CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to com	plete this form.	1 Filer ID (Ethics Commi 00066988		2 Total pages	filed: 59
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE	USE ONLY
OFFICEHOLDER NAME	The Honorable	John L.			Date Received	
10 101					ELECTRONIC	ALLY EILED
					01/12/2024	ALLI FILLD
	NICKNAME	LAST		SUFFIX	01/12/2024	
		Kuempel				
4 CANDIDATE /	ADDRESS / PO BOX; AF	PT / SUITE #; CIT	Y;	ZIP CODE	Date Hand-delivered	or Date Postmarked
OFFICEHOLDER MAILING	902 E. College St.					
ADDRESS					Receipt #	Amount
Change of Address	Seguin, TX 78155					
					Date Processed	
					Data Imaged	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI		
TREASURER	Mrs.	Michelle		IVII		
NAME	IVII 5.	Michelle				
	NIO(ALANE			OLIETIV		
	NICKNAME	LAST		SUFFIX		
		Kuempel				
6 CAMPAIGN TREASURER	STREET ADDRESS (NO P	O BOX PLEASE);	AP.	T / SUITE #; CITY;	; ST	TATE; ZIP CODE
ADDRESS	902 E. College					
(Residence or Business)						
	Seguin, TX 78155					
7 CAMPAICN	ADEA CODE DU		VTENCION			
7 CAMPAIGN TREASURER		ONE NUMBER E	EXTENSION			
PHONE	(512) 669-9441					
8 REPORT						
TYPE	X January 15	30th day before	election \square	Runoff	15th day after c	ampaign treasurer
			ы. П	L	appointment (of	
	July 15	8th day before 6	election	Exceeded modified	Final Report (At	tach C/OH-FR)
				reporting limit		
9 PERIOD	Month Day Year	f		Month Day	Year	
COVERED	07/01/2023	TH	IROUGH	12/31/202	23	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	f PI	rimary	Runoff	Other	
		I ∏G	eneral	Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT	Γ (if known)	
31 011102	State Representative Di	strict 44		22 011102 0000111	i (ii kilowil)	
		GO T	O PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 59

13 C / OH NAME	14 Filer ID (00066988	(Ethics Commission Filers)				
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	olitical contributions accepted or political These expenditures may have been ma officeholders are required to report this	de without the candidate's or office	eholder's knowledge or		
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME				
	GENERAL					
		COMMITTEE ADDRESS				
	SPECIFIC					
		COMMITTEE CAMPAIGN TREASURE	ER NAME			
		COMMITTEE CAMPAIGN TREASURE	ER ADDRESS			
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (O ES OF LOANS, OR CONTRIBUTIONS I		\$ 0.00		
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES	OF LOANS)	\$ 190,082.85		
EXPENDITURE TOTALS						
	4. TOTAL POLITIC		\$ 163,492.75			
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS RIOD	OF THE LAST DAY OF THE	\$ 562,765.36		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING TING PERIOD	LOANS AS OF THE LAST DAY	\$ 0.00		
17 AFFIDAVIT	-			-		
			nder penalty of perjury, that the acc l includes all information required t iion Code.			
			The Honorable John L. Kuemp	el		
		5	Signature of Candidate or Officehol	der		
AFFIX NO	TARY STAMP / SEAL AB	DVE				
Sworn to and subs	cribed before me, by the s	aid	, this the	day		
of	, 20, to co	ertify which, witness my hand and seal o	f office.			
Signature of offi	cer administering	Printed name of officer administer	ing Title of office	r administering oath		

SUBTOTALS - C/OH

FORM C/OH **COVER SHEET PG 3**

				3 of 59
18 FILER NAM		19 Filer ID	(Ethics Com	mission Filers)
•	John L. (The Honorable)	00066988	T	
	E SUBTOTALS SCHEDULE		SUBTO	TAL AMOUNT
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	143,700.00
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	46,382.85
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	SCHEDULE E: LOANS		\$	
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	158,642.70
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTI	ONS	\$	
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9. X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	4,850.05
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTI	ONS	\$	
12. X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	2,409.18

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 1/19 Rpt: 4/59	
2	FILER NAME Kuempel, Jo	hn L. (The Honorable)		3	Filer ID (Ethics Commission 00066988	n Filers)
4	Date 12/06/2023	 Full name of contributor out-of-state PAC (ID#:_A&M PAC Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$5,000.00
8	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	9 Employer (See Instructions	()		
	· ····o.pa. ooda			,		
	Date 12/06/2023	Full name of contributor out-of-state PAC (ID#:_ABC PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78767				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 12/06/2023	Full name of contributor out-of-state PAC (ID#:_Allen Boone Humphries Robinson LLP Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
		Houston, TX 77027				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/06/2023	Full name of contributor out-of-state PAC (ID#:_ Ancira Strategic Partners, LLP Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 12/06/2023	Full name of contributor out-of-state PAC (ID#:_Avera Governmental Affairs LLC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		

	MONET	ARY POLITICAL C	ONTRIBUTION	IS		SCHEDUI	LE A1
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 2/19 Rpt: 5/59	
2	FILER NAME Kuempel, Jo	hn L. (The Honorable)			3	Filer ID (Ethics Commission 00066988	on Filers)
4	Date 10/17/2023	5 Full name of contributorBartoskewitz, Wilfred6 Contributor address; City; Sta	out-of-state PAC (ID#: ite; Zip Code)	7	Amount of Contribution (\$)	\$200.00
8	Principal occu	Seguin, TX 78155 pation / Job title (See Instructions)	9	Employer (See Instructions	 - s)		
	Farm and rai	nch		Self			
	Date 11/06/2023	Full name of contributor Beer Alliance of Texas PAG Contributor address; City; Sta	-			Amount of Contribution (\$)	\$1,500.00
	Deinainal assu	Austin, TX 78701		Franksian (Coo Instructions	$\overline{\Gamma}$		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 12/06/2023	Full name of contributor Bennett, Joey Contributor address; City; Sta	out-of-state PAC (ID#: ite; Zip Code)		Amount of Contribution (\$)	\$250.00
		Austin, TX 78701			Ĺ		
		pation / Job title (See Instructions) al Affairs Consultant		Employer (See Instructions Self	5)		
	Date 12/12/2023	Full name of contributor Blackridge Contributor address; City; Sta Austin, TX 78701	out-of-state PAC (ID#: tte; Zip Code)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 11/29/2023	Full name of contributor Blumberg, Fred & Sue Contributor address; City; Sta Seguin, TX 78155	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$500.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)		
			1				

	MONET	ARY POLITICAL (CONTRIBUTIO	N	S		SCHEDUI	LE A1
	The Instru	ction Guide explains how	to complete this fo	rn	n.	1	Total pages Schedule A1: Sch: 3/19 Rpt: 6/59	
2	FILER NAME Kuempel, Jo	hn L. (The Honorable)				3	Filer ID (Ethics Commission 00066988	on Filers)
4	Date 10/31/2023	5 Full name of contributor Bowman, Shauna6 Contributor address; City; St	out-of-state PAC (ID#:			7	Amount of Contribution (\$)	\$250.00
		Dallas, TX 75214						
8	Principal occu President	pation / Job title (See Instructions	s) <u> </u>	9	Employer (See Instructions Bowman Engineering ar		Consulting	
	Date 10/06/2023	Full name of contributor Bresnen, Steven and Amy Contributor address; City; St)		Amount of Contribution (\$)	\$500.00
	Dringinal acqu	Austin, TX 78701			Employer (See Instructions	·/-		
	Attorneys/Lo	pation / Job title (See Instructions bbyists)		BresnenAssociates)		
	Date 11/06/2023	Full name of contributor Burchard, Robert Contributor address; City; St	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$500.00
		Gonzales, TX 78629						
	Principal occu retired	pation / Job title (See Instructions	(3)		Employer (See Instructions self	5)		
	Date 10/31/2023	Full name of contributor CDS Muery PAC Contributor address; City; St San Antonio, TX 78216	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions	5)		Employer (See Instructions	s)		
	Date 11/16/2023	Full name of contributor COMCAST Corp. &NBCU Contributor address; City; St Philadelphia, PA 19103		00:	248716		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions	(3)		Employer (See Instructions	5)		
			1					

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDULE A1
	The Instru	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 4/19 Rpt: 7/59
2	FILER NAME Kuempel, Jo	hn L. (The Honorable)		3	Filer ID (Ethics Commission Filers) 00066988
4	Date 10/27/2023	 Full name of contributor)	7	Amount of Contribution (\$) \$100.00
8	Principal occu	Austin, TX 78731 pation / Job title (See Instructions)	Employer (See Instructions	 s)	
	Consultant	, ,	Quorum PA	,	
	Date 12/20/2023	Full name of contributor out-of-state PAC (ID#: Centerpoint Energy PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$) \$1,000.00
		Houston, TX 77210			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ıs)	
	Date 09/06/2023	Full name of contributor out-of-state PAC (ID#: Charles Butt Public Education PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$) \$10,000.00
		San Antonio, TX 78209			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ıs)	
	Date 12/06/2023	Full name of contributor out-of-state PAC (ID#: Choctaw Nation of Oklahoma Contributor address; City; State; Zip Code Durant, OK 74702)		Amount of Contribution (\$) \$3,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ıs)	
	Date 10/06/2023	Full name of contributor out-of-state PAC (ID#: Cobb Fendley PAC Contributor address; City; State; Zip Code Houston, TX 77040)		Amount of Contribution (\$) \$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ıs)	

	MONET	ARY POLITICAL CO	ONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to	o complete this fo	orm.	1	Total pages Schedule A1: Sch: 5/19 Rpt: 8/59	
2	FILER NAME Kuempel, Jo	hn L. (The Honorable)			3	Filer ID (Ethics Commission 00066988	n Filers)
4	Date 10/05/2023	5 Full name of contributor Dade Phelan Campaign6 Contributor address; City; State	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$15,000.00
8	Dringinal occu	Nederland, TX 77627 pation / Job title (See Instructions)	İ	Employer (See Instructions	_		
•	Fillicipal occu			5 Employer (See Instructions	·)		
	Date 10/06/2023	Full name of contributor Dallas Police Officers PAC Contributor address; City; State	out-of-state PAC (ID#:_ e; Zip Code)		Amount of Contribution (\$)	\$500.00
	Principal occu	Dallas, TX 75215 pation / Job title (See Instructions)		Employer (See Instructions	:)		
	Date 12/26/2023	Full name of contributor David L. Cook Campaign Ac Contributor address; City; State)		Amount of Contribution (\$)	\$500.00
	Principal occu	Mansfield, TX 76063 pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 12/06/2023	Full name of contributor Erben & Yarbrough Contributor address; City; State Austin, TX 78701	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>;</u>)		
	Date 12/06/2023	Full name of contributor Focused Advocacy PAC Contributor address; City; State Austin, TX 78701	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
			<u> </u>				

	MONET	ARY POLITICAL (CONTRIBUTIO	ONS		SCHEDU	JLE A1
	The Instru	ction Guide explains hov	v to complete this f	orm.		1 Total pages Schedule A1: Sch: 6/19 Rpt: 9/59	
2	FILER NAME Kuempel, Jo	hn L. (The Honorable)				3 Filer ID (Ethics Commiss 00066988	sion Filers)
4	Date 11/07/2023	5 Full name of contributorFriends of the University6 Contributor address; City; S				7 Amount of Contribution (\$)	\$5,000.00
		Austin, TX 78763					
8	Principal occu	pation / Job title (See Instruction	5)	9 Employer (Se	e Instructions))	
	Date 10/06/2023	Full name of contributor HCA Texas Good Goverr Contributor address; City; S)	Amount of Contribution (\$)	\$1,000.00
	Principal occu	Dallas, TX 75240 pation / Job title (See Instruction:	2)	Employer (Se	a Instructions)	
	i ilicipai occu	pation / Job title (See Instruction)	3)	Employer (30)	e manachona)	,	
	Date 10/06/2023	Full name of contributor HOMEPAC of Texas Contributor address; City; S	out-of-state PAC (ID#:_)	Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78701					
	Principal occu	pation / Job title (See Instruction	5)	Employer (Se	e Instructions))	
	Date 12/06/2023	Full name of contributor HOMEPAC of Texas Contributor address; City; S Austin, TX 78701)	Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instruction:	5)	Employer (Se	e Instructions))	
	Date 10/31/2023	Full name of contributor Halff Associates- State P Contributor address; City; S Richardson, TX 75081				Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instruction	5)	Employer (Se	e Instructions))	

	MONET	ARY POLITICAL (CONTRIBUTIO	NS		SCHEDU	LE A1
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 7/19 Rpt: 10/59	
2	FILER NAME Kuempel, Jo	hn L. (The Honorable)			3	Filer ID (Ethics Commission 00066988	on Filers)
4	Date 12/06/2023	5 Full name of contributor Hillco PAC6 Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code		7	Amount of Contribution (\$)	\$1,000.00
_		Austin, TX 78701	, 1	0.5.1.00.1.1.1			
8	Principal occu	pation / Job title (See Instructions	i)	9 Employer (See Instructions	5)		
	Date 10/28/2023	Full name of contributor Hochheim Prairie PAC Contributor address; City; St				Amount of Contribution (\$)	\$500.00
	Drincinal occu	Yoakum, TX 77995 pation / Job title (See Instructions	<u>, </u>	Employer (See Instructions	-, 		
	i illicipai occu	pation / 300 title (See matractions	,	Employer (See mandenone	۰)		
	Date 12/06/2023	Full name of contributor Holzheauser, Craig Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code)		Amount of Contribution (\$)	\$250.00
		Austin, TX 78756					
	Principal occu Principal	pation / Job title (See Instructions	(i)	Employer (See Instructions Cornerstone Group	5)		
	Date 10/31/2023	Full name of contributor Huitt-Zollars, Inc. Texas F Contributor address; City; St Dallas, TX 75240)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 12/20/2023	Full name of contributor IBAT PAC Contributor address; City; St Austin, TX 78701	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL (CONTRIBUTIO)N:	5		SCHEDUI	LE A1
	The Instru	ction Guide explains hov	v to complete this f	form	1.	1	Total pages Schedule A1: Sch: 8/19 Rpt: 11/59	
2	FILER NAME Kuempel, Jo	hn L. (The Honorable)				3	Filer ID (Ethics Commission 00066988	on Filers)
4	Date 10/31/2023	5 Full name of contributorIDS Engineering Group F6 Contributor address; City; S				7	Amount of Contribution (\$)	\$250.00
		Houston, TX 77040						
8	Principal occu	pation / Job title (See Instructions	5)	9 1	Employer (See Instructions	5)		
	Date 12/08/2023	Full name of contributor Jackson Walker LLP Contributor address; City; S	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$1,000.00
		Dallas, TX 75201-2725				_		
	Principal occu	pation / Job title (See Instructions	5)	'	Employer (See Instructions	5)		
	Date 12/06/2023	Full name of contributor Keffer, James Contributor address; City; S	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$500.00
		Eastland, TX 76448						
	Principal occu Consultant	pation / Job title (See Instructions	5)	1	Employer (See Instructions Keffer Konsulting LLC	5)		
	Date 12/06/2023	Full name of contributor Kralj, Nick Contributor address; City; S Austin, TX 78703	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Lawyer	pation / Job title (See Instructions	s)	1	Employer (See Instructions Kralj Consulting, Inc.	5)		
	Date 12/06/2023	Full name of contributor LAW-PAC Contributor address; City; S Austin, TX 78701	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions	5)	ı	Employer (See Instructions	5)		
				<u> </u>				

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 9/19 Rpt: 12/59	
2	FILER NAME Kuempel, Jo	hn L. (The Honorable)		3	Filer ID (Ethics Commission 00066988	n Filers)
4	Date 12/06/2023	 Full name of contributor		7	Amount of Contribution (\$)	\$500.00
_	<u> </u>	Austin, TX 78701	la = 1 (0 1 1 1 1	<u></u>		
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	S)		
	Date 10/31/2023	Full name of contributor out-of-state PAC (ID#:_ Lennard, Lee (Mr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occu	Katy, TX 77450 pation / Job title (See Instructions)	Employer (See Instructions	·)		
	President	pation / Job title (See Instructions)	BGE Inc.	P)		
	Date 10/06/2023	Full name of contributor)		Amount of Contribution (\$)	\$500.00
		Austin, TX 78760				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 10/06/2023	Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$500.00
	Principal occu	Dallas, TX 75201 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Date 10/06/2023	Full name of contributor out-of-state PAC (ID#:_McGuire Woods Federal PAC Fund Contributor address; City; State; Zip Code Richmond, VA 23219-3916			Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
			1			

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1			
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 10/19 Rpt: 13/59			
2	FILER NAME Kuempel, John L. (The Honorable)			3	Filer ID (Ethics Commission 00066988	on Filers)			
4	Date 12/22/2023	 Full name of contributor McGuire Woods Federal F Contributor address; City; St 			7	Amount of Contribution (\$)	\$250.00		
		Richmond, VA 23219-391	6						
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)				
	Date 12/12/2023	Full name of contributor Meyers, Lucas Contributor address; City; St	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$250.00		
	Principal occu	Austin, TX 78731 pation / Job title (See Instructions	<u> </u>	Employer (See Instructions	<u>:)</u>				
			Governmental Affairs LI						
	Date 10/06/2023	Full name of contributor Moak Casey PAC Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code)		Amount of Contribution (\$)	\$1,000.00		
		Austin, TX 78746							
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)				
	Date 12/06/2023	Full name of contributor Moak Casey PAC Contributor address; City; St Austin, TX 78746			•	Amount of Contribution (\$)	\$1,000.00		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)				
	Date 12/06/2023	Full name of contributor NCHA'S Texas Events PA Contributor address; City; St Fort Worth, TX 76107			•	Amount of Contribution (\$)	\$2,500.00		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)				

	MONET	ARY POLITICAL C	ONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 11/19 Rpt: 14/59	
2	FILER NAME Kuempel, John L. (The Honorable)		3	Filer ID (Ethics Commission 00066988	on Filers)		
4	Date 12/06/2023	5 Full name of contributor NRG Energy Political Actio6 Contributor address; City; Sta		00366559)	7	Amount of Contribution (\$)	\$3,000.00
		Princeton, NJ 08540-6213					
8	Principal occu	pation / Job title (See Instructions)	\$	9 Employer (See Instructions	()		
	Date 12/06/2023	Full name of contributor Naiser, Derek & Susan Contributor address; City; Sta	out-of-state PAC (ID#: tte; Zip Code)		Amount of Contribution (\$)	\$500.00
	Dringinal occu	Boerne, TX 78006 pation / Job title (See Instructions)		Employer (See Instructions			
	Owner	pation / Job title (See instructions)		LNV Engineering	')		
	Date 10/06/2023	Full name of contributor ONCOR Texas State Politi Contributor address; City; Sta				Amount of Contribution (\$)	\$1,000.00
		Dallas, TX 75202					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 12/06/2023	Full name of contributor PAC of The Independent II Contributor address; City; Sta				Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	()		
	Date 12/06/2023	Full name of contributor Parkhill PAC Contributor address; City; Sta	out-of-state PAC (ID#: tte; Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	()		
			L				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 12/19 Rpt: 15/59	
2	FILER NAME Kuempel, John L. (The Honorable)		3	Filer ID (Ethics Commission 00066988	n Filers)	
4	Date 12/06/2023	 Full name of contributor)	7	Amount of Contribution (\$)	\$500.00
8	Principal occu Principal	Austin, TX 78746 pation / Job title (See Instructions)	9 Employer (See Instructions Phenix Saenz)		
	Date 10/06/2023	Full name of contributor out-of-state PAC (ID#:_Political Action Committee of the Independent In Contributor address; City; State; Zip Code Austin, TX 78768	surance Agents of TX		Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/31/2023	Full name of contributor out-of-state PAC (ID#:_Raba-Kistner PAC, Inc Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occu	San Antonio, TX 78269 pation / Job title (See Instructions)	Employer (See Instructions			
	Timopal occu	sation / oob title (oce mandelions)	Employer (See Instructions			
	Date 12/06/2023	Full name of contributor out-of-state PAC (ID#:_ Riceland Consulting, LLC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/06/2023	Full name of contributor out-of-state PAC (ID#:_ Ron Lewis & Associates Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
		•				

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instru	ction Guide explains hov	v to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 13/19 Rpt: 16/59	
2	FILER NAME Kuempel, John L. (The Honorable)		3	Filer ID (Ethics Commission 00066988	on Filers)			
4	Date 12/28/2023	5 Full name of contributor Rowling, Robert6 Contributor address; City; S	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$5,000.00
8	Principal occu	Dallas, TX 75219 pation / Job title (See Instructions	s)	9	Employer (See Instructions	 		
	CEO		,		TRT Holdings	•		
	Date 10/06/2023	Full name of contributor Sampson Public Affairs L Contributor address; City; S					Amount of Contribution (\$)	\$500.00
		Austin, TX 78749	·			Ĺ		
	Principal occupation / Job title (See Instructions) Employer (See Instruction				5)			
	Date 10/31/2023	Full name of contributor Schrock, Kenneth Contributor address; City; S	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$500.00
		Austin, TX 78733						
	Principal occu Senior Vice I	pation / Job title (See Instructions President	5)		Employer (See Instructions LJA Engineering, Inc.	s)		
	Date 12/12/2023	Full name of contributor Shannon, Fred Contributor address; City; S Austin, TX 78701)		Amount of Contribution (\$)	\$1,500.00
	Principal occu Government	pation / Job title (See Instructions al Relations	5)		Employer (See Instructions Self Employed	5)		
	Date 10/31/2023	Full name of contributor Spinks, Melvin Contributor address; City; S Cypress, TX 77433	out-of-state PAC (ID#:_)	•	Amount of Contribution (\$)	\$250.00
	Principal occu Senior Vice I	pation / Job title (See Instruction:	5)		Employer (See Instructions Woolpert	5)		
	School vice i	. rosidorit			ooipoit			

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDULE A1
	The Instru	ction Guide explains how to complete this for	m.	1	Total pages Schedule A1: Sch: 14/19 Rpt: 17/59
2	FILER NAME Kuempel, John L. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00066988
4	Date 12/06/2023	 Full name of contributor)	7	Amount of Contribution (\$) \$1,000.00
8	Principal occu	McQueeney, TX 78123	Employor (Soo Instructions		
0	Manager	pation / Job title (See Instructions) 9	Employer (See Instructions Show, LLC	')	
	Date 12/21/2023	Full name of contributor out-of-state PAC (ID#: TREPAC/Texas Association of Realtors Contributor address; City; State; Zip Code)		Amount of Contribution (\$) \$2,500.00
	Principal occu	Austin, TX 78768-2246 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
		,	, , , , , , , , , , , , , , , , , , ,	,	
	Date 10/06/2023	Full name of contributor out-of-state PAC (ID#: TSAPAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$) \$1,500.00
		Austin, TX 78701		Ĺ	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)	
	Date 08/10/2023	Full name of contributor out-of-state PAC (ID#: Texans for Lawsuit Reform Pac Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$) \$10,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	
	Date 12/06/2023	Full name of contributor out-of-state PAC (ID#: Texas Alliance for Life PAC Contributor address; City; State; Zip Code Austin, TX 78754			Amount of Contribution (\$) \$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	

	MONET	ARY POLITICAL CO	ONTRIBUTION	NS		SCHEDUI	E A1
	The Instruc	ction Guide explains how to	o complete this for	m.	1	Total pages Schedule A1: Sch: 15/19 Rpt: 18/59	
2	FILER NAME Kuempel, Jo	FILER NAME Kuempel, John L. (The Honorable)		3	Filer ID (Ethics Commission 00066988	on Filers)	
4	Date 12/28/2023	 Full name of contributor			7	Amount of Contribution (\$)	\$250.00
_	Delicalization	Cranford, NJ 07016	- In	Form law of Construction	Ĺ		
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 12/06/2023	Full name of contributor Texas Automobile Dealers A Contributor address; City; State Austin, TX 78701				Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 12/06/2023	Full name of contributor Texas Bail PAC Contributor address; City; State	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	Austin, TX 78731 pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 12/06/2023	Full name of contributor Texas Beverage Alliance of Contributor address; City; State Austin, TX 78701				Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	()		
	Date 12/21/2023	Full name of contributor Texas Building Branch AGC Contributor address; City; State Austin, TX 78701)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 16/19 Rpt: 19/59		
2	FILER NAME Kuempel, Jo	FILER NAME Kuempel, John L. (The Honorable)		3	Filer ID (Ethics Commission 00066988	on Filers)	
4	Date 12/06/2023			7	Amount of Contribution (\$)	\$1,000.00	
_	Dringing Lagor	Austin, TX 78701	O Francisco (Coo Instructions				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)			
	Date 11/01/2023	Full name of contributor out-of-state PAC (ID#:_ Texas Farm Bureau AgFund Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00	
	<u> </u>	Waco, TX 76702					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 12/26/2023	Full name of contributor out-of-state PAC (ID#: Texas Farm Bureau AgFund Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,500.00	
		Waco, TX 76702					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 12/12/2023	Full name of contributor out-of-state PAC (ID#:_ Texas High School Coaches PAC Contributor address; City; State; Zip Code San Marcos, TX 78667			Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 12/06/2023	Full name of contributor out-of-state PAC (ID#:_ Texas Lobby Partners LLP Contributor address; City; State; Zip Code Austin, TX 78701)		Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 17/19 Rpt: 20/59	
2	FILER NAME Kuempel, Jo	FILER NAME Kuempel, John L. (The Honorable)		3	Filer ID (Ethics Commission 00066988	on Filers)
4	Date 10/06/2023	 Full name of contributor		7	Amount of Contribution (\$)	\$250.00
_	Point in all and	Austin, TX 78701				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 12/06/2023	Full name of contributor out-of-state PAC (ID#: Texas Poultry PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$300.00
		Round Rock, TX 78681				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 08/01/2023	Full name of contributor out-of-state PAC (ID#: Texas Sands PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5,000.00
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 10/06/2023	Full name of contributor out-of-state PAC (ID#: Texas State Association of Fire Fighters Action C Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 12/06/2023	Full name of contributor out-of-state PAC (ID#: Texas Trial Lawyers Association PAC Contributor address; City; State; Zip Code Austin, TX 78701)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 18/19 Rpt: 21/59		
2	FILER NAME Kuempel, Jo	hn L. (The Honorable)		3	Filer ID (Ethics Commission 00066988	on Filers)	
4	Date 12/06/2023	5 Full name of contributor out-of-state PAC (ID#:) The Chickasaw Nation 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$5,000.00	
•	Dringing oggu	Ada, OK 74820 pation / Job title (See Instructions)	Employer (See Instructions				
8			9 Employer (See Instructions)			
	Date 12/06/2023	Full name of contributor)		Amount of Contribution (\$)	\$500.00	
		Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions)			
	Lobbyist Self employed						
	Date Full name of contributor x out-of-state PAC (ID#: C00169821) 12/12/2023 Tyson Foods Inc PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00		
		Springdale, AR 72765					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 12/06/2023	Full name of contributor out-of-state PAC (ID#:_ USAA Employee PAC Contributor address; City; State; Zip Code San Antonio, TX 78288-0453			Amount of Contribution (\$)	\$3,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 12/06/2023	Full name of contributor 💢 out-of-state PAC (ID#: CUDENT OF CONTRIBUTION OF CONTRIBUTION OF CONTRIBUTION OF CONTRIBUTION OF CUDENT OF CONTRIBUTION OF CUDENT OF CUDEN			Amount of Contribution (\$)	\$1,500.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	1						

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1			
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 19/19 Rpt: 22/59			
2	FILER NAME Kuempel, John L. (The Honorable)			3	Filer ID (Ethics Commission 00066988	on Filers)			
4	Date 12/06/2023	5 Full name of contributorUnitedhealth Group. Inc. F6 Contributor address; City; St		_	7	Amount of Contribution (\$)	\$1,000.00		
		Washington, DC 20004							
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)				
	Date 12/06/2023	Full name of contributor Valdez, Jerry Contributor address; City; St	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$1,000.00		
	Principal occu	Austin, TX 78711 pation / Job title (See Instructions)	Employer (See Instructions	s)				
	Owner	(,	The Valdez Company	-,				
	Date 10/06/2023	Full name of contributor Vistra Employee PAC of V Contributor address; City; St				Amount of Contribution (\$)	\$1,000.00		
		Irving, TX 75039-2479							
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)				
	Date 10/31/2023	Full name of contributor Weekley, Richard W. Contributor address; City; St Houston, TX 77027				Amount of Contribution (\$)	\$5,000.00		
	Principal occu Owner	pation / Job title (See Instructions)	Employer (See Instructions Weekley Properties	s)				
	Date 12/06/2023	Full name of contributor Wholesale Beer Distrbuto Contributor address; City; St Austin, TX 78701				Amount of Contribution (\$)	\$1,500.00		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)				
			1						

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instru	action Guide explains how to complete this f	orm.	1 Total pages Schedule A2: Sch: 1/4 Rpt: 23/59				
2 FILER NAME			3 Filer ID (Ethics Commission Filers)				
	ohn L. (The Honorable)		00066988				
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$				
5 Date	6 Full name of contributor out-of-state PAC (ID#:)	8 Amount of 9 In-kind contribution				
10/31/2023	Associated Republicans of Texas Campaign Fu	nd	contribution (\$) description \$3,054.39 Campaign Text Messages				
	7 Contributor address; City; State; Zip Code		I I				
			i				
	Auctin TV 79746		_				
10 Dringing Loop	Austin, TX 78746	11 Employer (FOR NO	Check if travel outside of Texas. Complete Schedule T.				
10 Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	I-JUDICIAL) (See instructions)				
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)				
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)				
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)						
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of In-kind contribution				
10/23/2023	Associated Republicans of Texas Campaign Fu	nd	contribution (\$) description \$4,000.00 Campaign digital				
	Contributor address; City; State; Zip Code		advertising				
			_				
	Austin, TX 78746	T	Check if travel outside of Texas. Complete Schedule T.				
Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	I-JUDICIAL) (See instructions)				
0	refer in all a source time (FOR ALIDIOLAL)	O - resulta restanta da la testa eleta	(EOD JUDIOIAL) (Considerations)				
Contributors	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)				
Contributor's	employer/law firm (FOR JUDICIAL)	Low firm of contribute	orle engues (if any) (EOD JUDICIAL)				
Continuators	employer/law lifth (FOR JODICIAL)	Law IIIII of Continbut	or's spouse (if any) (FOR JUDICIAL)				
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)						
ii continuator	is a clind, law little of paretiles) (ii arry) (i on sobicine)						
Deta	Full name of contributes.		Amount of Inclined a settle state				
Date 09/12/2023	Full name of contributor out-of-state PAC (ID#:)	Amount of In-kind contribution contribution (\$) description				
09/12/2023	Associated Republicans of Texas Campaign Ful	10	\$2,000.00 Campaign Digital				
	Contributor address; City; State; Zip Code		Advertising				
	Austin, TX 78746		Check if travel outside of Texas. Complete Schedule T.				
Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON					
· ·			•				
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)				
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)				
If contributor	If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)						

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instru	ction Guide explains how to complete this t	1 Total pages Schedule A2: Sch: 2/4 Rpt: 24/59			
2 FILER NAME			3 Filer ID (Ethics Commission Filers)		
Kuempel, Jo	ohn L. (The Honorable)	00066988			
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	\$			
5 Date	6 Full name of contributor ut-of-state PAC (ID#:)	8 Amount of 9 In-kind contribution		
10/03/2023		nd	contribution (\$) description \$2,000.00 Campaign Digital		
	7 Contributor address; City; State; Zip Code		Advertising		
			į		
	Austin, TX 78746		Check if travel outside of Texas. Complete Schedule T.		
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	. —		
	,		,		
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 contribute	or's spouse (if any) (FOR JUDICIAL)		
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of In-kind contribution contribution (\$) description		
12/19/2023	Dade Phelan Campaign		\$14,600.00 Polling		
	Contributor address; City; State; Zip Code				
			į į		
	Austin, TX 78763		Charles and a daily of Tanana Camarlan Cabadala T		
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	Check if travel outside of Texas. Complete Schedule T. J-JUDICIAL) (See instructions)		
			,		
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)		
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)		
If contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of In-kind contribution contribution (\$) description		
10/06/2023	Francis, Jim		\$4,533.04 Food and Drink Catering		
	Contributor address; City; State; Zip Code				
	Dallas, TX 75205		Check if travel outside of Texas. Complete Schedule T.		
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON			
Retired	,	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 contribute	or'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 Instru	ection Guide explains how to complete this t	1 Total pages Schedule A2: Sch: 3/4 Rpt: 25/59							
2 FILER NAME	i	3 Filer ID (Ethics Commission Filers)							
Kuempel, Jo	ohn L. (The Honorable)		00066988						
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	\$							
5 Date	6 Full name of contributor out-of-state PAC (ID#:)	8 Amount of	9 In-kind contribution					
10/06/2023	Francis, Jim		contribution (\$)	description Valet Service					
	7 Contributor address; City; State; Zip Code		Ψ000.73	Valet Scrvice					
	Dallac TV 75205		_ ;	 					
10 Principal coo	Dallas, TX 75205	11 Employer (FOR NO		utside of Texas. Complete Schedule T.					
Retired	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON Self	I-JUDICIAL) (See II	istructions)					
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 contribute	or's spouse (if any) (I	FOR JUDICIAL)					
40 11									
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)								
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)	In-kind contribution description					
11/14/2023	Ingersoll, Deborah		\$350.00	-					
	Contributor address; City; State; Zip Code			I I					
	Austin, TX 78701			 					
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON		utside of Texas. Complete Schedule T. nstructions)					
Owner	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Legislative Solution	•						
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title		(See instructions)					
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (I	FOR JUDICIAL)					
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)								
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of	In-kind contribution					
12/06/2023	Moak Casey PAC		contribution (\$)	description Food, drinks and space					
	Contributor address; City; State; Zip Code			for Capitol Cafe					
				fundraising event					
	Aughin TV 70740		_ ;						
Driveineless	Austin, TX 78746 upation / Job title (FOR NON-JUDICIAL) (See instructions)	Franks von (FOR NON		utside of Texas. Complete Schedule T.					
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) (See instructions)									
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL)	(See instructions)					
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	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 SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 4/4 Rpt: 26/59 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Kuempel, John L. (The Honorable) 00066988 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS **6** Full name of contributor 9 In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 12/13/2023 Texans for Lawsuit Reform Pac \$14,600.00 Campaign polling 7 Contributor address; City; State; Zip Code Austin, TX 78701 Check if travel outside of Texas. Complete Schedule T. (See instructions) 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 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)

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made E
Candidate/Officeholder/Politic

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
<u> </u>	Total name - Oct - 1 1 Er	· · · · · · · · · · · · · · · · · · ·
	Total pages Schedule F1: Sch: 1/27 Rpt: 27/59	2 FILER NAME Kuempel, John L. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00066988
4	Date	5 Payee name
	11/09/2023	AT&T Mobility
6	Amount (\$) \$189.06	7 Payee address; City; State; Zip Code PO Box 5014 Carol Stream, IL 60197
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	telephone Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense campaign cell phone
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	07/11/2023	AT&T
	Amount (\$) \$268.34	Payee address; City; State; Zip Code PO Box 105414
		Atlanta, GA 30348-5414
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) cell phone (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign cell phone
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	08/09/2023	AT&T
	Amount (\$) \$187.69	Payee address; City; State; Zip Code PO Box 105414
		Atlanta, GA 30348-5414
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) phone (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense campaign cell phone
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Git/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 2/27 Rpt: 28/59	Kuempel, John L. (The Honorable) 00066988
4	Date	5 Payee name
	09/01/2023	AT&T
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$187.69	PO Box 105414
		Atlanta, GA 30348-5414
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	telephone Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		campaign cell phone
		Souripung. Souripung.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	10/10/2023	AT&T
	Amount (\$)	Payee address; City; State; Zip Code
	\$187.69	PO Box 105414
		Atlanta, GA 30348-5414
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	telephone Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		campaign cell phone
		Carripangin Compiner
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	12/11/2023	AT&T
	Amount (\$)	Payee address; City; State; Zip Code
	\$189.06	PO Box 105414
	Ψ100.00	. 5 25. 250 121
		Atlanta, GA 30348-5414
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	telephone Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		campaign cell phone
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Com Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
Ļ		
1	Total pages Schedule F1:	
	Sch: 3/27 Rpt: 29/59	Kuempel, John L. (The Honorable) 00066988
4	Date	5 Payee name
	08/06/2023	Allan Dreibrodt Memorial Fund
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$6,000.00	1660 Sagebiel Road
	, , , , , , , , ,	
		Coguin TV 701EE
		Seguin, TX 78155
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		donation to event
_	Complete ONLY !! -!!	Condidate/Officeholder name Office accords
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/08/2023	Anedot
	Amount (\$)	Payee address; City; State; Zip Code
	\$105.90	PO Box 84314
		Baton Rouge, LA 70884
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Anedot contribution fees
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
_		
	Date	Payee name
	12/14/2023	Anedot
	Amount (\$)	Payee address; City; State; Zip Code
	\$9.05	PO Box 84314
		Baton Rouge, LA 70884
	PURPOSE	(A) 2
	OF	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Anedot contribution fees
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	-

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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)

	Credit Card Payment	The Instruction Guide explains how to con	nple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 4/27 Rpt: 30/59	Kuempel, John L. (The Honorable)		00066988
4	Date	5 Payee name		·
	10/27/2023	Anedot		
6	Amount (\$)	7 Payee address; City; State; Zip Coo	de	
	\$3.80	PO Box 84314		
		Baton Rouge, LA 70884		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Fees		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense anedot fees
				and detrees
9	Complete ONLY if direct	Candidate/Officeholder name Office soug	aht	Office held
	expenditure to benefit C/O		,	0.1100 1.010
_	Date	Payee name		
	09/25/2023	Buck Fever		
	Amount (\$)	Payee address; City; State; Zip Coo	de.	
	\$400.00	806 N. Cherry St.		
	,	, , ,		
		Seguin, TX 78155		
	PURPOSE		(b)	Description
	OF	Contributions/Donations Made By	(~)	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee		Check if Austin, TX, officeholder living expense
				fundraiser donation
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office soug	gnt	Office held
	· 			
	Date	Payee name		
	07/03/2023	CWS Apartment		
	Amount (\$)	Payee address; City; State; Zip Coo	de	
	\$2,300.00	222 E. Riverside Drive		
		Austin, TX 78704		
	PURPOSE OF	2 ((b)	Description
	EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T. X Check if Austin, TX, officeholder living expense
				Austin Apt rent
				·
	Complete ONLY if direct	Candidate/Officeholder name Office soug	ght	Office held
	expenditure to benefit C/O	4		
4				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	
1 Total pages Schedule F1: Sch: 5/27 Rpt: 31/59	2 FILER NAME Kuempel, John L. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00066988
4 Date	5 Payee name
08/02/2023	CWS Apartment
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,300.00	222 E. Riverside Drive
	Austin, TX 78704
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
EXPENDITURE	X Check if Austin, TX, officeholder living expense
	Austin apt rent
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
experialtare to belieff C/O	n
Date	Payee name
08/14/2023	CWS Apartment
Amount (\$)	Payee address; City; State; Zip Code
\$1,807.02	222 E. Riverside Drive
	Austin, TX 78704
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	X Check if Austin, TX, officeholder living expense
	Austin apartment rent
Operation ONLY if allowers	On all data (Office helder marre
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
09/05/2023	CWS Apartment
Amount (\$)	Payee address; City; State; Zip Code
\$926.65	222 E. Riverside Drive
	Austin, TX 78704
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
EXI ENDITORE	X Check if Austin, TX, officeholder living expense
	Austin apartment rent
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
experientare to beliefit 6/0	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
_		
1	Total pages Schedule F1: Sch: 6/27 Rpt: 32/59	2 FILER NAME Kuempel, John L. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00066988
4	Date	5 Payee name
	10/02/2023	CWS Apartment
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,281.00	222 E. Riverside Drive
		Austin, TX 78704
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	X Check if Austin, TX, officeholder living expense
		Austin apartment rent
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
H	Date	Payee name
	11/07/2023	CWS Apartment
	Amount (\$)	Payee address; City; State; Zip Code
	` ,	222 E. Riverside Drive
	\$2,872.64	222 E. Riverside Drive
		Austin, TX 78704
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Austin apartment rent
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/04/2023	CWS Apartment
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,442.09	222 E. Riverside Drive
		Austin, TX 78704
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	X Check if Austin, TX, officeholder living expense
		Austin apartment rent
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement
Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	
L	Sch: 7/27 Rpt: 33/59	Kuempel, John L. (The Honorable) 00066988
4	Date	5 Payee name
	12/12/2023	Capitol Extension Gift Shop
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$259.80	1400 N. Congress Avenue
		E1.006
		Austin, TX 78701
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee
		donations to fundraiser
Ļ		
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/05/2023	First Commercial Bank
	Amount (\$)	Payee address; City; State; Zip Code
	\$10.00	1336 East Court
		Seguin, TX 78155
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		incoming wire fee
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	09/25/2023	Friends of the Gonzales Library
	Amount (\$)	Payee address; City; State; Zip Code
	\$50.00	P.O. Box 220
		Gonzales, TX 78629
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		Turidiasci dollation
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schodule F1:	· · · · · · · · · · · · · · · · · · ·
1	Total pages Schedule F1: Sch: 8/27 Rpt: 34/59	Kuempel, John L. (The Honorable) September 10 (Eurics Commission Files) 00066988
4	Date	5 Payee name
	09/27/2023	Guadalupe County Children's Advocacy Center
6	Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 265 Wetz
		Seguin, TX 78155
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
_	•	
	Date	Payee name
	08/29/2023	Guadalupe County Family Violence Center
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	P.O. Box 1302
		Seguin, TX 78156
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense donation
		donation
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
L	11/03/2023	Guadalupe County Farm Bureau
	Amount (\$)	Payee address; City; State; Zip Code
	\$50.00	PO Box 924
		Seguin, TX 78156-0924
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Membership - annual
		monitorising arrival
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement
Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Gift/Award Legal Serv		Expense		Expens Wages			Travel in District Travel Out of Di OTHER (enter a		above)
1	Total pages Schedule F1:	2	FILER NAME	Ξ						3	Filer ID	(Ethics Commis	ssion Filers)
	Sch: 9/27 Rpt: 35/59		Kuempel, J	ohn L. (The Hon	orable)					00066988		
4	Date	5	Payee name							_			
	11/02/2023		Guadalupe	Regiona	al Medica	al Foundat	tion						
6	Amount (\$)	7	Payee addre	ess; C	City;	State	e; Zip C	ode					
	\$500.00		1215 E. Co	urt St.									
			Seguin, TX	78155									
8	PURPOSE	(a)	Category (S	ee Categori	es listed at th	ne top of this sc	hedule)	(b)	Description				
	OF EXPENDITURE		Contribution	ns/Dona	tions Ma	ide By						plete Schedule T.	
	EXI ENDITORE		Candidate/	Officeho	lder/Poli	tical Comr	nittee		_		, officeholder livin	g expense	
									donation to fu	unc	ıraisei		
9	Complete ONLY if direct	Ц,	Candidate/Off	iooboldor	nomo		Office sou	ught			Office h	old	
9	expenditure to benefit C/OI		Zanuluale/On	iceriolaei	name		Office sor	ugnt			Office II	eiu	
	Date		Payee name										
	11/03/2023		Guadalupe	Regiona	al Medica	al Foundat	tion						
	Amount (\$)		Payee addre	ess; C	City;	State	e; Zip Co	ode					
	\$1,000.00		1215 E. Co	urt St.									
			Seguin, TX	78155									
	PURPOSE	(a)	Category (S	ee Categori	es listed at th	ne top of this sc	hedule)	(b)	Description				
	OF EXPENDITURE		Contribution									plete Schedule T.	
			Candidate/	Officeho	lder/Poli	tical Comr	nittee		donation to fu		, officeholder livin	g expense	
									uonation to it	unc	ilaisei		
-	Complete ONLY if direct		Candidate/Off	iceholder	name		Office sou	<u>l</u> uaht			Office h	eld	
	expenditure to benefit C/OI	Н											
	Date		Payee name										
	09/28/2023		Hill Country	/ Springs	S								
	Amount (\$)		Payee addre	ess; C	City;	State	e; Zip Co	ode					
	\$106.29		PO Box 22	20									
			Manchaca,	TX 786	52								
	PURPOSE	(a)	Category (S	ee Categori	es listed at th	ne top of this sc	hedule)	(b)	Description				
	OF EXPENDITURE		Office Expe	ense								plete Schedule T.	
									water for cap		, officeholder living	g expense	
	Complete ONLY if direct		Candidate/Off	iceholder	name		Office sou	l ught			Office h	eld	
	expenditure to benefit C/OI							J -					
L													

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comn

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Candidate/Officeholder/Politica		OTHER (enter a category not listed above)
L	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 10/27 Rpt: 36/59	Kuempel, John L. (The Honorable)	00066988
4	Date	5 Payee name	
	12/12/2023	KWED	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$199.00	PO Box 1600	
		Seguin, TX 78156	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Advertising Expense	outside of Texas. Complete Schedule T.
		l	TX, officeholder living expense
		auvertising of	i iocai faulo station
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
9	expenditure to benefit C/O		Office field
\vdash	Date	Power name	
	Date 12/22/2023	Payee name Kelso, Stepheny	
_		, , ,	
	Amount (\$) \$5,000.00	Payee address; City; State; Zip Code 871 Sweet Home Road	
	φο,υυυ.υυ	011 Sweet Hollie Rodu	
		Coguin TV 701EE	
	DUDDOS-	Seguin, TX 78155	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel	outside of Texas. Complete Schedule T.
	EXPENDITURE	Salaries/Wages/Cornitact Eabor	, TX, officeholder living expense
		payroll	
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/Of		
	Date	Payee name	
L	09/25/2023	Kuempel, John	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,534.18	902 E. College	
		Seguin, TX 78155	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Louis Repayment Climbursement	outside of Texas. Complete Schedule T.
		I — I —	TX, officeholder living expense ent for meeting with reps of oil/gas,
			roadband industries
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		
	rms provided by Tevas F	thice Commission www.athics state ty us	Version V2.5.1 Objeth67

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)						
	Sch: 11/27 Rpt: 37/59	Kuempel, John L. (The Honorable) 00066988						
4	Date	5 Payee name						
	09/25/2023	Kuempel, John						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$467.96	902 E. College						
		Seguin, TX 78155						
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Loan Repayment/Reimbursement Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
		Reimb for lunches with constituents						
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/OI							
_	Date	Payee name						
	10/24/2023	Kuempel, John						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$1,847.91	902 E. College						
		5						
		Seguin, TX 78155						
	PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF	Loan Repayment/Reimbursement Check if travel outside of Texas. Complete Schedule T.						
	EXPENDITURE	Check if Austin, TX, officeholder living expense						
		Reimb for travel for fundraiser and meeting wi Regents in Dallas						
	Operation ONLY if allower							
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH							
_								
	Date	Payee name Moddon, Brittney						
	08/15/2023	Madden, Brittney						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$409.20	11419 Lafitte Lane						
		Auglia TV 70720						
		Austin, TX 78739						
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Postage (b) Description Check if travel outside of Texas. Complete Schedule T.						
	EXPENDITURE	Postage Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
		postage for grad letters						
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/OI	7						

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 12/27 Rpt: 38/59	Kuempel, John L. (The Honorable) 00066988
4	Date	5 Payee name
	07/06/2023	Murphy Nasica
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,500.00	815-A Brazos St
		Suite 304
		Austin, TX 78701
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		☐ Check if Austin, TX, officeholder living expense campaign advertising
		campaign advertising
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	-
	Date	Payee name
	07/17/2023	Murphy Nasica
	Amount (\$)	Payee address; City; State; Zip Code
	\$658.90	815-A Brazos St
		Suite 304
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		campaign advertising
		ounipaign actioning
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	-
	Date	Payee name
	07/26/2023	Murphy Nasica
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,500.00	815-A Brazos St
		Suite 304
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
	ZA ZABITORZ	Check if Austin, TX, officeholder living expense
		campaign advertising
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.								
1	Total pages Schedule F1:									
	Sch: 13/27 Rpt: 39/59	Kuempel, John L. (The Honorable) 00066988								
4	Date	5 Payee name								
	10/03/2023	Murphy Nasica								
6	Amount (\$)	7 Payee address; City; State; Zip Code								
	\$1,500.00	815-A Brazos St								
		Suite 304								
		Austin, TX 78701								
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description								
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.								
	EXI ENDITORE	Check if Austin, TX, officeholder living expense								
		monthly consulting charge								
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held								
	expenditure to benefit C/Ol									
	Date	Payee name								
	10/24/2023	Murphy Nasica								
_	Amount (\$)	Payee address; City; State; Zip Code								
	\$13,458.00	PO Box 1648								
	Ψ13,430.00	10 00 1040								
		Austin, TX 78767								
	PURPOSE									
	OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.								
	EXPENDITURE	Check if Austin, TX, officeholder living expense								
		campaign advertising								
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held								
	experientare to benefit eroi	'								
	Date	Payee name								
	08/31/2023	Murphy Nasica								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$1,500.00	PO Box 1648								
		Austin, TX 78767								
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description								
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.								
		Check if Austin, TX, officeholder living expense monthly consulting fee								
		Thomany consulting ice								
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held								
	expenditure to benefit C/O									
l										

SCHEDULE F1

Advertising Expense Accounting/Banking Event Expense Fees Consulting Expense

Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 14/27 Rpt: 40/59 Kuempel, John L. (The Honorable) 00066988 4 Date Payee name 11/14/2023 Murphy Nasica 6 Amount (\$) Payee address; City; State; Zip Code \$11,936.39 PO Box 1648 Austin, TX 78767 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense campaign advertising Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 11/02/2023 Murphy Nasica Amount (\$) Payee address; City; State; Zip Code \$13,500.00 PO Box 1648 Austin, TX 78767 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense campaign advertising Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/12/2023 Murphy Nasica Amount (\$) Payee address: City: State; Zip Code \$26,958.00 PO Box 1648 Austin, TX 78767 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense campaign advertising Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
ense Event Expense Loan Repayment/Reimbu

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committ

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
	Sch: 15/27 Rpt: 41/59	Kuempel, John L. (The Honorable) 00066988					
4	Date	5 Payee name					
	12/28/2023	Murphy Nasica					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$36,338.87	PO Box 1648					
		Austin, TX 78767					
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
		campaign advertising					
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/Ol	1					
	Date	Payee name					
	08/15/2023	Navarro FFA Booster Club					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$250.00	6450 N. State Hwy 123					
		Seguin, TX 78155					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
		Candidate/Officeholder/Political Committee					
	idildidisei doliddoli						
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/O						
	Date	Payee name					
	09/25/2023	Navarro Project Graduation					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$100.00	2601 Francis Harris Lane					
		San Marcos, TX 78666					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.					
	-	Candidate/Officeholder/Political Committee					
		นบาลแบบ เขานาสเระ					
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/O						

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)						
	Sch: 16/27 Rpt: 42/59	Kuempel, John L. (The Honorable) 00066988						
4	Date	5 Payee name						
	08/29/2023	Posey, Carol						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$65.00	220 Triple Crown Run						
		San Marcos, TX 78666						
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	payroll taxes Check if travel outside of Texas. Complete Schedule T.						
	LAFLINDITORE	Check if Austin, TX, officeholder living expense						
		preparation of quarterly payroll taxes						
_	Complete ONL V if direct	Candidate/Officeholder name Office sought Office held						
9	Complete ONLY if direct expenditure to benefit C/OI							
	Date							
	Date	Payee name						
	11/01/2023	Posey, Carol						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$65.00	220 Triple Crown Run						
		San Marcos, TX 78666						
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	EXPENDITURE	quarterly taxes Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
		preparation of quarterly reports						
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/OI	1						
	Date	Payee name						
	09/19/2023	Relay for Life-Guadalupe County						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$500.00	167 Twin Oak						
		Seguin, TX 78155						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.						
	EXPENDITURE	Candidate/Officeholder/Political Committee						
		donation to event						
	Operation ONE VIII II	Our file to 10% as halden a same						
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held						

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarice Magnes/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 17/27 Rpt: 43/59	Kuempel, John L. (The Honorable) 00066988
4	Date	5 Payee name
	11/28/2023	Republican Party of Texas
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$750.00	1108 Lavaca
		Suite 500
		Austin, TX 78701
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		filing fees
_	Complete ONL V if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/OH	
_	Data	
	Date	Payee name
	11/03/2023	San Antonio Express News
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,151.40	PO Box 2171
		San Antonio, TX 78297
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	newspaper Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense subscription for newspaper
		Subscription for Hewspaper
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
_	Date	Payee name
	07/05/2023	Seguin Band Boosters
	Amount (\$) \$250.00	Payee address; City; State; Zip Code 655 Old Seguin Luling Road
	φ230.00	033 Old Seguill Ediling Road
		Seguin, TX 78155
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
		donation to fundraiser
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	4

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

Groun Gara Faymon	The Instruction Guide explains how to c	omplete this form.						
1 Total pages Schedule F	L: 2 FILER NAME	3 Filer ID (Ethics Commission Filers)						
Sch: 18/27 Rpt: 44/59	Kuempel, John L. (The Honorable)	00066988						
4 Date	5 Payee name	•						
12/12/2023	Seguin Chamber of Commerce							
6 Amount (\$)	7 Payee address; City; State; Zip C	ode						
\$150.0	116 N. Camp Street							
	Seguin, TX 78155							
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description						
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.						
EXI ENDITORE		Check if Austin, TX, officeholder living expense						
		membership dues						
9 Complete ONLY if direct	Condidate/Officeholder name Office co	Office hold						
9 Complete <u>ONLY</u> if direct expenditure to benefit Complete.		ught Office held						
Date	Payee name							
08/15/2023	Seguin Conservation Society							
Amount (\$)	Payee address; City; State; Zip C	ode						
\$100.0	PO Box 245							
	Seguin, TX 78156							
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description						
OF EXPENDITURE	Contributions/Donations Made By	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
	Candidate/Officeholder/Political Committee	donation						
	donation.							
Complete ONLY if direct Candidate/Officeholder name Office sought Office held								
expenditure to benefit C	ОН							
Date	Payee name							
07/17/2023	Seguin Gazette Enterprise							
Amount (\$)	Payee address; City; State; Zip C	ode						
\$120.0								
+===	1							
	Seguin, TX 78156							
PURPOSE	1	(h) Description						
OF	(a) Category (See Categories listed at the top of this schedule) newspaper subscription	(b) Description Check if travel outside of Texas. Complete Schedule T.						
EXPENDITURE	Hewspaper subscription	Check if Austin, TX, officeholder living expense						
		local newspaper subscription						
Complete ONLY if direct		ught Office held						
expenditure to benefit C	UH							

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)							
	Sch: 19/27 Rpt: 45/59	Kuempel, John L. (The Honorable) 00066988							
4	Date	5 Payee name							
	07/26/2023	Seguin Gazette Enterprise							
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$1,142.40	PO Box 1200							
L		Seguin, TX 78156							
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Taylor Complete Schedule T							
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
		June advertising							
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held							
	experialture to beriefft C/Oi								
	Date	Payee name							
	08/15/2023	Seguin Gazette Enterprise							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$61.20	PO Box 1200							
		Seguin, TX 78156							
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.							
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
		advertising in local newspaper							
L									
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held							
	·								
	Date	Payee name							
	08/23/2023	Seguin Gazette Enterprise							
	Amount (\$) \$250.00	Payee address; City; State; Zip Code PO Box 1200							
	Ψ230.00	1 0 B0x 1200							
		Seguin, TX 78156							
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF	Advertising Expense Check if travel outside of Texas. Complete Schedule T.							
	EXPENDITURE	Check if Austin, TX, officeholder living expense							
		Newspapers in Education							
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	expenditure to benefit C/OI								
\vdash									
ĺ									

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 20/27 Rpt: 46/59	Kuempel, John L. (The Honorable) 00066988
4	Date	5 Payee name
	09/25/2023	Seguin Gazette Enterprise
6	Amount (\$) \$93.64	7 Payee address; City; State; Zip Code PO Box 1200
	φ93.04	FO BOX 1200
		Seguin, TX 78156
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	_/	Check if Austin, TX, officeholder living expense advertising in local newspaper
		advortioning in room nonopape.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	11/07/2023	Seguin Gazette Enterprise
	Amount (\$)	Payee address; City; State; Zip Code
	\$61.20	PO Box 1200
		Cognin TV 70156
	PURPOSE	Seguin, TX 78156
	OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		advertising in local newspaper
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	10/12/2023	Seguin Gazette Enterprise
	Amount (\$)	Payee address; City; State; Zip Code
	\$571.20	PO Box 1200
		Seguin, TX 78156
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		advertising in local paper
L	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
ı		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -Event Expense Fees

Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica	The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)							
	Sch: 21/27 Rpt: 47/59	Kuempel, John L. (The Honorable) 00066988							
4	Date	5 Payee name							
	12/12/2023	Seguin Gazette Enterprise							
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$76.50	PO Box 1200							
		Seguin, TX 78156							
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.							
		Check if Austin, TX, officeholder living expense advertising in local paper							
		davertioning in local paper							
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	expenditure to benefit C/O								
	Date	Payee name							
	07/06/2023	Sheriff's Association of Texas							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$25.00	1601 South IH-35							
	,								
		Austin, TX 78741-2503							
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF	Fees Check if travel outside of Texas. Complete Schedule T.							
	EXPENDITURE	Check if Austin, TX, officeholder living expense							
		membership							
	Complete ONLY if direct Condidate/Officeholder name Office sought Office hald								
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH								
	Data	David and a second a second and							
	Date 10/19/2023	Payee name Sine Die Scholarship Foundation							
		· · · · · · · · · · · · · · · · · · ·							
	Amount (\$) \$250.00	Payee address; City; State; Zip Code 407 South Crest Drive							
	Ψ230.00	407 South Crest Drive							
		Austin, TX 78747							
	DUDDOCE	Tu.							
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By (b) Description Check if travel outside of Texas. Complete Schedule T.							
	EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense							
		donation to scholarship							
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held							
	experientale to beliefft C/O	•							

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made E

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
		· · · · · · · · · · · · · · · · · · ·
1	Total pages Schedule F1: Sch: 22/27 Rpt: 48/59	2 FILER NAME Kuempel, John L. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00066988
4	Date	5 Payee name
•	07/24/2023	Spectrum
6	Amount (\$) \$316.67	7 Payee address; City; State; Zip Code 12012 N. MoPac Expressway Austin, TX 78758
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense phone, tv, internet for Austin apt
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	08/24/2023	Spectrum
	Amount (\$)	Payee address; City; State; Zip Code
	\$316.98	12012 N. MoPac Expressway
		Austin, TX 78758
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		\[\times \times \text{Check if Austin, TX, officeholder living expense} \] phone, internet, cable for Austin apartment
		phone, internet, easie ioi riastin apartinent
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	09/25/2023	Spectrum
	Amount (\$)	Payee address; City; State; Zip Code
	\$314.46	12012 N. MoPac Expressway
		Austin, TX 78758
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		X Check if Austin, TX, officeholder living expense
		cable, internet, phone for Austin apartment
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Con Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment				Legal Services		ung Expe iries/Wag		e /Contract Labor		OTHER (enter a	a category not listed above)	
				The Instruction Gu	ıide explains how t	to com	ple	te this form.				
1	Total pages Schedule F1:	2	2 FILER NAME						3	Filer ID	(Ethics Commission Filers)
	Sch: 23/27 Rpt: 49/59		Kuempel, Jo	hn L. (The Hon	orable)					00066988		
4	Date	5	Payee name									
	10/21/2023		Spectrum									
6	Amount (\$)	7	Payee addres	ss; City;	State; Zip	Code	e					
	\$320.95		12012 N. M	Pac Expresswa	ay							
				-								
			Austin, TX 7	8758								
8	PURPOSE	(a)				T _O	h)	Description				
ľ	OF	(س)		e Categories listed at th		'`	٠,	_ `	outsi	de of Texas. Con	nplete Schedule T.	
	EXPENDITURE		Office Over	icau/itentai Exp	Jense			=		officeholder livin		
								cable, interne	et, p	hone for A	ustin apartment	
9	Complete ONLY if direct		Candidate/Offic	ceholder name	Office	sough	ht			Office h	eld	
	expenditure to benefit C/OI	Н										
	Date		Payee name									_
	10/23/2023		Spectrum									
	Amount (\$)		Payee addres	ss; City;	State; Zip	Code	e					
	\$320.95		12012 N. Mo	Pac Expresswa	ay							
			Austin, TX 7	8758								
	PURPOSE	(a)	Category (se	e Categories listed at th	as top of this schodule)	T (k	b)	Description				
	OF	`´		nead/Rental Exp		`	•	_ `	outsi	de of Texas. Con	nplete Schedule T.	
	EXPENDITURE							X Check if Austin, TX, officeholder living expense				
								phone, cable,	, int	ternet for A	ustin apartment	
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	ceholder name	Office	sough	ht			Office h	eld	
	experialitate to beliefit e/of											
	Date		Payee name									
	11/24/2023		Spectrum									
	Amount (\$)		Payee addres	ss; City;	State; Zip	Code	е					
	\$320.95		12012 N. Mo	Pac Expresswa	ay							
			Austin, TX 7	8758								
	PURPOSE	(a)	Category (Se	e Categories listed at th	ne top of this schedule)	(k	b)	Description				
	OF EXPENDITURE			nead/Rental Exp				ш			nplete Schedule T.	
	EXPENDITORE									officeholder livin		
								cable, interne	et, p	hone for A	ustin apartment	
												
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Offic	ceholder name	Office	sough	nt			Office h	eld	
	onpondució de sononi di ori											

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Comm

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica		nmittee Legal Services Frinting Expense Frinting Expense 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:	2	FILER NAME	3	Filer ID	(Ethics Commission Filers)
	Sch: 24/27 Rpt: 50/59		Kuempel, John L. (The Honorable)		00066988	
4	Date	5	Payee name			
	12/26/2023		Spectrum			
6	Amount (\$)	7	Payee address; City; State; Zip Code			
Ŭ	\$320.95	ľ	12012 N. MoPac Expressway			
	+320.00					
			Austin TV 707E0			
		⊢	Austin, TX 78758			
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule) (b) Description		ide of Tours	alete Oake dule T
	EXPENDITURE		Onice Overhead/Nental Expense		ide of Texas. Com , officeholder living	
						ıstin apartment
						•
9	Complete ONLY if direct		Candidate/Officeholder name Office sought		Office he	eld
-	expenditure to benefit C/OI					
	Date	Т	Davis mares			
	08/15/2023		Payee name St. James Catholic School			
		<u> </u>				
	Amount (\$)		Payee address; City; State; Zip Code			
	\$250.00		507 S. Camp St.			
			Seguin, TX 78155			
	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule) (b) Description			
	EXPENDITURE		Contributions/Donations Made By		ide of Texas. Com , officeholder living	plete Schedule T.
			Candidate/Oncerioider/Political Committee fundraiser de			у ехрепзе
			1.3.1.3.1.3.3.3.1.3.1			
	Complete ONLY if direct		Candidate/Officeholder name Office sought		Office he	-iq
	expenditure to benefit C/OI					
	Date	_	Daviso nama			
	11/02/2023		Payee name State Farm Insurance			
		_				
	Amount (\$)		Payee address; City; State; Zip Code			
	\$140.00		PO Box 680001			
			- "			
			Dallas, TX 75368-0001			
	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule) (b) Description			
	EXPENDITURE		Onice Overnead/Nental Expense		ide of Texas. Com , officeholder living	•
			 			rance coverage
	Complete ONLY if direct		Candidate/Officeholder name Office sought		Office he	eld
	expenditure to benefit C/OI		Silver Sought		Omoc n	···

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political C

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment			OTHER (enter a	category not listed above)
		The Instruction Guide explains how to complete this form.	_		
1	Total pages Schedule F1:	2 FILER NAME	3	Filer ID	(Ethics Commission Filers)
	Sch: 25/27 Rpt: 51/59	Kuempel, John L. (The Honorable)		00066988	
4	Date	5 Payee name			
	08/22/2023	Texas House of Representatives			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$339.47	PO Box 2910			
		Austin, TX 78768			
_	DUDDOCE	· · · · · · · · · · · · · · · · · · ·			
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Contributions (Panations Mode Py	OUITS	side of Texas. Com	nlete Schedule T
	EXPENDITURE	Ochtribations/Bonations Made By		(, officeholder living	
		flags for don			
9	Complete ONLY if direct	Candidate/Officeholder name Office sought		Office he	eld
	expenditure to benefit C/OI	1			
	Date	Payee name			
	07/18/2023	Texas House of Representatives			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$18.36	PO Box 2910			
	7-2:20				
		Austin, TX 78768			
	PURPOSE				
	OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By	outs	side of Texas. Com	plete Schedule T.
	EXPENDITURE			(, officeholder living	
		flag for even	t		
	Complete ONLY if direct	Candidate/Officeholder name Office sought		Office he	eld
	expenditure to benefit C/O	1			
	Date	Payee name			
	08/23/2023	Texas House of Representatives			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$16.24	PO Box 2910			
		Austin, TX 78768			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF	, <u> </u>	outs	side of Texas. Com	plete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee		(, officeholder living	g expense
		flag for fundi	ais	er	
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought		Office he	eld
	experience to belieff 6/01	•			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

xpense Event Expense Loan Repayment/Reimbu

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comm

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 26/27 Rpt: 52/59	Kuempel, John L. (The Honorable) 00066988
4	Date	5 Payee name
	09/27/2023	Texas Workforce Commission
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$60.00	PO Box 149037
		Austin, TX 78714-9037
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	payroll taxes Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense 4th qtr 2023 unemployment taxes
		4ur qui 2020 unempioyment taxes
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	the state of the s
F	Date	Payee name
	11/01/2023	The Chamber
	Amount (\$)	Payee address; City; State; Zip Code
	\$287.00	1730 Schertz Parkway
		Schertz, TX 78154
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		Turiuraisori
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	08/18/2023	The Chamber
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	1730 Schertz Parkway
	φου.υυ	1700 Gonet 2 Fantway
		Schertz, TX 78154
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee
		donation to fundraiser
L		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	experience to beliefft C/OI	·
1		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Food/Beverage Expense Polling Expense Travel in District 7 - Gift/Awards/Memorials Expense Printing Expense Travel out of District 1 Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Kuempel, John L. (The Honorable) 00066988
5 Payee name
Wade Busby Memorial Fundraiser
7 Payee address; City; State; Zip Code
P.O. Box 736
Marion, TX 78124
(a) Category (See Categories listed at the top of this schedule) (b) Description
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
donation to fundraiser
Candidate/Officeholder name Office sought Office held H

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Git/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment		mmittee Legal Services Salaries/ The Instruction Guide explains how to co	Wages/Contract Labor		OTHER (enter a category not listed above)
			<u> </u>	ompiete tina form.		
1		2	FILER NAME		3	Filer ID (Ethics Commission Filers)
	Sch: 1/3 Rpt: 54/59		Kuempel, John L. (The Honorable)			00066988
4	Date	5	Payee name			
	09/25/2023		A-TAN Sushi and Asian Bistro			
6	Amount (\$)	7	Payee address; City; State; Zip C	ode		
٠	\$150.00	ľ	320 W. Nolte Street	ouc		
			320 W. Noite Street			
	X Reimbursement from political contributions					
	intended		Seguin, TX 78155			
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b) Description	C	heck if travel outside of Texas. Complete Schedule T.
	OF		Food/Beverage Expense		c	heck if Austin, TX, officeholder living expense
	EXPENDITURE			dinner with const	itu	ents
9	Complete ONLY if direct	Car	ndidate/Officeholder name	Office sought		Office held
•	expenditure to benefit	Cui	ididate/officeriolaer flame	Office 30ugnt		Cince nea
	C/OH					
	Date	Г	Daylee name			
			Payee name Fairmont Dallas			
	10/24/2023	╙	Fairmont Dalias			
	Amount (\$)		Payee address; City; State; Zip C	ode		
	\$1,543.99		1717 North Akard Street			
	Reimbursement from					
	x political contributions intended		Dallas, TX 75201			
	PURPOSE	⊢		Description	1 C	heck if travel outside of Texas. Complete Schedule T.
	OF		Category (See Categories listed at the top of this schedule) Travel Out of Diotrict	Description	₫ .	heck if Austin, TX, officeholder living expense
	EXPENDITURE		Travel Out of District	Latel for Fundrain		and meeting with UT Regents
				Tioterioi Fundiai.	301	and meeting with OT Regents
		<u> </u>		L		
	Complete ONLY if direct expenditure to benefit	Car	ndidate/Officeholder name	Office sought		Office held
	C/OH					
	5.					
	Date		Payee name			
	09/25/2023		Johnny's BBQ			
	Amount (\$)		Payee address; City; State; Zip C	ode		
	\$54.69		6036 S. State Hwy 123 Business			
	Reimbursement from					
	X political contributions intended		Seguin, TX 78155			
	DUDDOCE	⊢		Description	-	heals if travel outside of Toyon Complete Cabadula T
	PURPOSE OF		Category (See Categories listed at the top of this schedule)	Description _	⊒ .	heck if travel outside of Texas. Complete Schedule T. heck if Austin, TX, officeholder living expense
	EXPENDITURE		Food/Beverage Expense	L.	-	Treck it / tastiff, 174, officeriolaer living experise
				constituent lunch		
		Car	ndidate/Officeholder name	Office sought		Office held
	expenditure to benefit C/OH					

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			Food/Beverage Expens Gift/Awards/Memorials Legal Services The Instruction Gu	Expense		kpense /ages/Contract Labor	Т	ravel in District ravel Out of District DTHER (enter a category r	not listed above)
1	Total pages Schedule G:	2 FILEF	NAME				3 F	iler ID (Ethics Co	ommission Filers)
L	Sch: 2/3 Rpt: 55/59	Kuen	npel, John L. (The Hon	orable)			0	0066988	
4	Date	5 Paye	name						
	10/24/2023	Kuen	npel, John						
6	Amount (\$)	7 Paye	e address; City;	State;	Zip Co	de			
	\$303.92	902 E	E. College						
	X Reimbursement from political contributions intended	Segu	in, TX 78155						
8	PURPOSE	(a) Categ	Ory (See Categories listed at the	ne top of this sche	edule)	(b) Description	='		s. Complete Schedule T.
	OF EXPENDITURE	Trave	el Out of District			L		ck if Austin, TX, officehold	
						travel for fundrais	ser aı	nd meeting with U	JI Regents
9	Complete ONLY if direct expenditure to benefit C/OH	I Candidate	/Officeholder name			Office sought		Office he	ld
	Date	Paye	e name						
	09/25/2023	Los (Cucos						
	Amount (\$)	Paye	e address; City;	State;	Zip Co	de			
	\$93.00	920 I	-10						
	Reimbursement from political contributions intended	Segu	in, TX 78155						
	PURPOSE OF	Categ	Ory (See Categories listed at the	ne top of this sche	edule)	Description	=		s. Complete Schedule T.
	EXPENDITURE	Food	/Beverage Expense				_	ck if Austin, TX, officehold	er living expense
						constituent lunch	ı		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate	/Officeholder name			Office sought		Office he	ld
	Date	Paye	name						
	09/25/2023	1 1	raders Coastal Cookir	ng					
	Amount (\$)	1	e address; City;	State;	Zip Co	de			
	\$170.27	1101	S. Mopac Expy						
	X Reimbursement from political contributions intended	Austi	n, TX 78746						
	PURPOSE	1	Ory (See Categories listed at the	ne top of this sche	edule)	Description	=		s. Complete Schedule T.
	OF EXPENDITURE	Food	/Beverage Expense				Chec	ck if Austin, TX, officehold	er living expense
						office lunch			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	<u>I</u> Candidate	/Officeholder name			Office sought		Office he	ld

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. FILER NAME Filer ID Total pages Schedule G: (Ethics Commission Filers) Sch: 3/3 Rpt: 56/59 Kuempel, John L. (The Honorable) 00066988 Date Payee name 09/25/2023 Southwest Airlines Amount (\$) Payee address; State; Zip Code \$457.96 P.O. Box 36647-1CR Reimbursement from political contributions Х intended Dallas, TX 75235 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if Austin, TX, officeholder living expense Travel Out of District **EXPENDITURE** Airfare for meeting with oil/gas, electric/broadband industries Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 09/25/2023 The Lodge Torrey Pines Amount (\$) Payee address; City; State; Zip Code \$2,076.22 11480 North Torrey Pines Road Reimbursement from political contributions Χ La Jolla, CA 92037 intended **PURPOSE** Check if travel outside of Texas. Complete Schedule T. Category (See Categories listed at the top of this schedule) Description OF Check if Austin, TX, officeholder living expense Travel Out of District **EXPENDITURE** Lodging for meeting with oil/gas, electric/broadband industries Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

	The Instru	ıl pages S : 1/3 Rpt	schedule K: t: 57/59				
2	FILER NAME		3	Filer	· ID (Eth	nics Commissi	ion Filers)
	Kuempel, John L. (The Honorable)						
4	Date	5 Name of person from whom amount is received			8 An	nount (\$)	
	07/08/2023	First Commercial Bank, N.A.					\$576.08
	,	6 Address of person from whom amount is received; City; State; Zip Code					,
		Address of person from whom amount is received, City, State, 21p Code					
		Seguin, TX 78155					
			noliti	cal co	ntribution	returned to fi	ler
		interest earned on campaign cd	ponti	oui oc	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	rotarriou to n	101
_	Data				1 0		
	Date	Name of person from whom amount is received			An	mount (\$)	#1 CO O1
	07/31/2023	First Commercial Bank, N.A.					\$168.01
		Address of person from whom amount is received; City; State; Zip Code					
		Soquin TV 70155					
		Seguin, TX 78155	!!#!				1
		Purpose for which amount is received	politi	cai cc	ntribution	returned to fi	ier
		interest earned on campaign account					
	Date	Name of person from whom amount is received			An	nount (\$)	
	08/31/2023	First Commercial Bank, N.A.					\$153.73
		Address of person from whom amount is received; City; State; Zip Code					
		Seguin, TX 78155					
			naliti	ool oo	ntribution	roturned to fi	lor
		interest earned on campaign account	politi	cai cc	mundunon	returned to fi	iei
	Date	Name of person from whom amount is received			An	nount (\$)	
	09/29/2023	First Commercial Bank, N.A.					\$160.41
		Address of person from whom amount is received; City; State; Zip Code					
		Cognin TV 701EE					
		Seguin, TX 78155					
		_	politi	cal cc	ntribution	returned to fi	ler
		interest earned on campaign account					
	Date	Name of person from whom amount is received			An	nount (\$)	
	10/31/2023	First Commercial Bank, N.A.					\$168.79
		Address of person from whom amount is received; City; State; Zip Code					
		Seguin, TX 78155					
		<u> </u>	politi	cal co	ntribution	returned to fi	ler
		interest earned on campaign account					
l							

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

Щ					
	The Instru	l pages Schedule K: : 2/3 Rpt: 58/59			
2	FILER NAME		3	Filer	ID (Ethics Commission Filers)
	Kuempel, Jo	66988			
4	Date	5 Name of person from whom amount is received			8 Amount (\$)
	11/30/2023	First Commercial Bank, N.A.			\$110.33
		6 Address of person from whom amount is received; City; State; Zip Code			
		Address of person from whom amount is received, Gity, State, Zip Code			
		Seguin, TX 78155			
		<u> </u>	oditi	cal co	
		interest earned on campaign account	JOIL	cai co	Thiribation retained to mer
_					T
	Date	Name of person from whom amount is received			Amount (\$)
	12/31/2023	First Commercial Bank, N.A.			\$83.33
		Address of person from whom amount is received; City; State; Zip Code			
		Comin TV 701FF			
		Seguin, TX 78155			
			ooliti	cai co	ntribution returned to filer
		interest earned on campaign account			
	Date	Name of person from whom amount is received			Amount (\$)
	07/31/2023	Raymond James Bank N.A.			\$484.74
		Address of person from whom amount is received; City; State; Zip Code			
		St. Petersburg, FL 33716			
			aoliti	ool oo	htribution returned to filer
		interest earned on campaign account	JUIILI	cai cu	nunbulion returned to lilei
<u> </u>					1
	Date	Name of person from whom amount is received			Amount (\$)
	08/31/2023	Raymond James Bank N.A.			\$4.78
		Address of person from whom amount is received; City; State; Zip Code			
		Ct. Deteralism El 2074C			
		St. Petersburg, FL 33716			
			ooliti	cal co	ntribution returned to filer
		interest earned on campaign account			
	Date	Name of person from whom amount is received			Amount (\$)
	09/29/2023	Raymond James Bank N.A.			\$4.62
		Address of person from whom amount is received; City; State; Zip Code			
		St. Petersburg, FL 33716			
			ooliti	cal co	ntribution returned to filer
		interest earned on campaign account			

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 3/3 Rpt: 59/59 2 FILER NAME Filer ID (Ethics Commission Filers) Kuempel, John L. (The Honorable) 00066988 Date 8 Amount (\$) 5 Name of person from whom amount is received 10/31/2023 Raymond James Bank N.A. \$4.78 6 Address of person from whom amount is received; City; State; Zip Code St. Petersburg, FL 33716 7 Purpose for which amount is received Check if political contribution returned to filer Amount (\$) Date Name of person from whom amount is received 11/30/2023 Raymond James Bank N.A. \$484.70 Address of person from whom amount is received; City; State; Zip Code St. Petersburg, FL 33716 Purpose for which amount is received Check if political contribution returned to filer interest earned on campaign account Date Name of person from whom amount is received Amount (\$) 12/31/2023 Raymond James Bank N.A. \$4.88 Address of person from whom amount is received; City; State; Zip Code St. Petersburg, FL 33716 Purpose for which amount is received Check if political contribution returned to filer interest earned on campaign account