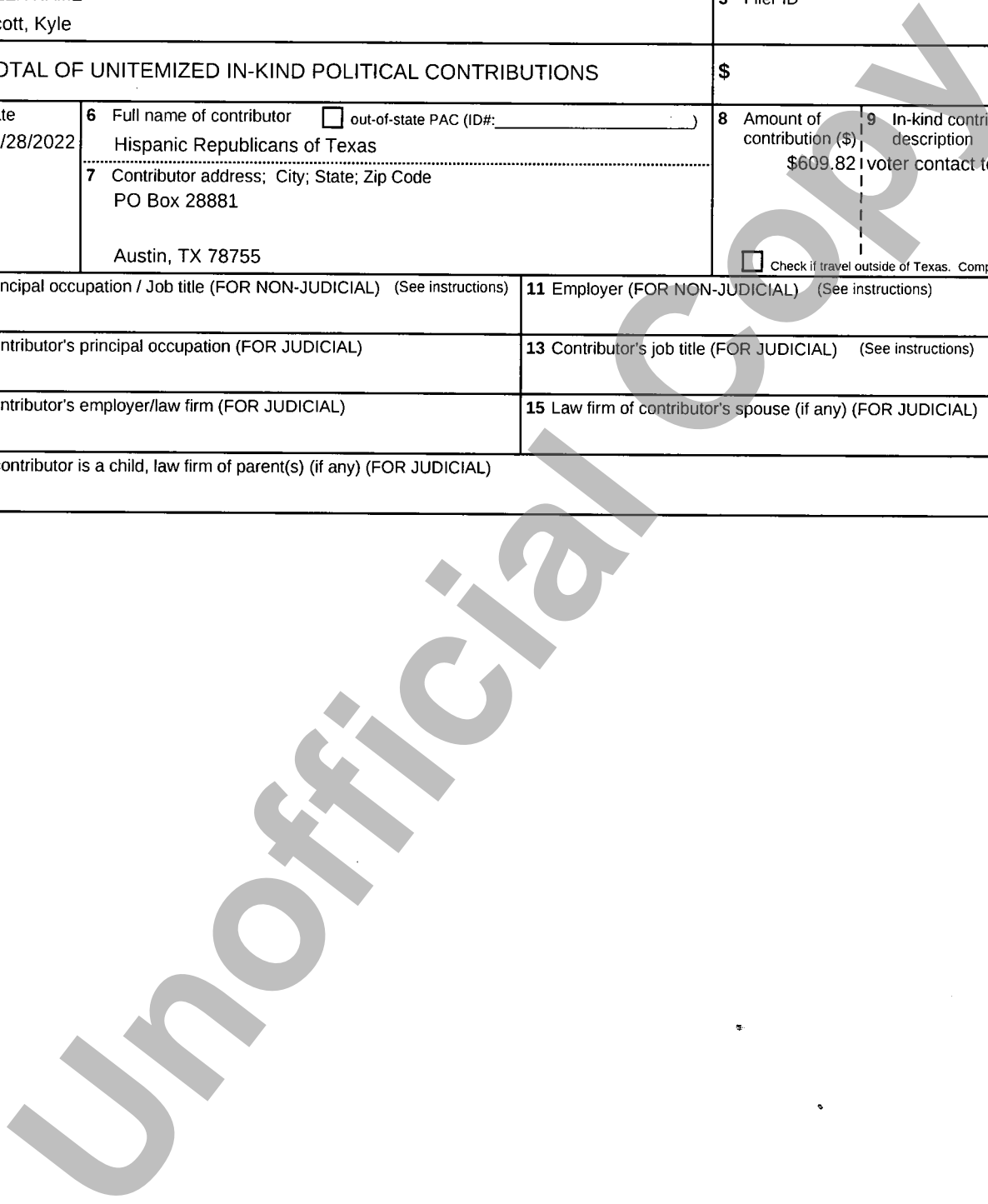
The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/2 Rpt: 5/10
2 FILER NAME Scott, Kyle		3 Filer ID
4 Date 06/15/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Bob 6 Contributor address; City; State; Zip Code 8814 Leaning Hollow Lane Spring, TX 77379	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) B&D Auto Sales
Date 05/05/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Annie Contributor address; City; State; Zip Code 2020A Potomac Dr Houston, TX 77057	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Management Consultant		Employer (See Instructions) McRee Williams Consulting



NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

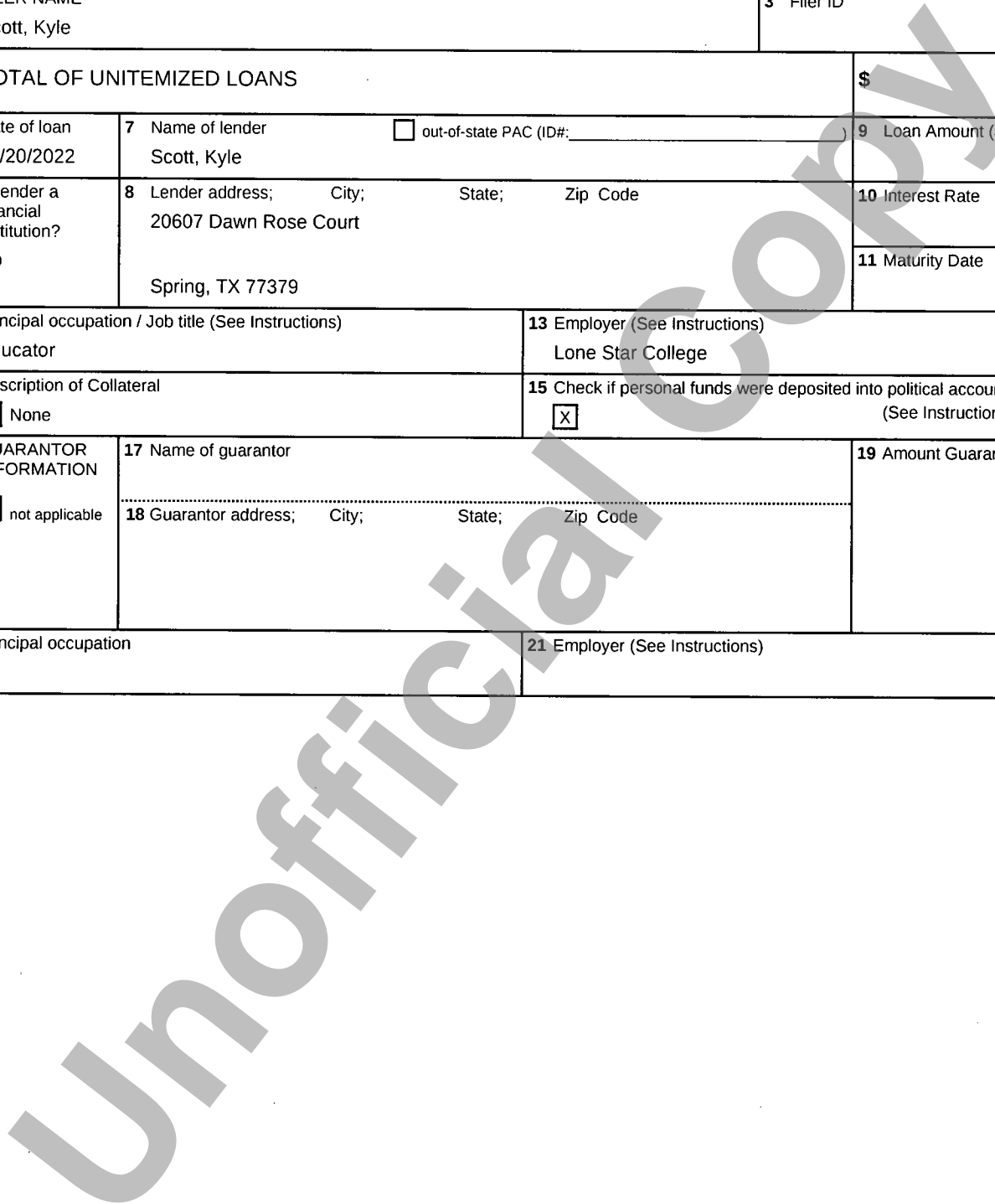
The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 6/10	
2 FILER NAME Scott, Kyle		3 Filer ID	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 02/28/2022	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hispanic Republicans of Texas	8 Amount of contribution (\$) \$609.82	9 In-kind contribution description voter contact text
7 Contributor address; City; State; Zip Code PO Box 28881 Austin, TX 78755		<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)			



LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 7/10
2 FILER NAME Scott, Kyle		3 Filer ID
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 02/20/2022	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Kyle	9 Loan Amount (\$) \$4,000.00
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code 20607 Dawn Rose Court Spring, TX 77379	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions) Educator		13 Employer (See Instructions) Lone Star College
14 Description of Collateral <input checked="" type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input checked="" type="checkbox"/>
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal occupation		21 Employer (See Instructions)



POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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.

1 Total pages Schedule F1: Sch: 1/3 Rpt: 8/10	2 FILER NAME Scott, Kyle	3 Filer ID
4 Date 02/22/2022	5 Payee name Associated Services	
6 Amount (\$) \$80.00	7 Payee address; City; State; Zip Code PO Box 431158 Houston, TX 77243	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Finance Report Preparation
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/02/2022	Payee name Clockwork Consulting	
Amount (\$) \$1,316.28	Payee address; City; State; Zip Code 1347 Lamonte Lane Houston, TX 77018	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Robocalls
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/03/2022	Payee name Cultura Media Group	
Amount (\$) \$690.00	Payee address; City; State; Zip Code 2450 Louisiana Ste 400-224 Houston, TX 77006	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense sign placement
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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.

1 Total pages Schedule F1: Sch: 2/3 Rpt: 9/10		2 FILER NAME Scott, Kyle		3 Filer ID	
4 Date 06/03/2022		5 Payee name Halo			
6 Amount (\$) \$952.00		7 Payee address; City; State; Zip Code 1500 Halo Way Sterling, IL 61081			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense supplies	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 02/25/2022		Payee name Herald Publishing			
Amount (\$) \$250.00		Payee address; City; State; Zip Code 3403 Audley St Houston, TX 77098			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense print advertising	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 04/15/2022		Payee name Holsworth, Amy			
Amount (\$) \$1,500.00		Payee address; City; State; Zip Code 9131 Monarch Mist Lane Houston, TX 77070			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website & Graphic Design	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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.

1 Total pages Schedule F1: Sch: 3/3 Rpt: 10/10	2 FILER NAME Scott, Kyle	3 Filer ID
4 Date 06/30/2022	5 Payee name Rally Piryx LLC	
6 Amount (\$) \$52.50	7 Payee address; City; State; Zip Code 995 Market Street 2nd Floor San Francisco, CA 94103	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/23/2022	Payee name United Republicans of Harris County	
Amount (\$) \$500.00	Payee address; City; State; Zip Code PO Box 800123 Houston, TX 77028	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense direct mail
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held