

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) 00067801	2 Total pages filed: 53		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR The Honorable	FIRST Kyle J.	MI	OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/16/2024	
	NICKNAME	LAST Kacal	SUFFIX		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; PO Box 6628 College Station, TX 77805		ZIP CODE	Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged	
	MS / MRS / MR Mr.		FIRST Bryan	MI	
	NICKNAME	LAST Brown	SUFFIX		
	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1825 Brothers Blvd. College Station, TX 77845				
7 CAMPAIGN TREASURER PHONE	AREA CODE (979)	PHONE NUMBER 219-3199	EXTENSION		
8 REPORT TYPE	<input checked="" 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 type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input checked="" type="checkbox"/> Final Report (Attach C/OH-FR)				
9 PERIOD COVERED	Month Day Year 07/01/2023		THROUGH	Month Day Year 01/16/2024	
10 ELECTION	ELECTION DATE Month Day Year		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any) State Representative District 12		12 OFFICE SOUGHT (if known) State Representative District 12		

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

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13 C / OH NAME Kacal, Kyle J. (The Honorable)	14 Filer ID (Ethics Commission Filers) 00067801
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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 <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME
		COMMITTEE ADDRESS
		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)	\$	84,322.73
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	69,726.91
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	50,038.83
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

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.

 The Honorable Kyle J. Kacal
 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**FORM C/OH
COVER SHEET PG 3**

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18 FILER NAME Kacal, Kyle J. (The Honorable)		19 Filer ID 00067801	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	71,346.46
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	12,976.27
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$	
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	69,726.91
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: 1/14 Rpt: 4/53
2 FILER NAME Kacal, Kyle J. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00067801
4 Date 11/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) A&M PAC <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78768	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen Boone Humphries Robinson LLP <hr/> Contributor address; City; State; Zip Code Houston, TX 77027	Amount of Contribution (\$) \$3,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beer Alliance of Texas Political Action Committee <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benton, Marc <hr/> Contributor address; City; State; Zip Code Anderson, TX 77830	Amount of Contribution (\$) \$521.15
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Bryan (Mr.) <hr/> Contributor address; City; State; Zip Code College Station, TX 77845	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) Partner		Employer (See Instructions) Brown & Company Ins.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/14 Rpt: 5/53
2 FILER NAME Kacal, Kyle J. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00067801
4 Date 11/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryan Firefighters Association PAC <hr/> 6 Contributor address; City; State; Zip Code Bryan, TX 77806-2340	7 Amount of Contribution (\$) \$3,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buchanan, Spencer <hr/> Contributor address; City; State; Zip Code Bryan, TX 77808	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) Texcon
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carroll, James W. (Mr.) <hr/> Contributor address; City; State; Zip Code Navasota, TX 77868-5836	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Heat Treat
Date 09/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clanton, John (Mr.) <hr/> Contributor address; City; State; Zip Code Bryan, TX 77808	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) Astin Executive Services
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark Isenhour Real Estate Services LLC <hr/> Contributor address; City; State; Zip Code Bryan, TX 77801	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/14 Rpt: 6/53
2 FILER NAME Kacal, Kyle J. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00067801
4 Date 11/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cockrell, Melvin W. (Mr.)	7 Amount of Contribution (\$) \$300.00
	6 Contributor address; City; State; Zip Code Houston, TX 77070	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self
Date 10/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Jeff (Mr.)	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code Cypress, TX 77429-5148	
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) LIA Engineering
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Congress Avenue Partners PAC	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Austin, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Consulting Engineers PAC, Inc.	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Austin, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dippel, Jr., Tieman	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Brenham, TX 77833	
Principal occupation / Job title (See Instructions) Banker		Employer (See Instructions) Brenham National Bank

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/14 Rpt: 7/53
2 FILER NAME Kacal, Kyle J. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00067801
4 Date 11/03/2023	5 Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00363879) Entergy, Corp. PAC <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78701	7 Amount of Contribution (\$) \$2,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/03/2023	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00340455) Essential Utilities, Inc PAC <hr/> Contributor address; City; State; Zip Code Bryn Mawr, PA 19010	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finley, Joel <hr/> Contributor address; City; State; Zip Code Driftwood, TX 78619	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Governmental Affairs Consultant		Employer (See Instructions) Gateway Partners Government Affairs
Date 10/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Focused Advocacy Political Action Committee <hr/> Contributor address; City; State; Zip Code Austin, TX 78701-2402	Amount of Contribution (\$) \$750.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freese and Nichols PAC <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76102	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/14 Rpt: 8/53
2 FILER NAME Kacal, Kyle J. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00067801
4 Date 11/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Georgiades, George <hr/> 6 Contributor address; City; State; Zip Code College Station, TX 77845	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) G Squared Private Wealth
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glockzin, Emanuel H. (Mr.) <hr/> Contributor address; City; State; Zip Code Bryan, TX 77808	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Brazos Valley Construction, Inc.
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graham, Charles (Mr.) <hr/> Contributor address; City; State; Zip Code Elgin, TX 78621	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Southwest Stallion Station
Date 10/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HS Law PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoelscher, Michael <hr/> Contributor address; City; State; Zip Code College Station, TX 77845	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/14 Rpt: 9/53
2 FILER NAME Kacal, Kyle J. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00067801
4 Date 11/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Humphrey, Mark (Mr.) <hr/> 6 Contributor address; City; State; Zip Code College Station, TX 77845	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IBAT PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IDS Engineering Group PAC <hr/> Contributor address; City; State; Zip Code Houston, TX 77040	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laredo Fire-PAC <hr/> Contributor address; City; State; Zip Code Laredo, TX 78041-5752	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leonard, Fred (Mr.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77030	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Val-Tex

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/14 Rpt: 10/53
2 FILER NAME Kacal, Kyle J. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00067801
4 Date 09/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linebarger Goggan Blair & Sampson, LLP	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code Austin, TX 78760		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Longbow Consulting Partners, LLC	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Magellan Midstream Holdings GP PAC	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Tulsa, OK 74121-2186		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marion, David (Mr.)	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code College Station, TX 77845		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/11/2023	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00225342) McGuire Woods Federal PAC Fund	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Richmond, VA 23219		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/14 Rpt: 11/53
2 FILER NAME Kacal, Kyle J. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00067801
4 Date 10/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NRG Energy Political Action Committee <hr/> 6 Contributor address; City; State; Zip Code Princeton, NJ 08540-6213	7 Amount of Contribution (\$) \$3,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neff, Jr., Charles (Mr.) <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77381-6459	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Integrity Bank
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nettles, Adrian (Mr.) <hr/> Contributor address; City; State; Zip Code Wellborn, TX 77881-0313	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Exec. Director TABC		Employer (See Instructions) State of Texas
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ONCOR Texas State PAC of Oncor Electric Delivery Admin Corp <hr/> Contributor address; City; State; Zip Code Dallas, TX 75202-1234	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) One Gas Inc Political Action Committee <hr/> Contributor address; City; State; Zip Code Tulsa, OK 74103	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/14 Rpt: 12/53
2 FILER NAME Kacal, Kyle J. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00067801
4 Date 11/03/2023	5 Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00035519) PNC PAC	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code Washington, DC 20006	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pruitt, Terry	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code College Station, TX 77845	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) TP Services
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RABA-Kistner PAC, Inc.	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code San Antonio, TX 78269	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rohe, Scott	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Hunstville, TX 77340	
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) East Texas Underground
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rural Friends of Electric Cooperatives PAC	Amount of Contribution (\$) \$3,000.00
	Contributor address; City; State; Zip Code Austin, TX 78701-2100	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/14 Rpt: 13/53
2 FILER NAME Kacal, Kyle J. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00067801
4 Date 11/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schaefer, Michael (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code College Station, TX 77845	
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) Schaefer Custom Homes
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwartz, Page & Harding, L. L. P.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77056	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwartz, Page & Harding, L. L. P.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77056	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shoreline Group Ventures, LLC	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Bryan, TX 77803	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Randy	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Bedias, TX 77831	
Principal occupation / Job title (See Instructions) Rancher		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/14 Rpt: 14/53
2 FILER NAME Kacal, Kyle J. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00067801
4 Date 11/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEXPAC Statewide - Texas Medical Association PAC <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78701	7 Amount of Contribution (\$) \$3,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tate Jr., Milton <hr/> Contributor address; City; State; Zip Code Brenham, TX 77833	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Agricultural Cooperative Council PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Apartment Association PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701-1951	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Dairymen PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78711	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/14 Rpt: 15/53
2 FILER NAME Kacal, Kyle J. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00067801
4 Date 11/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Farm Bureau Agfund <hr/> 6 Contributor address; City; State; Zip Code Waco, TX 76702-2689	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 07/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Impact, a CRH PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78726	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Poultry PAC <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$600.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Rural Water PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701-1122	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas State Association of Fire Fighters-Action Committee <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/14 Rpt: 16/53
2 FILER NAME Kacal, Kyle J. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00067801
4 Date 10/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Trial Lawyers Association PAC	7 Amount of Contribution (\$) \$2,500.00
	6 Contributor address; City; State; Zip Code Austin, TX 78701	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas and Southwestern Cattle Raisers Association State PAC	Amount of Contribution (\$) \$1,500.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76185-1988	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The American Electric Power Company-TX Cmte. for Responsible Govt.	Amount of Contribution (\$) \$1,500.00
	Contributor address; City; State; Zip Code Columbus, OH 43215	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turrieta, Gilbert	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Austin, TX 78701	
Principal occupation / Job title (See Instructions) Lobbyist		Employer (See Instructions) Self
Date 10/11/2023	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00274431) UnitedHealth Group PAC	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Washington, DC 20004	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/14 Rpt: 17/53
2 FILER NAME Kacal, Kyle J. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00067801
4 Date 11/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vistra Employee Political Action Committee of Vistra Corp 6 Contributor address; City; State; Zip Code Irving, TX 75039-2479	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wagnon, Robert Contributor address; City; State; Zip Code Houston, TX 77030	Amount of Contribution (\$) \$625.31
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wholesale Beer Distributors of Texas PAC Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/2 Rpt: 18/53	
2 FILER NAME Kacal, Kyle J. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00067801	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 10/24/2023	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bonarrigo, Paul	8 Amount of contribution (\$) \$3,451.27	9 In-kind contribution description Wine for annual fundraiser
	7 Contributor address; City; State; Zip Code College Station, TX 77845		
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Owner, Winemaker		11 Employer (FOR NON-JUDICIAL) (See instructions) Messina Hof Winery	
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 09/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Robert (Mr.)	Amount of contribution (\$) \$275.00	In-kind contribution description Room and beverage at the Austin Club for campaign fundraiser
	Contributor address; City; State; Zip Code Austin, TX 78701		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Attorney		Employer (FOR NON-JUDICIAL) (See instructions) Self	
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)			
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kristen, Mark	Amount of contribution (\$) \$250.00	In-kind contribution description Beer for annual fundraiser
	Contributor address; City; State; Zip Code Bryan, TX 77807		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) CEO		Employer (FOR NON-JUDICIAL) (See instructions) Kristen Distributing	
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)			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 2/2 Rpt: 19/53	
2 FILER NAME Kacal, Kyle J. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00067801	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 10/26/2023	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lamantia, Greg	8 Amount of contribution (\$) \$9,000.00	9 In-kind contribution description Entertainment for annual fundraiser
	7 Contributor address; City; State; Zip Code McAllen, TX 78501	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) President		11 Employer (FOR NON-JUDICIAL) (See instructions) L&F Distributing	
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)			

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: 1/33 Rpt: 20/53	2	FILER NAME Kacal, Kyle J. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00067801
4	Date 07/31/2023	5	Payee name AT&T		
6	Amount (\$) \$81.09	7	Payee address; City; State; Zip Code 917 William D. Fitch Pkwy College Station, TX 77845		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Campaign cell phone		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 08/31/2023		Payee name AT&T		
	Amount (\$) \$81.09		Payee address; City; State; Zip Code 917 William D. Fitch Pkwy College Station, TX 77845		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Campaign cell phone		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 10/02/2023		Payee name AT&T		
	Amount (\$) \$81.09		Payee address; City; State; Zip Code 917 William D. Fitch Pkwy College Station, TX 77845		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Campaign cell phone		
		Complete <u>ONLY</u> 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: 2/33 Rpt: 21/53	2 FILER NAME Kacal, Kyle J. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00067801
4 Date 10/31/2023	5 Payee name AT&T	
6 Amount (\$) \$81.22	7 Payee address; City; State; Zip Code 917 William D. Fitch Pkwy College Station, TX 77845	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Campaign cell phone
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/06/2023	Payee name AT&T	
Amount (\$) \$81.22	Payee address; City; State; Zip Code 917 William D. Fitch Pkwy College Station, TX 77845	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Campaign cell phone
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/22/2023	Payee name Admail	
Amount (\$) \$1,399.38	Payee address; City; State; Zip Code 427 Dellwood Bryan, TX 77801	
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 Printing of invitations for annual fundraiser
Complete <u>ONLY</u> 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: 3/33 Rpt: 22/53	2 FILER NAME Kacal, Kyle J. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00067801
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4 Date 07/31/2023	5 Payee name American Momentum Bank
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6 Amount (\$) \$5.00	7 Payee address; City; State; Zip Code 4030 State Highway 6 S., Suite 100 College Station, TX 77845
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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 Special statement fee for campaign account
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/31/2023	Payee name American Momentum Bank
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Amount (\$) \$5.00	Payee address; City; State; Zip Code 4030 State Highway 6 S., Suite 100 College Station, TX 77845
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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 Special statement fee for campaign account
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/29/2023	Payee name American Momentum Bank
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Amount (\$) \$5.00	Payee address; City; State; Zip Code 4030 State Highway 6 S., Suite 100 College Station, TX 77845
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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 Special statement fee for campaign account
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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: 4/33 Rpt: 23/53	2 FILER NAME Kacal, Kyle J. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00067801
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4 Date 10/31/2023	5 Payee name American Momentum Bank
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6 Amount (\$) \$5.00	7 Payee address; City; State; Zip Code 4030 State Highway 6 S., Suite 100 College Station, TX 77845
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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 Special statement fee for campaign account
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/30/2023	Payee name American Momentum Bank
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Amount (\$) \$5.00	Payee address; City; State; Zip Code 4030 State Highway 6 S., Suite 100 College Station, TX 77845
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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 Special statement fee for campaign account
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/28/2023	Payee name B/CS Chamber of Commerce
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Amount (\$) \$80.00	Payee address; City; State; Zip Code 1733 Briarcrest Drive, Suite 200 Bryan, TX 77802
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Two Tickets for the Economic Outlook Conference
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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: 5/33 Rpt: 24/53	2 FILER NAME Kacal, Kyle J. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00067801
4 Date 11/20/2023	5 Payee name B/CS Chamber of Commerce	
6 Amount (\$) \$20.00	7 Payee address; City; State; Zip Code 1733 Briarcrest Drive, Suite 200 Bryan, TX 77802	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Individual ticket
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/20/2023	Payee name B/CS Chamber of Commerce	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 1733 Briarcrest Drive, Suite 200 Bryan, TX 77802	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense JLB Student Sponsorship
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/09/2023	Payee name B/CS Habitat for Humanity	
Amount (\$) \$600.00	Payee address; City; State; Zip Code 119 Lake St. Bryan, TX 77801	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Team sponsorship for clay shoot
Complete <u>ONLY</u> 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: 6/33 Rpt: 25/53	2 FILER NAME Kacal, Kyle J. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00067801
4 Date 10/18/2023	5 Payee name Blue Bell Creameries	
6 Amount (\$) \$180.48	7 Payee address; City; State; Zip Code 1101 S. Blue Bell Rd. P. O. Box 1807 Brenham, TX 77834	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Ice Cream for Capitol Office Meetings
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/29/2023	Payee name Brazos Valley Council of Governments	
Amount (\$) \$50.00	Payee address; City; State; Zip Code P. O. Drawer 4128 Bryan, TX 77805-4128	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 2 tickets for BVCOG 56th Annual Meeting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/07/2023	Payee name Brenham Booster Club	
Amount (\$) \$500.00	Payee address; City; State; Zip Code P.O. Box 2371 Brenham, TX 77834	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Booster Club Sponsorship
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	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: Sch: 7/33 Rpt: 26/53	2 FILER NAME Kacal, Kyle J. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00067801
4 Date 07/07/2023	5 Payee name CASA of Walker, San Jacinto & Trinity Counties	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 1300 11th St, Ste. #310 Huntsville, TX 77340	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/14/2023	Payee name Capitol Gift Shop	
Amount (\$) \$649.50	Payee address; City; State; Zip Code 1400 Congress Ave, Suite E1.006 Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials 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 Capitol Christmas Ornaments for Constituents
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/26/2023	Payee name Cavalier Cigar Co.	
Amount (\$) \$427.20	Payee address; City; State; Zip Code 305 University Dr. E, Suite 303 College Station, TX 77840	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Cigars for annual fundraiser
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: 8/33 Rpt: 27/53	2	FILER NAME Kacal, Kyle J. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00067801
4	Date 10/25/2023	5	Payee name City of Huntsville		
6	Amount (\$) \$150.00	7	Payee address; City; State; Zip Code 1212 Avenue M Huntsville, TX 77340		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Wynne Home rental for campaign event		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 11/02/2023		Payee name Cocktails4U		
	Amount (\$) \$3,731.81		Payee address; City; State; Zip Code 5912 Matrix Drive College Station, TX 77845		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Food/Service Items for annual fundraiser		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 10/27/2023		Payee name Copy Corner		
	Amount (\$) \$41.84		Payee address; City; State; Zip Code 2307 Texas Ave. South Ste. B College Station, TX 77840		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Printing for annual fundraiser		
		Complete <u>ONLY</u> 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: 9/33 Rpt: 28/53	2	FILER NAME Kacal, Kyle J. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00067801
4	Date 07/10/2023	5	Payee name GM Financial		
6	Amount (\$) \$1,668.33	7	Payee address; City; State; Zip Code Attn: APP DEPT P. O. Box 183621 Arlington, TX 76096-3621		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related 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 Rental car for campaign		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 08/10/2023		Payee name GM Financial		
	Amount (\$) \$1,668.33		Payee address; City; State; Zip Code Attn: APP DEPT P. O. Box 183621 Arlington, TX 76096-3621		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related 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 Rental car for campaign		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 09/11/2023		Payee name GM Financial		
	Amount (\$) \$1,668.33		Payee address; City; State; Zip Code Attn: APP DEPT P. O. Box 183621 Arlington, TX 76096-3621		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related 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 Rental car for campaign		
		Complete <u>ONLY</u> 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: 10/33 Rpt: 29/53	2 FILER NAME Kacal, Kyle J. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00067801
4 Date 10/10/2023	5 Payee name GM Financial	
6 Amount (\$) \$1,668.33	7 Payee address; City; State; Zip Code Attn: APP DEPT P. O. Box 183621 Arlington, TX 76096-3621	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related 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 Rental car for campaign
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 11/10/2023	Payee name GM Financial	
Amount (\$) \$1,668.33	Payee address; City; State; Zip Code Attn: APP DEPT P. O. Box 183621 Arlington, TX 76096-3621	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related 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 Rental car for campaign
	Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 07/06/2023	Payee name Gables West Avenue	
Amount (\$) \$2,590.06	Payee address; City; State; Zip Code 300 West Ave. Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging for officeholder in Austin (July 2023)
	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: 11/33 Rpt: 30/53	2 FILER NAME Kacal, Kyle J. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00067801
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4 Date 08/02/2023	5 Payee name Gables West Avenue
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6 Amount (\$) \$3,606.26	7 Payee address; City; State; Zip Code 300 West Ave. Austin, TX 78701
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging for officeholder in Austin (August 2023)
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/06/2023	Payee name Gables West Avenue
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Amount (\$) \$1,898.19	Payee address; City; State; Zip Code 300 West Ave. Austin, TX 78701
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging for officeholder in Austin (September 2023)
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/03/2023	Payee name Gables West Avenue
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Amount (\$) \$2,623.18	Payee address; City; State; Zip Code 300 West Ave. Austin, TX 78701
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging for officeholder in Austin (October 2023)
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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: 12/33 Rpt: 31/53	2 FILER NAME Kacal, Kyle J. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00067801
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4 Date 11/02/2023	5 Payee name Gables West Avenue
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6 Amount (\$) \$2,623.39	7 Payee address; City; State; Zip Code 300 West Ave. Austin, TX 78701
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging for officeholder in Austin (November 2023)
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2023	Payee name Gables West Avenue
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Amount (\$) \$2,623.12	Payee address; City; State; Zip Code 300 West Ave. Austin, TX 78701
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging for officeholder in Austin (December 2023)
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/03/2023	Payee name Google
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Amount (\$) \$31.98	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Campaign email management
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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: 13/33 Rpt: 32/53	2 FILER NAME Kacal, Kyle J. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00067801
4 Date 08/01/2023	5 Payee name Google	
6 Amount (\$) \$31.98	7 Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Campaign email management
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 09/05/2023	Payee name Google	
Amount (\$) \$31.98	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Campaign email management
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 10/02/2023	Payee name Google	
Amount (\$) \$31.98	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Campaign email management
	Complete <u>ONLY</u> 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: 14/33 Rpt: 33/53	2 FILER NAME Kacal, Kyle J. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00067801
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4 Date 11/02/2023	5 Payee name Google
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6 Amount (\$) \$31.98	7 Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Campaign email management
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/24/2023	Payee name H.E.A.R.T.S. Veterans Museum of Texas
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Amount (\$) \$500.00	Payee address; City; State; Zip Code 463 State Highway 75 N. Huntsville, TX 77320
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Muster Festival Sponsorship
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/21/2023	Payee name Hearne Athletics
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Amount (\$) \$400.00	Payee address; City; State; Zip Code 900 Wheelock Street Hearne, TX 77859
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Eagle Classic Golf Scramble
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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: 15/33 Rpt: 34/53	2 FILER NAME Kacal, Kyle J. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00067801
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4 Date 07/05/2023	5 Payee name Hill Country Springs Water
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6 Amount (\$) \$30.07	7 Payee address; City; State; Zip Code 10019 S. IH35 Austin, TX 78747
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Water cooler rental for capitol office
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/02/2023	Payee name Hill Country Springs Water
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Amount (\$) \$21.32	Payee address; City; State; Zip Code 10019 S. IH35 Austin, TX 78747
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Water cooler rental for capitol office
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/05/2023	Payee name Hill Country Springs Water
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Amount (\$) \$21.32	Payee address; City; State; Zip Code 10019 S. IH35 Austin, TX 78747
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Water cooler rental for capitol office
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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: 16/33 Rpt: 35/53	2 FILER NAME Kacal, Kyle J. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00067801
4 Date 10/04/2023	5 Payee name Hill Country Springs Water	
6 Amount (\$) \$7.58	7 Payee address; City; State; Zip Code 10019 S. IH35 Austin, TX 78747	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Water cooler rental for capitol office
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/02/2023	Payee name Hill Country Springs Water	
Amount (\$) \$35.06	Payee address; City; State; Zip Code 10019 S. IH35 Austin, TX 78747	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Water cooler rental for capitol office
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/06/2023	Payee name Hill Country Springs Water	
Amount (\$) \$27.32	Payee address; City; State; Zip Code 10019 S. IH35 Austin, TX 78747	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Water cooler rental for capitol office
Complete <u>ONLY</u> 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: 17/33 Rpt: 36/53	2 FILER NAME Kacal, Kyle J. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00067801
4 Date 11/28/2023	5 Payee name Huntsville Walker County Chamber of Commerce	
6 Amount (\$) \$350.00	7 Payee address; City; State; Zip Code 1327 11th Street Huntsville, TX 77340	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Annual Membership investment
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/18/2023	Payee name ITech/Bonaconsulting, LLC	
Amount (\$) \$292.28	Payee address; City; State; Zip Code P. O. Box 11975 College Station, TX 77842-1975	
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 Campaign website domain name and annual hosting fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/09/2023	Payee name KC Strategies, LLC	
Amount (\$) \$7,694.19	Payee address; City; State; Zip Code 3571 Far West Blvd #196 Austin, TX 78731	
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 Campaign mailings
Complete <u>ONLY</u> 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: 18/33 Rpt: 37/53	2 FILER NAME Kacal, Kyle J. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00067801
4 Date 08/28/2023	5 Payee name KIVY Radio	
6 Amount (\$) \$1,500.00	7 Payee address; City; State; Zip Code 102 South 5th Street Crockett, TX 75835	
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 Campaign Advertising
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/29/2023	Payee name KIVY Radio	
Amount (\$) \$240.00	Payee address; City; State; Zip Code 102 South 5th Street Crockett, TX 75835	
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 Campaign Advertising
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/25/2023	Payee name Lampo, Donald (Mr.)	
Amount (\$) \$180.00	Payee address; City; State; Zip Code 200 S. Texas Ave., Suite 151 Bryan, TX 77803	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Security for annual fundraiser
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: 19/33 Rpt: 38/53	2 FILER NAME Kacal, Kyle J. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00067801
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4 Date 10/18/2023	5 Payee name Law Offices of Kevin C. Stewart
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6 Amount (\$) \$625.00	7 Payee address; City; State; Zip Code 6801 Yaupon Drive Austin, TX 78759
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Legal Services	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ethics consulting fee
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/03/2023	Payee name Law Offices of Kevin C. Stewart
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Amount (\$) \$625.00	Payee address; City; State; Zip Code 6801 Yaupon Drive Austin, TX 78759
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Legal Services	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ethics consulting fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/13/2023	Payee name Madison County Fair Association
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Amount (\$) \$250.00	Payee address; City; State; Zip Code P.O. Box 1151 Madisonville, TX 77864
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES 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: Sch: 20/33 Rpt: 39/53	2 FILER NAME Kacal, Kyle J. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00067801
4 Date 08/24/2023	5 Payee name Riley, Jeanette	
6 Amount (\$) \$152.08	7 Payee address; City; State; Zip Code 8 Lost Oak Ct. Huntsville, TX 77320	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for food/beverage for campaign event
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2023	Payee name Riley, Jeanette	
Amount (\$) \$243.73	Payee address; City; State; Zip Code 8 Lost Oak Ct. Huntsville, TX 77320	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for purchased items for constituent coffee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/24/2023	Payee name Riley, Jeanette	
Amount (\$) \$47.92	Payee address; City; State; Zip Code 8 Lost Oak Ct. Huntsville, TX 77320	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for Jury Appreciation-Cookies
Complete <u>ONLY</u> 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: 21/33 Rpt: 40/53	2 FILER NAME Kacal, Kyle J. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00067801
4 Date 09/06/2023	5 Payee name Robertson County Republican Women	
6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code P. O. Box 443 Hearne, TX 77859	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Tickets to Constitution Day Dinner
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/13/2023	Payee name Ruffino Meats	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 2130 E. William J. Bryan Pkwy. Bryan, TX 77802	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Food for annual fundraiser
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/31/2023	Payee name Seidel Schroeder	
Amount (\$) \$165.00	Payee address; City; State; Zip Code 1575 Crescent Pointe Pkwy College Station, TX 77845	
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 accounting services
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: 22/33 Rpt: 41/53	2 FILER NAME Kacal, Kyle J. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00067801
4 Date 08/31/2023	5 Payee name Seidel Schroeder	
6 Amount (\$) \$645.00	7 Payee address; City; State; Zip Code 1575 Crescent Pointe Pkwy College Station, TX 77845	
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 accounting services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/30/2023	Payee name Seidel Schroeder	
Amount (\$) \$375.00	Payee address; City; State; Zip Code 1575 Crescent Pointe Pkwy College Station, TX 77845	
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 accounting services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/31/2023	Payee name Seidel Schroeder	
Amount (\$) \$425.00	Payee address; City; State; Zip Code 1575 Crescent Pointe Pkwy College Station, TX 77845	
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 accounting services
Complete <u>ONLY</u> 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: 23/33 Rpt: 42/53	2 FILER NAME Kacal, Kyle J. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00067801
4 Date 11/30/2023	5 Payee name Seidel Schroeder	
6 Amount (\$) \$400.00	7 Payee address; City; State; Zip Code 1575 Crescent Pointe Pkwy College Station, TX 77845	
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 accounting services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/31/2023	Payee name Seidel Schroeder	
Amount (\$) \$950.00	Payee address; City; State; Zip Code 1575 Crescent Pointe Pkwy College Station, TX 77845	
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 accounting services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/14/2023	Payee name TRQD, Inc.	
Amount (\$) \$7,000.00	Payee address; City; State; Zip Code 16373 Tonkaway Lake Road College Station, TX 77845	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Food/Entertainment/Facility for annual fundraiser
Complete <u>ONLY</u> 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: 24/33 Rpt: 43/53	2 FILER NAME Kacal, Kyle J. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00067801
4 Date 09/13/2023	5 Payee name Texas Department of Criminal Justice	
6 Amount (\$) \$155.35	7 Payee address; City; State; Zip Code P. O. Box 4013 Huntsville, TX 77342-4013	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Auction Item for Huntsville Chamber Annual Banquet
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/19/2023	Payee name Texas Silver Haired Legislature Foundation	
Amount (\$) \$250.00	Payee address; City; State; Zip Code 902 N. Main, #10 San Angelo, TX 76903	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TSHLF Directory Ad Sponsorship
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/15/2023	Payee name Thompson, Freddie	
Amount (\$) \$47.00	Payee address; City; State; Zip Code 2651 Pearland Parkway, Ste 102 Pearland, TX 77581	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials 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 Reimbursement for Natural Resources Committee Chairman gift
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: 25/33 Rpt: 44/53	2	FILER NAME Kacal, Kyle J. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00067801
4	Date 07/07/2023	5	Payee name Twin City Mission		
6	Amount (\$) \$600.00	7	Payee address; City; State; Zip Code P. O. Box 3940 Bryan, TX 77805		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 2 Tickets to Gala		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 09/20/2023		Payee name USPS		
	Amount (\$) \$332.00		Payee address; City; State; Zip Code 2121 E. Wm J. Bryan Pkwy. Bryan, TX 77801-9998		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Campaign PO Box rental		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 09/28/2023		Payee name Unlimited Potential		
	Amount (\$) \$300.00		Payee address; City; State; Zip Code 3708 E. 29th #219 Bryan, TX 77802		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Trivia Night Sponsorship		
		Complete <u>ONLY</u> 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: 26/33 Rpt: 45/53	2 FILER NAME Kacal, Kyle J. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00067801
4 Date 09/25/2023	5 Payee name Upstream Communications	
6 Amount (\$) \$9.48	7 Payee address; City; State; Zip Code 5501 Balcones Dr. Ste. A #315 Austin, TX 78731	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online contribution/credit card processing fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/26/2023	Payee name Upstream Communications	
Amount (\$) \$29.69	Payee address; City; State; Zip Code 5501 Balcones Dr. Ste. A #315 Austin, TX 78731	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online contribution/credit card processing fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/27/2023	Payee name Upstream Communications	
Amount (\$) \$24.79	Payee address; City; State; Zip Code 5501 Balcones Dr. Ste. A #315 Austin, TX 78731	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online contribution/credit card processing fees
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: 27/33 Rpt: 46/53	2 FILER NAME Kacal, Kyle J. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00067801
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4 Date 10/23/2023	5 Payee name Upstream Communications
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6 Amount (\$) \$14.40	7 Payee address; City; State; Zip Code 5501 Balcones Dr. Ste. A #315 Austin, TX 78731
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online contribution/credit card processing fees
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2023	Payee name Upstream Communications
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Amount (\$) \$9.70	Payee address; City; State; Zip Code 5501 Balcones Dr. Ste. A #315 Austin, TX 78731
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online contribution/credit card processing fees
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/02/2023	Payee name Van Zandt Visual
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Amount (\$) \$1,136.63	Payee address; City; State; Zip Code 3587 Matoska Ridge College Station, TX 77845
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Photography for annual fundraiser
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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: 28/33 Rpt: 47/53		2 FILER NAME Kacal, Kyle J. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00067801	
4 Date 07/03/2023		5 Payee name WP Engine			
6 Amount (\$) \$36.24		7 Payee address; City; State; Zip Code 504 Lavaca Street Suite 1000 Austin, TX 78701			
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 Campaign website hosting	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 08/01/2023		Payee name WP Engine			
Amount (\$) \$36.24		Payee address; City; State; Zip Code 504 Lavaca Street Suite 1000 Austin, TX 78701			
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 Campaign website hosting	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 09/01/2023		Payee name WP Engine			
Amount (\$) \$36.24		Payee address; City; State; Zip Code 504 Lavaca Street Suite 1000 Austin, TX 78701			
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 Campaign website hosting	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

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: 29/33 Rpt: 48/53	2 FILER NAME Kacal, Kyle J. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00067801
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4 Date 10/02/2023	5 Payee name WP Engine
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6 Amount (\$) \$36.24	7 Payee address; City; State; Zip Code 504 Lavaca Street Suite 1000 Austin, TX 78701
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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 Campaign website hosting
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/01/2023	Payee name WP Engine
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Amount (\$) \$36.24	Payee address; City; State; Zip Code 504 Lavaca Street Suite 1000 Austin, TX 78701
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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 Campaign website hosting
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2023	Payee name WP Engine
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Amount (\$) \$36.24	Payee address; City; State; Zip Code 504 Lavaca Street Suite 1000 Austin, TX 78701
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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 Campaign website hosting
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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: 30/33 Rpt: 49/53	2	FILER NAME Kacal, Kyle J. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00067801
4	Date 07/15/2023	5	Payee name Walker County Fair		
6	Amount (\$) \$2,500.00	7	Payee address; City; State; Zip Code P. O. Box 1817 Huntsville, TX 77342-1817		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation to 2023 livestock show		
9		Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 12/04/2023		Payee name Washington County Chamber of Commerce		
	Amount (\$) \$225.00		Payee address; City; State; Zip Code 314 S. Austin Street Brenham, TX 77833		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Annual Membership dues		
		Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 08/21/2023		Payee name Washington County Chamber of Commerce		
	Amount (\$) \$100.00		Payee address; City; State; Zip Code 314 S. Austin Street Brenham, TX 77833		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Two Tickets to the 2023 Tailgate and Community Pep-Rally		
		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: 31/33 Rpt: 50/53	2 FILER NAME Kacal, Kyle J. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00067801
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4 Date 10/24/2023	5 Payee name Washington County Fair Association
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6 Amount (\$) \$3,945.89	7 Payee address; City; State; Zip Code 1305 E. Blue Bell Road, Suite 110 Brenham, TX 77833
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation to 2023 livestock show
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/31/2023	Payee name Willett, Terra
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Amount (\$) \$300.00	Payee address; City; State; Zip Code 3609 Oak Creek Drive Austin, TX 78727
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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 Contract labor for campaign services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/31/2023	Payee name Willett, Terra
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Amount (\$) \$300.00	Payee address; City; State; Zip Code 3609 Oak Creek Drive Austin, TX 78727
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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 Contract labor for campaign services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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: 32/33 Rpt: 51/53	2 FILER NAME Kacal, Kyle J. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00067801
4 Date 09/30/2023	5 Payee name Willett, Terra	
6 Amount (\$) \$300.00	7 Payee address; City; State; Zip Code 3609 Oak Creek Drive Austin, TX 78727	
8 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 Contract labor for campaign services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/31/2023	Payee name Willett, Terra	
Amount (\$) \$300.00	Payee address; City; State; Zip Code 3609 Oak Creek Drive Austin, TX 78727	
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 Contract labor for campaign services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/30/2023	Payee name Willett, Terra	
Amount (\$) \$300.00	Payee address; City; State; Zip Code 3609 Oak Creek Drive Austin, TX 78727	
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 Contract labor for campaign services
Complete <u>ONLY</u> 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: 33/33 Rpt: 52/53	2 FILER NAME Kacal, Kyle J. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00067801
4 Date 12/31/2023	5 Payee name Willett, Terra	
6 Amount (\$) \$300.00	7 Payee address; City; State; Zip Code 3609 Oak Creek Drive Austin, TX 78727	
8 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 Contract labor for campaign services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
		Office held

The Instruction Guide explains how to complete this form.
** Complete only if "Report Type" on page 1 is marked "Final Report" **

1 C/OH NAME Kacal, Kyle J. (The Honorable)	2 Filer ID (Ethics Commission Filers) 00067801
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3 SIGNATURE

I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.

The Honorable Kyle J. Kacal
Signature of Candidate / Officeholder

4 FILER WHO IS NOT AN OFFICEHOLDER
** Complete A & B below only if you are not an officeholder **

A CAMPAIGN FUNDS

Check only one:

I do not have unexpended contributions or unexpended interest or income earned from political contributions.

I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code 254.204.

B ASSETS

Check only one:

I do not retain assets purchased with political contributions or interest or other income from political contributions.

I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, 254.204.

Signature of Candidate

5 OFFICEHOLDER
** Complete this section only if you are an officeholder **

I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest or other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions.

The Honorable Kyle J. Kacal
Signature of Officeholder