

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME
Ken L. Wilkerson

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
<input type="checkbox"/> GENERAL	
<input type="checkbox"/> 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, OR CONTRIBUTIONS MADE ELECTRONICALLY), UNLESS ITEMIZED	\$ 37.93
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 4272.14
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 306.31
	4. TOTAL POLITICAL EXPENDITURES	\$ 4310.56
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 2371.88
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 2410.30

18 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.

Ken Wilkerson
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Ken Wilkerson, this the 31st day of August, 2020, to certify which, witness my hand and seal of office.

Tanya M Perez
Signature of officer administering oath

Tanya M Perez
Printed name of officer administering oath

NOTARY
Title of officer administering oath

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages, Schedule A1:

1 of 10

2 FILER NAME

Ken L. Wilkerson

3 Filer ID (Ethics Commission Filers)

4 Date
2/16/2020

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

Ken L. Wilkerson

6 Contributor address; City; State; Zip Code

2706 Ancestor Drive Killeen TX 76549

7 Amount of contribution (\$)

\$10.00

8 Principal occupation / Job title (See Instructions)

Retired Military Officer

9 Employer (See Instructions)

NA

Date
2/21/2020

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

Kenyatta Uzzell

Contributor address; City; State; Zip Code

25855 Sarazen Drive Chantilly VA 20152

Amount of contribution (\$)

\$250.00

Principal occupation / Job title (See Instructions)

President

Employer (See Instructions)

POLIHIRE

Date
2/22/2020

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

Lisa Packer

Contributor address; City; State; Zip Code

8518 Century Oak Court Fairfax Station, VA 22039

Amount of contribution (\$)

\$100.00

Principal occupation / Job title (See Instructions)

Stay at home mom

Employer (See Instructions)

Self

Date
2/22/2020

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

Ronald Harrison

Contributor address; City; State; Zip Code

1423 Loblolly Drive Harker Heights, TX 76548

Amount of contribution (\$)

\$100.00

Principal occupation / Job title (See Instructions)

Legislator

Employer (See Instructions)

GDI

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

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 2 of 10
2 FILER NAME Ken L. Wilkerson		3 Filer ID (Ethics Commission Filers)
4 Date 2/25/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) AC Fedrick	7 Amount of contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code 312 Judge King Drive Jarrell TX 76537		
8 Principal occupation / Job title (See Instructions) Healthcare IT		9 Employer (See Instructions) Ph Nu Pi
Date 3/01/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Carlos Garth	Amount of contribution (\$) \$150.00
Contributor address; City; State; Zip Code 9212 Silver Springs Court Temple TX 76502		
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) Texas State Law School
Date 3/02/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Federick Corbin	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code 2202 Wickiup Trail Harker Heights, TX 76548		
Principal occupation / Job title (See Instructions) Retired Military Officer		Employer (See Instructions) US Army
Date 3/02/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Langston Washington	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code 396 Paris Drive Clarksville TN 37042		
Principal occupation / Job title (See Instructions) Military		Employer (See Instructions) US Army

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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

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

3 of 10

2 FILER NAME

Ken L. Wilkerson

3 Filer ID (Ethics Commission Filers)

4 Date

3/02/2020

5 Full name of contributor

Robert Flucker

out-of-state PAC (ID# _____)

7 Amount of contribution (\$)

\$100.00

6 Contributor address;

City;

State;

Zip Code

308 Dixon Drive

Killeen

TX

76549

8 Principal occupation / Job title (See Instructions)

Supply Chain Manager

9 Employer (See Instructions)

Grundfos Pumps

Date

3/02/2020

Full name of contributor

Maurice Lewis

out-of-state PAC (ID# _____)

Amount of contribution (\$)

\$100.00

Contributor address;

City;

State;

Zip Code

3506 Republic of Texas Dr. Killeen

TX

76549

Principal occupation / Job title (See Instructions)

Federal Employee

Employer (See Instructions)

Date

3/04/2020

Full name of contributor

Timothy Harrison

out-of-state PAC (ID# _____)

Amount of contribution (\$)

\$250.00

Contributor address;

City;

State;

Zip Code

6275 White Hart L Unit 203 Westerville OH 43081

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/10/2020

Full name of contributor

Ronald Harrison

out-of-state PAC (ID# _____)

Amount of contribution (\$)

\$250.00

Contributor address;

City;

State;

Zip Code

1423 Loblolly Drive

Harker Heights, TX

76548

Principal occupation / Job title (See Instructions)

Logistician

Employer (See Instructions)

GDIT

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

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

4 of 10

2 FILER NAME
Ken L. Wilkerson

3 Filer ID (Ethics Commission Filers)

4 Date
3/12/2020

5 Full name of contributor out-of-state PAC (ID# _____)
Aaron Hardy

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code
3704 Adelaide The Colony TX 75056

\$250.00

8 Principal occupation / Job title (See Instructions)
Painter

9 Employer (See Instructions)
CertaPro Painters of Denton

Date
3/14/2020

Full name of contributor out-of-state PAC (ID# _____)
Kenyatta Uzzell

Amount of contribution (\$)

Contributor address; City; State; Zip Code
25855 Sarazen Drive Chantilly VA 20152

\$250.00

Principal occupation / Job title (See Instructions)
President

Employer (See Instructions)
POLIHIRE

Date
3/16/2020

Full name of contributor out-of-state PAC (ID# _____)
Ken L. Wilkerson

Amount of contribution (\$)

Contributor address; City; State; Zip Code
2706 Ancestor Drive Killeen Texas 76549

\$10.00

Principal occupation / Job title (See Instructions)
Retired Military Officer

Employer (See Instructions)
US. Army

Date
3/16/2020

Full name of contributor out-of-state PAC (ID# _____)
Bernabe and Davette Quinones

Amount of contribution (\$)

Contributor address; City; State; Zip Code
1400 Westingtonhouse Rd Apt 417 Georgetown TX 78626

\$100

Principal occupation / Job title (See Instructions)
Retired Military

Employer (See Instructions)
Baylor Scott and White

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

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **5 of 10**

2 FILER NAME
Ken L. Wilkerson

3 Filer ID (Ethics Commission Filers)

4 Date
3/17/2020

5 Full name of contributor out-of-state PAC (ID#: _____)
Thomas Oates

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code

13121 Hunters Way Saint Hedwig TX 78152

\$100.00

8 Principal occupation / Job title (See Instructions)

Military

9 Employer (See Instructions)

US Army

Date
3/18/2020

Full name of contributor out-of-state PAC (ID#: _____)
Tahra Lindsay

Amount of contribution (\$)

Contributor address; City; State; Zip Code

541 Antietam Drive Stone Mountain GA 30087

\$100.00

Principal occupation / Job title (See Instructions)

Financial Institution Examiner

Employer (See Instructions)

OCC

Date
3/19/2020

Full name of contributor out-of-state PAC (ID#: _____)
Monte Tartt

Amount of contribution (\$)

Contributor address; City; State; Zip Code

7408 Volar Grand Prairie TX 75054

\$300.00

Principal occupation / Job title (See Instructions)

NA

Employer (See Instructions)

Self Employed

Date
3/20/2020

Full name of contributor out-of-state PAC (ID#: _____)
Cindy Wilkerson

Amount of contribution (\$)

Contributor address; City; State; Zip Code

1109 Patton Way McDonough GA 30252

\$100.00

Principal occupation / Job title (See Instructions)

Educator

Employer (See Instructions)

Henry County Schools

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

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: *6 of 10*

2 FILER NAME
Ken L. Wilkerson

3 Filer ID (Ethics Commission Filers)

4 Date
3/21/2020

5 Full name of contributor out-of-state PAC (ID# _____)
Tracy Harris-Taylor

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code
2010 Prestige Loop Killeen TX 76549

\$25.00

8 Principal occupation / Job title (See Instructions)
Hair stylist/Salon Owner

9 Employer (See Instructions)
Self

Date
3/22/2020

Full name of contributor out-of-state PAC (ID# _____)
Dean Huard

Amount of contribution (\$)

Contributor address; City; State; Zip Code
3009 Fieldwood Drive Nolanville TX 76559

\$25.00

Principal occupation / Job title (See Instructions)
Retired Military Officer

Employer (See Instructions)
US Army

Date
3/20/2020

Full name of contributor out-of-state PAC (ID# _____)
Joure Alexander

Amount of contribution (\$)

Contributor address; City; State; Zip Code
635 Highland Overlook Atlanta GA 30349

\$250.00

Principal occupation / Job title (See Instructions)
Civil Engineer

Employer (See Instructions)
TY LIN International

Date
4/16/2020

Full name of contributor out-of-state PAC (ID# _____)
Ken L. Wilkerson

Amount of contribution (\$)

Contributor address; City; State; Zip Code
2706 Ancestor Drive Killeen Texas 76549

\$10.00

Principal occupation / Job title (See Instructions)
Retired Military Officer

Employer (See Instructions)
US Army

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

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
7 of 10

2 FILER NAME
Ken L. Wilkerson

3 Filer ID (Ethics Commission Filers)

4 Date
5/22/2020

5 Full name of contributor out-of-state PAC (ID# _____)
Maurice Lewis

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code

3506 Republic of Texas Drive Killeen TX 76549

\$100.00

8 Principal occupation / Job title (See Instructions)

Logistic Management Specialist

9 Employer (See Instructions)

DoD

Date
5/22/2020

Full name of contributor out-of-state PAC (ID# _____)
Kenyatta Uzzell

Amount of contribution (\$)

Contributor address; City; State; Zip Code

25855 Sarazen Drive Chantilly VA 20152

\$250.00

Principal occupation / Job title (See Instructions)

President

Employer (See Instructions)

POLIHIRE

Date
5/29/2020

Full name of contributor out-of-state PAC (ID# _____)
Donald Wilkerson

Amount of contribution (\$)

Contributor address; City; State; Zip Code

1240 A Pinnacle Circle Pensacola FL 32504

\$100.00

Principal occupation / Job title (See Instructions)

Executive Assistant

Employer (See Instructions)

Lakeview Center Inc.

Date
6/06/2020

Full name of contributor out-of-state PAC (ID# _____)
Steven Kling

Amount of contribution (\$)

Contributor address; City; State; Zip Code

1011 Oak Meadow Drive Dripping Springs TX 78620

\$25.00

Principal occupation / Job title (See Instructions)

IT

Employer (See Instructions)

Appfire

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

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

3 of 10

2 FILER NAME
Ken L. Wilkerson

3 Filer ID (Ethics Commission Filers)

4 Date
6/10/2020

5 Full name of contributor out-of-state PAC (ID# _____)
Michael Lewis

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code
2450 Wickersham Lane Apt 1201 Austin TX 78741

\$25.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Account Executive

Dialpad

Date
6/17/2020

Full name of contributor out-of-state PAC (ID# _____)
Joe Green

Amount of contribution (\$)

Contributor address; City; State; Zip Code
11709 Lisborough Rd Bowie MD 20720

\$25.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Self

Self

Date
6/26/2020

Full name of contributor out-of-state PAC (ID# _____)
Christopher Williams

Amount of contribution (\$)

Contributor address; City; State; Zip Code
6105 Lana Court Killeen TX 76542

\$100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Government

Government

Date
7/01/2020

Full name of contributor out-of-state PAC (ID# _____)
Kolby Duhon

Amount of contribution (\$)

Contributor address; City; State; Zip Code
3503 Speedway Apt 217 Austin TX 78705

\$5.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Court Clerk

Travis County

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

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
9 of 10

2 FILER NAME
Ken L. Wilkerson

3 Filer ID (Ethics Commission Filers)

4 Date
7/01/2020

5 Full name of contributor out-of-state PAC (ID# _____)
Prince Winbush

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code

1204 Anne Ave Humble TX 77338

\$27.01

8 Principal occupation / Job title (See Instructions)

Field Organizer

9 Employer (See Instructions)

Sima for TX

Date
7/03/2020

Full name of contributor out-of-state PAC (ID# _____)
David Fernandez

Amount of contribution (\$)

Contributor address; City; State; Zip Code

1508 SW H.K. Dodgen Temple TX 76504

\$100.00

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Self

Date
7/04/2020

Full name of contributor out-of-state PAC (ID# _____)
Louie Minor

Amount of contribution (\$)

Contributor address; City; State; Zip Code

503 West Avenue I Killeen TX 76541

\$250.00

Principal occupation / Job title (See Instructions)

General Contractor

Employer (See Instructions)

Lutum LLC

Date
7/08/2020

Full name of contributor out-of-state PAC (ID# _____)
Thomas Gilliam

Amount of contribution (\$)

Contributor address; City; State; Zip Code

4825 Davis Lane 1913 Austin TX 78749

\$50.00

Principal occupation / Job title (See Instructions)

Project Manager

Employer (See Instructions)

Bumperactive

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

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

10 of 10

2 FILER NAME
Ken L. Wilkerson

3 Filer ID (Ethics Commission Filers)

4 Date
7/15/2020

5 Full name of contributor out-of-state PAC (ID#: _____)
Jennifer Hetzel

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code

1109 Elyse Drive Killeen TX 76549

\$50.00

8 Principal occupation / Job title (See Instructions)

Director

9 Employer (See Instructions)

GKCC

Date
7/15/2020

Full name of contributor out-of-state PAC (ID#: _____)
Kristian Poncho

Amount of contribution (\$)

Contributor address; City; State; Zip Code

318 Willis Courville Road Elton LA 70532

\$47.20

Principal occupation / Job title (See Instructions)

Self

Employer (See Instructions)

Self

Date

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: <i>1 of 1</i>	
2 FILER NAME Ken Wilkerson		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 31.39	
5 Date 6/20/2020	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenith Gonzalez	8 Amount of Contribution \$	9 In-kind contribution description
	7 Contributor address; City; State; Zip Code 9301 Oak Hills Drive Temple TX 76502	\$31.39	Broadcast software
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) Barrista		11 Employer (FOR NON-JUDICIAL) (See Instructions) Starbucks	
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)			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.			

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:

1 of 4

2 FILER NAME

Ken L. Wilkerson

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS

\$ 2,410.30

5 Date of loan

2/04/2020

7 Name of lender

Ken Wilkerson

out-of-state PAC (ID# _____)

9 Loan Amount (\$)

\$100.00

6 Is lender a financial institution?
Y N

8 Lender address;

2706 Ancestor Drive

City;

Killeen

State;

Texas 76549

Zip Code

10 Interest rate

0%

11 Maturity date

11 03 2020

12 Principal occupation / Job title (See Instructions)

Retired Military Officer

13 Employer (See Instructions)

US Army

14 Description of Collateral

none

15

Check if personal funds were deposited into political account (See Instructions)

16 GUARANTOR INFORMATION

17 Name of guarantor

19 Amount Guaranteed (\$)

18 Guarantor address;

City;

State;

Zip Code

not applicable

20 Principal Occupation (See Instructions)

21 Employer (See Instructions)

Date of loan

2/05/2020

Name of lender

Ken Wilkerson

out-of-state PAC (ID# _____)

Loan Amount (\$)

\$500.00

Is lender a financial institution?
Y N

Lender address;

2706 Ancestor Drive

City;

Killeen

State;

Texas 76549

Zip Code

Interest rate

0%

Maturity date

11 03 2020

Principal occupation / Job title (See Instructions)

Retired Military Officer

Employer (See Instructions)

US Army

Description of Collateral

none

Check if personal funds were deposited into political account (See Instructions)

GUARANTOR INFORMATION

Name of guarantor

Amount Guaranteed (\$)

Guarantor address;

City;

State;

Zip Code

not applicable

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.

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:
2 of 4

2 FILER NAME
Ken L. Wilkerson

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS

\$
2,410.30

5 Date of loan
2/10/2020

7 Name of lender out-of-state PAC (ID# _____)
Ken Wilkerson

9 Loan Amount (\$)
\$600.00

6 Is lender a financial institution?
Y N

8 Lender address; City; State; Zip Code
2706 Ancestor Drive Killeen Texas 76549

10 Interest rate
0%
11 Maturity date
11 03 2020

12 Principal occupation / Job title (See Instructions)
Retired Military Officer

13 Employer (See Instructions)
US Army

14 Description of Collateral
 none

15 Check if personal funds were deposited into political account (See Instructions)

16 GUARANTOR INFORMATION
 not applicable

17 Name of guarantor
18 Guarantor address; City; State; Zip Code

19 Amount Guaranteed (\$)

20 Principal Occupation (See Instructions)

21 Employer (See Instructions)

Date of loan
2/19/2020

Name of lender out-of-state PAC (ID# _____)
Ken Wilkerson

Loan Amount (\$)
\$200.00

Is lender a financial institution?
Y N

Lender address; City; State; Zip Code
2706 Ancestor Drive Killeen Texas 76549

Interest rate
0%
Maturity date
11 03 2020

Principal occupation / Job title (See Instructions)
Retired Military Officer

Employer (See Instructions)
US Army

Description of Collateral
 none

Check if personal funds were deposited into political account (See Instructions)

GUARANTOR INFORMATION
 not applicable

Name of guarantor
Guarantor address; City; State; Zip Code

Amount Guaranteed (\$)

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.

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:
3 of 4

2 FILER NAME
Ken L. Wilkerson

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS

\$
2,410.30

5 Date of loan
3/03/2020

7 Name of lender out-of-state PAC (ID#: _____)
Ken Wilkerson

9 Loan Amount (\$)
\$200.00

6 Is lender a financial institution?
Y N

8 Lender address; City; State; Zip Code
2706 Ancestor Drive Killeen Texas 76549

10 Interest rate
0%
11 Maturity date
11 03 2020

12 Principal occupation / Job title (See Instructions)
Retired Military Officer

13 Employer (See Instructions)
US Army

14 Description of Collateral
 none

15 Check if personal funds were deposited into political account (See Instructions)

16 GUARANTOR INFORMATION
 not applicable

17 Name of guarantor
18 Guarantor address; City; State; Zip Code

19 Amount Guaranteed (\$)

20 Principal Occupation (See Instructions)

21 Employer (See Instructions)

Date of loan
3/09/2020

Name of lender out-of-state PAC (ID#: _____)
Ken Wilkerson

Loan Amount (\$)
\$425.00

Is lender a financial institution?
Y N

Lender address; City; State; Zip Code
2706 Ancestor Drive Killeen Texas 76549

Interest rate
0%
Maturity date
11 03 2020

Principal occupation / Job title (See Instructions)
Retired Military Officer

Employer (See Instructions)
US Army

Description of Collateral
 none

Check if personal funds were deposited into political account (See Instructions)

GUARANTOR INFORMATION
 not applicable

Name of guarantor
Guarantor address; City; State; Zip Code

Amount Guaranteed (\$)

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.

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:
4 of 4

2 FILER NAME
Ken L. Wilkerson

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS

\$
2,410.30

5 Date of loan
3/27/2020

7 Name of lender out-of-state PAC (ID# _____)
Ken Wilkerson

9 Loan Amount (\$)
\$385.30

6 Is lender a financial institution?
Y N

8 Lender address; City; State; Zip Code
2706 Ancestor Drive Killeen Texas 76549

10 Interest rate
0%

11 Maturity date
11 03 2020

12 Principal occupation / Job title (See Instructions)
Retired Military Officer

13 Employer (See Instructions)
US Army

14 Description of Collateral
 none

15 Check if personal funds were deposited into political account (See Instructions)

16 GUARANTOR INFORMATION

17 Name of guarantor
18 Guarantor address; City; State; Zip Code

19 Amount Guaranteed (\$)

not applicable

20 Principal Occupation (See Instructions)

21 Employer (See Instructions)

Date of loan

Name of lender 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)
Retired Military Officer

Employer (See Instructions)
US Army

Description of Collateral
 none

Check if personal funds were deposited into political account (See Instructions)

GUARANTOR INFORMATION

Name of guarantor
Guarantor address; City; State; Zip Code

Amount Guaranteed (\$)

not applicable

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

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>1 of 4</i>	2 FILER NAME Ken Wilkerson	3 Filer ID (Ethics Commission Filers)
4 Date 2/07/2020	5 Payee name Squarespace Inc.	
6 Amount (\$) \$184.46	7 Payee address; City; State; Zip Code 8 Clarkson St, New York, NY 10014	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Website design
	(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 2/18/2020	Payee name Integrated Solutions	
Amount (\$) \$103.23	Payee address; City; State; Zip Code 11112 John Galt Blvd. Omaha, Nebraska 68137	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead	Description Office Campaign Software
	<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 2/18/2020	Payee name Heights Studio	
Amount (\$) \$100.00	Payee address; City; State; Zip Code Harker Heights, Texas 76548	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Campaign Photos
	<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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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>2 of 4</i>	2 FILER NAME Ken Wilkerson	3 Filer ID (Ethics Commission Filers)
4 Date 2/24/2020	5 Payee name Kenith Gonzalez	
6 Amount (\$) \$600.00	7 Payee address; City; State; Zip Code 9301 Oak Hills Drive Temple TX 76502	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description Campaign Manager
	(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 2/26/2020	Payee name Ohana Inc Printing	
Amount (\$) \$162.38	Payee address; City; State; Zip Code 2206 W Stan Schlueter Loop, Killeen, TX 76549	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description Business Cards
	<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 3/03/2020	Payee name Integrated Solutions	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 11112 John Galt Blvd. Omaha, Nebraska 68137	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead	Description Office Campaign Software
	<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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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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>3 of 4</i>	2 FILER NAME Ken Wilkerson	3 Filer ID (Ethics Commission Filers)
4 Date 3/07/2020	5 Payee name T&T Entertainment	
6 Amount (\$) \$300.00	7 Payee address; City; State; Zip Code 104, 806 Atlas Ave, Killeen, TX 76542	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Campaign Launch
	(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 2/26/2020	Payee name Ohana Inc Printing	
Amount (\$) \$166.72	Payee address; City; State; Zip Code 2206 W Stan Schlueter Loop, Killeen, TX 76549	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description Buttons
	<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 3/0182020	Payee name Ohana Inc Printing	
Amount (\$) \$1377.79	Payee address; City; State; Zip Code 2206 W Stan Schlueter Loop, Killeen, TX 76549	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description Roadsigns
	<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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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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>4 of 4</i>	2 FILER NAME Ken Wilkerson	3 Filer ID (Ethics Commission Filers)
4 Date 4/24/2020	5 Payee name Ohana Inc Printing	
6 Amount (\$) \$414.60	7 Payee address: City: State: Zip Code 2206 W Stan Schlueter Loop, Killeen, TX 76549	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description Yardsigns
	(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 6/15/2020	Payee name Jonathan Hildner Paypal	
Amount (\$) \$150.00	Payee address: City: State: Zip Code 2211 N. First Street San Jose CA 95131	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Juneteenth Event
	<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 6/20/2020	Payee name Kenith Gonzalez	
Amount (\$) \$350.00	Payee address: City: State: Zip Code 9301 Oak Hills Drive Temple TX 76502	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Campaign Manager
	<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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