

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: 15
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST Charles	MI
	NICKNAME	LAST Randklev	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX;	APT / SUITE #;	CITY; STATE; ZIP CODE
	[Redacted]		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	[Redacted]		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Jennifer	MI
	NICKNAME	LAST Randklev	SUFFIX
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #;	CITY; STATE; ZIP CODE
	[Redacted]		
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
[Redacted]			
9 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 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)		
10 PERIOD COVERED	Month Day Year	THROUGH	Month Day Year
03 / 24 / 2026 THROUGH 04 / 22 / 2026			
11 ELECTION	ELECTION DATE		ELECTION TYPE
	Month Day Year	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special	local
12 OFFICE		OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)
			Keller City Council Place 6
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	COMMITTEE NAME	
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS	
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	

OFFICE USE ONLY

Date Received

RECEIVED

APR 24 2026

BY: klj

Date Hand delivered at Data Postmark

Receipt #	Amount \$
Date Processed	
Date Imaged	

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

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

15 C/OH NAME <u>Charles Randklev</u>		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)	\$ <u>0</u>
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <u>16,075.87</u>
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ <u>0</u>
	4. TOTAL POLITICAL EXPENDITURES	\$ <u>8,522.17</u>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ <u>11,093.53</u>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>0</u>

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.

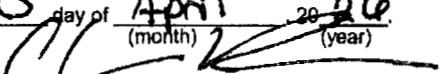
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

(2) Unsworn Declaration

My name is Charles Randklev and my date of birth [REDACTED]

My address is [REDACTED] (street) [REDACTED] (city) [REDACTED] (state) [REDACTED] (zip code) [REDACTED] (country)

Executed in Tarrant County, State of TX, on the 23 day of April, 2026.


Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME Charles Randklev		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 16,075.87
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 450.00
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	SCHEDULE E: LOANS	\$
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$8,522.17
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
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: 1 of 10
2 FILER NAME Charles Randklev		3 Filer ID (Ethics Commission Filers)
4 Date 3/26/26	5 Full name of contributor <small>out-of-state PAC (ID#: _____)</small> David Pelletier	7 Amount of contribution (\$) \$ 104.48
6 Contributor address; <small>City; State; Zip Code</small> 1013 Williamsburg Ln., Keller, TX 76248		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/27/26	Full name of contributor <small>out-of-state PAC (ID#: _____)</small> Christopher May	Amount of contribution (\$) \$ 208.65
Contributor address; <small>City; State; Zip Code</small> 1846 Pearson Crossing, Keller, TX 76248		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/27/26	Full name of contributor <small>out-of-state PAC (ID#: _____)</small> K.C. Orren	Amount of contribution (\$) \$ 52.40
Contributor address; <small>City; State; Zip Code</small> 1838 Pearson Crossing, Keller, TX 76248		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/27/26	Full name of contributor <small>out-of-state PAC (ID#: _____)</small> Liza Sharkey	Amount of contribution (\$) \$ 260.73
Contributor address; <small>City; State; Zip Code</small> 1528 Hawthorne Ln., Roanoke, TX 76262		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

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 of 10
2 FILER NAME Charles Randklev		3 Filer ID (Ethics Commission Filers)
4 Date 3/27/26	5 Full name of contributor <small>out-of-state PAC (ID#: _____)</small> Stephen Hendricks	7 Amount of contribution (\$) \$52.40
6 Contributor address; City; State; Zip Code 1534 Lakeview Dr., Keller, TX 76248		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/27/26	Full name of contributor <small>out-of-state PAC (ID#: _____)</small> Doug Stamps	Amount of contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 512 Spicewood Ct., Keller TX 76248		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/27/26	Full name of contributor <small>out-of-state PAC (ID#: _____)</small> Jason Pearce	Amount of contribution (\$) \$1,041.98
Contributor address; City; State; Zip Code 1414 Hawthorne Ln., Keller TX 76262		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/27/26	Full name of contributor <small>out-of-state PAC (ID#: _____)</small> Danny Ahlers	Amount of contribution (\$) \$1,041.98
Contributor address; City; State; Zip Code 1611 Knox Rd., Roanoke TX 76262		
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.		

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: 3 of 10
2 FILER NAME Charles Randklev		3 Filer ID (Ethics Commission Filers)
4 Date 3/27/26	5 Full name of contributor out-of-state PAC (ID#: _____) Lyndsay Lovall 6 Contributor address; City; State; Zip Code 1816 Kinsale Dr., Keller TX 76262	7 Amount of contribution (\$) \$ 312.81
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/27/26	Full name of contributor out-of-state PAC (ID#: _____) Marie Fisher Contributor address; City; State; Zip Code 1108 Chianti Ln., Roanoke TX 76262	Amount of contribution (\$) \$ 312.81
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/27/26	Full name of contributor out-of-state PAC (ID#: _____) Richard Rose Contributor address; City; State; Zip Code 7825 Chaddington Ct., North Richland Hills, TX 76182	Amount of contribution (\$) \$ 521.15
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/27/26	Full name of contributor out-of-state PAC (ID#: _____) Heather Haschke Contributor address; City; State; Zip Code 2031 Meadowview Dr., Roanoke, TX 76262	Amount of contribution (\$) \$ 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

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: 4 of 10
2 FILER NAME Charles Randklev		3 Filer ID (Ethics Commission Filers)
4 Date 3/27/26	5 Full name of contributor <small>out-of-state PAC (ID#: _____)</small> Ryan Powers 6 Contributor address; City; State; Zip Code 1401 Mary Ct., Roanoke TX 76262	7 Amount of contribution (\$) \$ 104.48
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/27/26	Full name of contributor <small>out-of-state PAC (ID#: _____)</small> Nikki Paris Contributor address; City; State; Zip Code 1309 Woodborough Ln., Keller TX 76248	Amount of contribution (\$) \$1,041.98
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/27/26	Full name of contributor <small>out-of-state PAC (ID#: _____)</small> Stephen Jacobs Contributor address; City; State; Zip Code 1526 Melody, Keller TX 76262	Amount of contribution (\$) \$ 1,041.98
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/27/26	Full name of contributor <small>out-of-state PAC (ID#: _____)</small> Douglas Hinds Contributor address; City; State; Zip Code 1500 Sage Canyon Dr., Keller TX 76248	Amount of contribution (\$) \$ 52.40
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 5 of 10
2 FILER NAME Charles Randklev		3 Filer ID (Ethics Commission Filers)
4 Date 3/27/26	5 Full name of contributor <small>out-of-state PAC (ID#: _____)</small> Deborah Johnson	7 Amount of contribution (\$) \$ 104.48
	6 Contributor address; City; State; Zip Code 1467 Grape Arbor Ct, Keller TX 76262	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/28/26	Full name of contributor <small>out-of-state PAC (ID#: _____)</small> Amanda Mejia	Amount of contribution (\$) \$ 104.48
	Contributor address; City; State; Zip Code 1405 Winona Ct., Keller TX 76262	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/28/26	Full name of contributor <small>out-of-state PAC (ID#: _____)</small> Sean Turner	Amount of contribution (\$) \$ 200.00
	Contributor address; City; State; Zip Code 550 Reserve St. Ste 250 Southlake, TX 76092	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/28/26	Full name of contributor <small>out-of-state PAC (ID#: _____)</small> Karen Grabow	Amount of contribution (\$) \$ 500.00
	Contributor address; City; State; Zip Code 1865 Barrington Ct. Keller TX 76262	
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.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 6 of 10
2 FILER NAME Charles Randklev		3 Filer ID (Ethics Commission Filers)
4 Date 3/29/26	5 Full name of contributor <small>out-of-state PAC (ID#: _____)</small> David Gerda	7 Amount of contribution (\$) \$ 208.65
6 Contributor address; City; State; Zip Code 700 Northern Trace, Keller TX 76248		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/29/26	Full name of contributor <small>out-of-state PAC (ID#: _____)</small> Sarah Page	Amount of contribution (\$) \$ 104.48
Contributor address; City; State; Zip Code 314 Crossing Ct., Keller TX 76248		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/29/26	Full name of contributor <small>out-of-state PAC (ID#: _____)</small> Kim and Russ Bird	Amount of contribution (\$) \$ 26.35
Contributor address; City; State; Zip Code 1918 Spring Dr., Roanoke TX 76262		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/30/26	Full name of contributor <small>out-of-state PAC (ID#: _____)</small> William Bubeck	Amount of contribution (\$) \$ 104.48
Contributor address; City; State; Zip Code 1418 Cat Mountain Trl, Keller TX 76248		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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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: 7 of 10
2 FILER NAME Charles Randklev		3 Filer ID (Ethics Commission Filers)
4 Date 3/30/26	5 Full name of contributor <small>out-of-state PAC (ID#: _____)</small> Cyndi Lawson	7 Amount of contribution (\$) \$ 104.48
6 Contributor address; <small>City; State; Zip Code</small> 321 Glen Hollow Keller TX 76248		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/30/26	Full name of contributor <small>out-of-state PAC (ID#: _____)</small> Brittany Fink	Amount of contribution (\$) \$ 52.40
Contributor address; <small>City; State; Zip Code</small> 725 Hallelujah Trl Keller TX 76248		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/1/26	Full name of contributor <small>out-of-state PAC (ID#: _____)</small> Micah Young	Amount of contribution (\$) \$ 500.00
Contributor address; <small>City; State; Zip Code</small> 1233 Melissa Dr. Keller TX 76262		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/6/26	Full name of contributor <small>out-of-state PAC (ID#: _____)</small> Rusty & Sandy Peck	Amount of contribution (\$) \$ 100.00
Contributor address; <small>City; State; Zip Code</small> 1804 Summit Ct. Keller TX 76262		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

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: 8 of 10
2 FILER NAME Charles Randklev		3 Filer ID (Ethics Commission Filers)
4 Date 4/7/26	5 Full name of contributor out-of-state PAC (ID#: _____) Nick Malamura	7 Amount of contribution (\$) \$ 208.65
6 Contributor address; City; State; Zip Code 204 Bear Hollow Keller TX 76248		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 4/7/26	Full name of contributor out-of-state PAC (ID#: _____) Kyle McCaw	Amount of contribution (\$) \$ 1041.98
Contributor address; City; State; Zip Code 332 Longview Dr. Keller TX 76248		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/9/26	Full name of contributor out-of-state PAC (ID#: _____) Gregory Will	Amount of contribution (\$) \$ 500.00
Contributor address; City; State; Zip Code [REDACTED] Keller TX 76248		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/15/26	Full name of contributor out-of-state PAC (ID#: _____) Brian Harlan	Amount of contribution (\$) \$ 260.73
Contributor address; City; State; Zip Code 1605 Forest Bend Ln. Keller TX 76248		
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.		

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: 9 of 10
2 FILER NAME Charles Randklev		3 Filer ID (Ethics Commission Filers)
4 Date 4/16/26	5 Full name of contributor out-of-state PAC (ID#: _____) Tim Simmons	7 Amount of contribution (\$) \$ 104.48
6 Contributor address; City; State; Zip Code 1920 Fall Creek Trail Keller TX 76248		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/26/26	Full name of contributor out-of-state PAC (ID#: _____) Robert Johnson III and Rhonda Johnson	Amount of contribution (\$) \$ 300.00
Contributor address; City; State; Zip Code 1828 Forest Bend Ln. Keller TX 76248		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/27/26	Full name of contributor out-of-state PAC (ID#: _____) Joe and Linda Metcalf	Amount of contribution (\$) \$ 200.00
Contributor address; City; State; Zip Code 1601 Brentwood Trl Keller TX 76248		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/14/26	Full name of contributor out-of-state PAC (ID#: _____) Thomas Cobb	Amount of contribution (\$) \$ 3,500.00
Contributor address; City; State; Zip Code 707 W. LD Lockett Rd. Colleyville TX 76034		
Principal occupation / Job title (See Instructions)		Employer (See Instructions) self-employed
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

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: 10 of 10
2 FILER NAME Charles Rand Klev		3 Filer ID (Ethics Commission Filers)
4 Date 4/19/26	5 Full name of contributor out-of-state PAC (ID#: _____) John and Marilyn Birt 6 Contributor address; City; State; Zip Code 1314 McEntire Ct Keller TX 76248	7 Amount of contribution (\$) \$200.00
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
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NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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 A2:	
2 FILER NAME Charles Randklev		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 0	
5 Date 3/26/26	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jennifer Randklev	8 Amount of Contribution \$ \$450.00	9 In-kind contribution description kick off event
7 Contributor address; City; State; Zip Code [REDACTED]		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)			

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution \$	In-kind contribution description
	Contributor address; City; State; Zip Code		
			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.

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: 1	2 FILER NAME Charles Randklev	3 Filer ID (Ethics Commission Filers)
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4 Date 4/10/26	5 Payee name MS Marketing
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6 Amount (\$) \$3,296.98	7 Payee address; 310 N. Main St Suite E	City; Keller	State; TX	Zip Code 76248
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description Signs, printed materials
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/18/26	Payee name Starboard Strategy Group, LLC
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Amount (\$) \$4,510.74	Payee address; 5129 Calmont	City; Ft. Worth	State; TX	Zip Code 76107
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description mail
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/19/26	Payee name Keller T-shirt Embroidery and Printing, LLC
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Amount (\$) \$714.45	Payee address; 1103 Keller Pkwy	City; Keller	State; TX	Zip Code 76248
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description signs
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED