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: 8

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR | FIRST: Kaylynn | MI

NICKNAME | LAST: Paxson | SUFFIX

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

Change of Address

ADDRESS / PO BOX; | APT / SUITE #; | CITY; | STATE; | ZIP CODE

16013 El Soccorro Loop CC TX 78418

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE | PHONE NUMBER | EXTENSION

(361) 723-1001

6 CAMPAIGN TREASURER NAME

MS / MRS / MR | FIRST: Kaylynn | MI

NICKNAME | LAST: Paxson | SUFFIX

7 CAMPAIGN TREASURER ADDRESS

(Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE); | APT / SUITE #; | CITY; | STATE; | ZIP CODE

16013 El Soccorro Loop CC TX 78418

8 CAMPAIGN TREASURER PHONE

AREA CODE | PHONE NUMBER | EXTENSION

(361) 723-1001

OFFICE USE ONLY

Date Received

Date Filed 10-28-26

Rebecca Huerta for City Secretary

Date Hand-delivered or Date Postmarked

Receipt # | Amount $

Date Processed

Date Imaged

9 REPORT TYPE

- ☐ January 15
- ☐ July 15
- ☐ 30th day before election
- ■ 8th day before election
- ☐ Runoff
- ☐ Exceeded Modified Reporting Limit
- ☐ 15th day after campaign treasurer appointment (Officeholder Only)
- ☐ Final Report (Attach C/OH - FR)

10 PERIOD COVERED

Month / Day / Year: 9 / 25 / 26 THROUGH 10 / 24 / 26

11 ELECTION

ELECTION DATE: Month / Day / Year: 11 / 3 / 26

ELECTION TYPE

- ☐ Primary
- ■ General
- ☐ Runoff
- ☐ Special
- ☐ Other Description

12 OFFICE

OFFICE HELD (if any): City Council District 4

13 OFFICE SOUGHT (if known): Mayor

14 NOTICE FROM POLITICAL COMMITTEE(S)

Additional Pages

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

- ☐ GENERAL
- ☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

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)
Kaylynn Paxson	

17 CONTRIBUTION TOTALS	1.	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	$
	2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 7,770.00
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURE.	$
	4.	**TOTAL POLITICAL EXPENDITURES**	$ 8,126.39
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 5,647.31
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 729.58

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 Kaylynn Paxson, and my date of birth is [redacted].

My address is 16013 El Soccorro Loop (street), CC (city), TX (state), 78418 (zip code), USA (country).

Executed in Nueces County, State of TX, on the 28 day of 10 (month), 2026 (year).

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME	20 Filer ID (Ethics Commission Filers)
Kaylynn Paxson	

21 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	■	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	$ 7,770.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	$
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS	$
4.	■	SCHEDULE E: LOANS	$ 600.00
5.	■	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	$ 8,126.39
6.	■	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	$ 500.00
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	$
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	$
9.		SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	$
10.		SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	$
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	$
12.		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 FILER NAME
See itemized

3 Filer ID (Ethics Commission Filers)

4 Date	**5** Full name of contributor out-of-state PAC (ID#:_____) **6** Contributor address; City; State; Zip Code	**7** Amount of contribution ($)
8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)	

Date	Full name of contributor out-of-state PAC (ID#:_____) Contributor address; City; State; Zip Code	Amount of contribution ($)
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	

Date	Full name of contributor out-of-state PAC (ID#:_____) Contributor address; City; State; Zip Code	Amount of contribution ($)
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	

Date	Full name of contributor out-of-state PAC (ID#:_____) Contributor address; City; State; Zip Code	Amount of contribution ($)
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.

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
Kaylynn Paxson

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS

$

5 Date of loan
10/10/2026

7 Name of lender ☐ out-of-state PAC (ID#:_____)
Kaylynn Paxson

9 Loan Amount ($)
300.00

6 Is lender a financial Institution?
☐ Y ■ N

8 Lender address; City; State; Zip Code
16013 El Soccorro Loop CC TX 78418

10 Interest rate

11 Maturity date

12 Principal occupation / Job title (See Instructions)
Self

13 Employer (See Instructions)
Self

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
10/16/2026

Name of lender ☐ out-of-state PAC (ID#:_____)
Kaylynn Paxson

Loan Amount ($)
300.00

Is lender a financial Institution?
☐ Y ■ N

Lender address; City; State; Zip Code
16013 El Soccorro Loop CC TX 78418

Interest rate

Maturity date

Principal occupation / Job title (See Instructions)
Self

Employer (See Instructions)
Self

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.

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
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:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
1	Kaylynn Paxson	

4 Date	5 Payee name
	See attached

6 Amount ($)	7 Payee address;	City;	State;	Zip Code

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date	Payee name

Amount ($)	Payee address;	City;	State;	Zip Code

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date	Payee name

Amount ($)	Payee address;	City;	State;	Zip Code

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense

Complete ONLY 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 Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F2:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
1	Kaylynn Paxson	

4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	$

5 Date	6 Payee name
10/16/2026	CreativeBMG

7 Amount ($)	8 Payee address; City; State; Zip Code
500.00	802 S Caranchua CC TX 78401

9 TYPE OF EXPENDITURE

[■] Political [ ] Non-Political

10 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule)	(b) Description
Marketing	Media

(c) [ ] Check if travel outside of Texas. Complete Schedule T. [ ] Check if Austin, TX, officeholder living expense

11 Complete ONLY if direct expenditure to benefit C/OH — Candidate / Officeholder name | Office sought | Office held

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Date	Payee name

Amount ($)	Payee address; City; State; Zip Code

TYPE OF EXPENDITURE

[ ] Political [ ] Non-Political

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule)	Description

[ ] Check if travel outside of Texas. Complete Schedule T. [ ] Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH — Candidate / Officeholder name | Office sought | Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Office Holder - Kaylynn Paxson

Campaign Finance Report - Contributions

Schedule A1

Contributor	Amount	Date	Address	City	State	Zip
Ernest R Garza	$ 500.00	10/1/2026	[redacted]	CC	TX	78410
Wondersome LLC	$250.00	10/15/2025	[redacted]	CC	TX	78463
JVM Hotel dba: Staybridge Suites	$1,000.00	10/20/2026	[redacted]	Portland	TX	78374
Texan Builders Group LLC	$200.00	9/29/2026	[redacted]	Portland	TX	78374
Miguel Briseno	$200.00	9/29/2026	[redacted]	CC	TX	78418
Chisa Yearwood	$20.00	10/3/2026	[redacted]	CC	TX	78418
Lonnie Schwirtlich	$5,000.00	10/22/2026	[redacted]	CC	TX	78418
Total	$7,170.00					

Kaylynn Paxson

Campaign Finance Report - Loan Contributions

Schedule A2

Contributor	Amount	Date		Description	Address		
Kaylynn Paxson	$300.00	10/10/2026			[redacted]	CC TX 78418	
Kaylynn Paxson	$300.00	10/16/2026			[redacted]	CC TX 78418	
Total	$600.00						

Kaylynn Paxson

Campaign Finance Report - Expenses

Schedule F1

Expense	Amount	Date	Category	Description	Address	
McCoys	$ 322.09	10/10/2026	Advertising Expense	Tposts	5909 Holly Rd CC TX 78412	
Ace Hardware	$ 59.53	10/10/2026	Advertising Expense	Post Driver	15326 South Padre Island Drive CC TX 78418	
FB Hornet Spirit	$ 25.00	9/28/2026	Advertising Expense	Parade entry	FB TX 78418	
Pat Brand	$ 300.00	10/10/2026	Labor	Signs	Alameda CC TX 78404	
Neely Printing	$ 454.65	10/6/2026	Advertising Expense	Cards	1012 Louisiana Ave, CC TX 78404	
Neely Printing	$ 517.44	9/22/2026	Advertising Expense	Signs	1013 Louisiana Ave, CC TX 78404	
Dynamic Media LLC - KSIX 1230AM	$ 500.00	10/14/2026	Advertising Expense	Radio	1201 3rd Street CC TX 78404	
Jeff Butler	$ 5,701.00	10/16/2026	Advertising Expense	Radio and TV	PO Box 6274 CC TX 78466	
Stripe	$1.33	10/3/2026	Fees	Processing Fee	354 Oyster Point Blvd, South San Francisco, CA 94080	
Stripe	$ 245.35	10/22/2026	Fees	Processing Fee	354 Oyster Point Blvd, South San Francisco, CA 94080	
Total	$8,126.39					

Maintained as of last period:	$ 6,003.70
Period, Report Contributions:	$7,770.00
Period, Report Expenses:	-$8,126.39
TOTAL:	$ 5,647.31