FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00062560 48 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable O. Kyler NAME Date Received **ELECTRONICALLY FILED** 02/26/2024 NICKNAME LAST **SUFFIX** Kyle Carter CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** MAILING Receipt # Amount **ADDRESS** REDACTED PER 254.0313, GOV'T CODE Change of Address Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mrs. Melanie S. NAME NICKNAME LAST **SUFFIX** Carter **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE: **TREASURER ADDRESS** REDACTED PER 254.0313, GOV'T CODE (Residence or Business) **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (713) 227-0042 **PHONE** REPORT TYPE 30th day before election 15th day after campaign treasurer January 15 Runoff appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) reporting limit PERIOD Month Month Day Year Day Year **COVERED THROUGH** 01/26/2024 02/24/2024 10 ELECTION **ELECTION DATE ELECTION TYPE** Day Month Year χ Primary Runoff Other 03/05/2024 General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE District Judge District 125 Harris District Judge District 125

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 48

| 13 C / OH NAME | Carter, O. Kyler (The | Honorable) | 14 Filer ID 00062560 | (Ethics Commission Filers) |
|---|----------------------------------|--|---------------------------|----------------------------|
| 15 NOTICE FROM POLITICAL COMMITTEE(S) | candidate / officeholder. | political contributions accepted or political expenditual expenditual expenditures may have been made without difficeholders are required to report this information | the candidate's or office | eholder's knowledge or |
| Additional Pages | COMMITTEE TYPE | COMMITTEE NAME | | |
| Ш | GENERAL | | | |
| | | COMMITTEE ADDRESS | | |
| | SPECIFIC | | | |
| | | COMMITTEE CAMPAIGN TREASURER NAME | | |
| | | COMMITTEE CAMPAIGN TREASURER ADDRE | SS | |
| | | | | |
| 16 CONTRIBUTION TOTALS | | ZED POLITICAL CONTRIBUTIONS(OTHER THAI ES OF LOANS, OR CONTRIBUTIONS MADE ELE | | \$ 0.00 |
| | 2. TOTAL POLIT | ICAL CONTRIBUTIONS | | \$ 77,535.00 |
| EVDENDITUDE | (OTHER THAN | IS) | , | |
| EXPENDITURE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES TOTALS | | | | \$ 1,523.25 |
| | 4. TOTAL POLIT | ICAL EXPENDITURES | | \$ 333,284.71 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITIC REPORTING PE | AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD | AST DAY OF THE | \$ 143,698.28 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIF OF THE REPOR | AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD | OF THE LAST DAY | \$ 0.00 |
| 17 AFFIDAVIT | | I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code. | | |
| | | The Hon | orable O. Kyler Carte | er |
| | | | f Candidate or Officeho | |
| AFFIX NO | TARY STAMP / SEAL AB | DVE | | |
| Sworn to and subs | cribed before me, by the s | aid | , this the | day |
| | | ertify which, witness my hand and seal of office. | | |
| | | | | |
| Signature of office | cer administering oath | Printed name of officer administering oath | Title of office | r administering oath |
| | | | | |

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

| | | | 3 of 48 | | |
|--------------|---|--|-----------------------------|---------|--------------------|
| _ | ER NAM | ME Kyler (The Honorable) | 19 Filer ID 00062560 | (Ethics | Commission Filers) |
| 20 SC | HEDUL | E SUBTOTALS SCHEDULE | | SI | JBTOTAL AMOUNT |
| 1. | X | SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL) | | \$ | 77,535.00 |
| 2. | | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | | \$ | |
| 3. | | SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL) | | \$ | |
| 4. | | \$ | | | |
| 5. | 5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | | | | 313,216.48 |
| 6. | 6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | | | | |
| 7. | | SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION | DNS | \$ | |
| 8. | Х | SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | | \$ | 20,068.23 |
| 9. | | SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS | | \$ | |
| 10. | | SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (| OF C/OH | \$ | |
| 11. | | SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION | DNS | \$ | |
| 12. | Х | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER | RETURNED | \$ | 41.51 |
| | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE A(J)1 |
|----|----------------------------|---|------------------------|---------------------------------|------|--|
| | The Instru | ction Guide explains ho | ow to complete this | form. | 1 | Total pages Schedule A(J)1: Sch: 1/27 Rpt: 4/48 |
| 2 | FILER NAME Carter, O. K | yler (The Honorable) | | | 1 | Filer ID (Ethics Commission Filers) 00062560 |
| 4 | Date 02/15/2024 | 5 Full name of contributor Ahn, Kristopher6 Contributor address; City; | out-of-state PAC (ID#: | | | Amount of Contribution (\$) \$500.00 |
| | | Houston, TX 77055 | | | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | |
| _ | Attorney | | | Attorney | | |
| 10 | The Ahn Lav | employer/law firm v Firm | | 11 Law firm of contributor's sp | oous | e (if any) |
| 12 | | s a child, law firm of parent(s) (i | f any) | 1 | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 02/16/2024 | Andrews Myers, PC Contributor address; City; | State; Zip Code | | | \$500.00 |
| | Contributorio | Houston, TX 77056 | | Contributor's Job Title | | |
| | Continuators | Principal Occupation | | Contributor's Job Title | | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | oous | e (if any) |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | 1 | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 01/31/2024 | Armstrong, Scott | | | | \$5,000.00 |
| | | Contributor address; City; Houston, TX 77092 | State; Zip Code | | | |
| | Contributor's F | Principal Occupation | | Contributor's Job Title | | |
| | Attorney | | | Attorney | | |
| | | employer/law firm | | Law firm of contributor's sp | oous | e (if any) |
| | Armstrong L | | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | | | |
| | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE A(J)1 |
|----------|-----------------------------|--|------------------------|---------------------------------|-----|--|
| | The Instru | ction Guide explains ho | w to complete this | form. | 1 | Total pages Schedule A(J)1: Sch: 2/27 Rpt: 5/48 |
| 2 | FILER NAME Carter, O. Ky | yler (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00062560 |
| 4 | Date 02/06/2024 | 5 Full name of contributor Ashley, John David6 Contributor address; City; | out-of-state PAC (ID#: | | 7 | Amount of Contribution (\$) \$150.00 |
| | | League City, TX 77573 | | | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | |
| | Financial Ad | visor | | Financial Advisor | | |
| 10 | | employer/law firm h Management | | 11 Law firm of contributor's sp | ous | se (if any) |
| 12 | ! If contributor is | s a child, law firm of parent(s) (i | f any) | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | Π | Amount of Contribution (\$) |
| | 01/27/2024 | Austin, Glen Contributor address; City; | <u> </u> | | | \$250.00 |
| | | Cypress, TX 77433 | | | | |
| | | Principal Occupation | | Contributor's Job Title | | |
| | Attorney | | | Attorney | | |
| | | employer/law firm | | Law firm of contributor's sp | ous | se (if any) |
| | | ston Partnership | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | tany) | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 02/04/2024 | Ballases, Michael | | | | \$100.00 |
| | | Contributor address; City; Houston, TX 77056 | State; Zip Code | | | |
| \vdash | Contributor's F | I Principal Occupation | | Contributor's Job Title | _ | |
| | Attorney | | | Attorney | | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | ous | se (if any) |
| | Hoover Slov | acek LLP | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | 1 | | |
| | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE | A(J)1 |
|----|---|---|------------------------|------------------------------|---------------|--|------------|
| | The Instru | ction Guide explains ho | w to complete this | form. | 1 | pages Schedule A(J)1 3/27 Rpt: 6/48 | : |
| 2 | FILER NAME Carter, O. K | yler (The Honorable) | | | 1 | ID (Ethics Commissi 32560 | on Filers) |
| 4 | Date 02/06/2024 | 5 Full name of contributor Baumgartner, Greg 6 Contributor address; City; | out-of-state PAC (ID#: | | 7 Amou | unt of Contribution (\$) | \$250.00 |
| | | Houston, TX 77069 | | | | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | | |
| | Attorney | | | Attorney | | | |
| 10 | 10 Contributor's employer/law firmBaumgartner Law Firm11 Law firm of contributor's sp | | | oouse (if a | ny) | | |
| 12 | | s a child, law firm of parent(s) (i | f any) | | | | |
| | . Il contributor i | s a crima, law iiiii or parcrii(s) (i | i arry) | | | | |
| = | Date | Full name of contributor | out-of-state PAC (ID#: |) | Amou | unt of Contribution (\$) | |
| | 02/15/2024 | Bergen, David Contributor address; City; | State; Zip Code | | | | \$2,500.00 |
| | | Houston, TX 77005 | | | | | |
| | Contributor's F | Principal Occupation | | Contributor's Job Title | | | |
| | Attorney | | | Attorney | | | |
| | | employer/law firm | | Law firm of contributor's sp | oouse (if a | ny) | |
| | The Buzbee | | | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | | | | |
| F | Date | Full name of contributor | out-of-state PAC (ID#: |) | Amou | unt of Contribution (\$) | |
| | 02/03/2024 | Bernstein, Alan | _ | | | | \$100.00 |
| | | Contributor address; City; Bellaire, TX 77401 | State; Zip Code | | | | |
| | Contributor's I | Principal Occupation | | Contributor's Job Title | | | |
| | | tions Strategist | | Communications Strate | aist | | |
| _ | | employer/law firm | | Law firm of contributor's sp | | ny) | |
| | Hawes Hill & | | | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | 1 | | | |
| | | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE A(J)1 |
|----|--|---|------------------------|--------------------------------------|------|--|
| | The Instru | ction Guide explains ho | w to complete this | form. | 1 | Total pages Schedule A(J)1: Sch: 4/27 Rpt: 7/48 |
| 2 | FILER NAME Carter, O. Ky | yler (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00062560 |
| 4 | 02/18/2024 Burger, Crist 6 Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) \$250.00 | | |
| _ | | Bellaire, TX 77402 | | T | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | |
| 10 | Attorney | and a say thought | | Attorney | | on (if any) |
| 10 | Self | employer/law firm | | 11 Law firm of contributor's sp | oous | se (IT any) |
| 12 | ! If contributor i | s a child, law firm of parent(s) (i | f any) | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 02/09/2024 | Button, Mark Contributor address; City; Houston, TX 77096 | State; Zip Code | | | \$100.00 |
| _ | Contributor's I | Principal Occupation | | Contributor's Job Title | | |
| | | usiness Development | | Director of Business De | vel | onment |
| | | employer/law firm | | Law firm of contributor's sp | | <u> </u> |
| | Texas Golf A | | | Law IIIII of Continuator 3 3 | Jou. | se (ii diiy) |
| | | s a child, law firm of parent(s) (i | f any) | | | |
| | ii contributor i | s a clina, law iiiii oi parcin(s) (i | i arry) | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 02/19/2024 | Camp, Kevin | _ | | | \$500.00 |
| | | Contributor address; City; Houston, TX 77055 | State; Zip Code | | | |
| Г | Contributor's F | Principal Occupation | | Contributor's Job Title | | |
| | Attorney | | | Attorney | | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| | Roven Camp | o, PLLC | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | | | |
| | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE A(J)1 |
|----|---|---|------------------------|--|----------|--|
| | The Instru | ction Guide explains ho | w to complete this | form. | 1 | Total pages Schedule A(J)1: Sch: 5/27 Rpt: 8/48 |
| 2 | FILER NAME Carter, O. Ky | yler (The Honorable) | | | 1 | Filer ID (Ethics Commission Filers) 00062560 |
| 4 | 02/15/2024 Cantu, Roberto 6 Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) \$2,500.00 | | |
| | | Houston, TX 77054 | | | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | |
| | Attorney | | | Attorney | | |
| 10 | Contributor's e Roberts Mar | employer/law firm kland | | 11 Law firm of contributor's sp | oouse | e (if any) |
| 12 | ! If contributor is | s a child, law firm of parent(s) (i | f any) | 1 | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | <u> </u> | Amount of Contribution (\$) |
| | 02/15/2024 | Collins, Robert (Mr.) Contributor address; City; | State; Zip Code | | | \$2,000.00 |
| | Caratuila utaula I | Houston, TX 77270 | | Contributor's Job Title | | |
| | Attorney | Principal Occupation | | Attorney | | |
| | | employer/law firm | | Law firm of contributor's sp | oouse | e (if any) |
| | Self | | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | T . | Amount of Contribution (\$) |
| | 02/21/2024 | Cordova, Elizabeth | | | | \$100.00 |
| | | Contributor address; City; Houston, TX 77036 | State; Zip Code | | | |
| | Contributor's I | Principal Occupation | | Contributor's Job Title | | |
| | Court report | er | | Court reporter | | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | oouse | e (if any) |
| | Harris Count | ty | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | | | |
| | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE A(J)1 |
|----|--|---|------------------------|--|-------------|--|
| | The Instru | ction Guide explains ho | w to complete this | form. | 1 | Total pages Schedule A(J)1: Sch: 6/27 Rpt: 9/48 |
| 2 | FILER NAME Carter, O. K | yler (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00062560 |
| 4 | 02/19/2024 Crosswell, Brady 6 Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) \$1,000.00 | | |
| | | Houston, TX 77057 | | | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | |
| | Finance | | | Finance | | |
| 10 | 10 Contributor's employer/law firmC2R11 Law firm of contributor's sp | | | oous | se (if any) | |
| 12 | If contributor is | s a child, law firm of parent(s) (i | f any) | • | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 02/01/2024 | Dacey, Derin Contributor address; City; Houston, TX 77011 | State; Zip Code | | | \$10.00 |
| _ | Contributor's I | Principal Occupation | | Contributor's Job Title | | |
| | Academic A | | | Academic Advisor | | |
| | | employer/law firm | | Law firm of contributor's sp | วดนะ | se (if any) |
| | University of | | | | | |
| | | s a child, law firm of parent(s) (i | f any) | 1 | | |
| | | - | | | _ | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 01/26/2024 | Daspit, John (Mr.) Contributor address; City; Houston, TX 77002 | State; Zip Code | | - | \$5,000.00 |
| | Contributor's I | Principal Occupation | | Contributor's Job Title | _ | |
| | Attorney | | | Attorney | | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| | Daspit Law F | Firm Firm | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | | | |
| | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTIO | ONS | | SCHEDULE A(J)1 |
|----------|--|---|------------------------|--------------------------------------|------|---|
| | The Instru | ction Guide explains ho | w to complete this | form. | 1 | Total pages Schedule A(J)1: Sch: 7/27 Rpt: 10/48 |
| 2 | FILER NAME Carter, O. Ky | yler (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00062560 |
| 4 | 02/19/2024 Defoyd, Jimmy 6 Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) \$250.00 | | |
| | | Galena Park, TX 77547 | | | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | |
| | Attorney | | | Attorney | | |
| 10 | 10 Contributor's employer/law firm Defoyd & Associates, PC | | | | oous | se (if any) |
| 12 | ! If contributor i | s a child, law firm of parent(s) (if | any) | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | Т | Amount of Contribution (\$) |
| | 02/20/2024 | Dietrich, Fred Contributor address; City; \$ | | | | \$50.00 |
| | | Houston, TX 77096 | | | | |
| | Contributor's I | Principal Occupation | | Contributor's Job Title | • | |
| | Attorney | | | Attorney | | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| | The Dietrich | Law Firm | | | | |
| | If contributor is | s a child, law firm of parent(s) (if | any) | | | |
| F | Date | Full name of contributor | out-of-state PAC (ID#: |) | T | Amount of Contribution (\$) |
| | 01/31/2024 | Drewinko, Henry D. (Mr.) | _ | | | \$200.00 |
| | | Contributor address; City; \$ Houston, TX 77024 | State; Zip Code | | | |
| \vdash | Contributor's I | I Principal Occupation | | Contributor's Job Title | | |
| | Attorney | | | Attorney | | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| | Self | | | | | |
| | If contributor is | s a child, law firm of parent(s) (if | any) | | | |
| | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE A(J)1 |
|----|--|---|------------------------|--------------------------------------|----------|---|
| | The Instru | ction Guide explains ho | w to complete this | form. | 1 | Total pages Schedule A(J)1: Sch: 8/27 Rpt: 11/48 |
| 2 | FILER NAME Carter, O. Ky | yler (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00062560 |
| 4 | 02/15/2024 Feldman, Arthur 6 Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) \$250.00 | | |
| | | Houston, TX 77019 | | | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | |
| | Attorney | | | Attorney | | |
| 10 | Contributor's 6 Arthur S Fel | employer/law firm dman PC | | 11 Law firm of contributor's sp | oous | se (if any) |
| 12 | 2 If contributor is | s a child, law firm of parent(s) (i | f any) | 1 | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 01/30/2024 | Fort Bend United Contributor address; City; | State; Zip Code | | | \$5,000.00 |
| | | Houston, TX 77242 | | | | |
| | Contributor's I | Principal Occupation | | Contributor's Job Title | | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 02/19/2024 | Garcia, Roland Contributor address; City; Houston, TX 77042 | State; Zip Code | | | \$500.00 |
| | Contributor's F | I Principal Occupation | | Contributor's Job Title | <u> </u> | |
| | Attorney | | | Attorney | | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| | Greenberg T | raurig, LLP | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | | | |
| | | | | | | |

| MONET | ARY POLITICAL CONTRI | BUTIONS | | SCHEDULE A(J)1 |
|-------------------------------|---|----------------|--|---|
| The Instru | ction Guide explains how to comple | ete this form. | | 1 Total pages Schedule A(J)1: Sch: 9/27 Rpt: 12/48 |
| 2 FILER NAME Carter, O. Ky | yler (The Honorable) | | | 3 Filer ID (Ethics Commission Filers) 00062560 |
| 4 Date 01/31/2024 | | | 7 Amount of Contribution (\$) \$3,000.00 | |
| | Houston, TX 77098 | | | |
| 8 Contributor's I | Principal Occupation | 9 Contribu | utor's Job Title | |
| 10 Contributor's | employer/law firm | 11 Law firm | n of contributor's sp | ouse (if any) |
| 12 If contributor is | s a child, law firm of parent(s) (if any) | | | |
| Date | Full name of contributor out-of-state | PAC (ID#: |) | Amount of Contribution (\$) |
| 01/26/2024 | Hagans, William Fred (Mr.) Contributor address; City; State; Zip Code Houston, TX 77006 | | | \$500.00 |
| Contributor's I | Principal Occupation | Contribu | utor's Job Title | |
| Attorney | Timolpai Gecapation | Attorne | | |
| | employer/law firm | | n of contributor's spe | ouse (if any) |
| Hagans Law | | | | |
| If contributor is | s a child, law firm of parent(s) (if any) | | | |
| Date | Full name of contributor out-of-state | e PAC (ID#: | | Amount of Contribution (\$) |
| 02/15/2024 | Hardin, Rusty (Mr.) | | | \$1,000.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77010 | | | |
| Contributor's F | I Principal Occupation | Contribu | utor's Job Title | |
| Attorney | | Attorne | _e y | |
| Contributor's | employer/law firm | Law firm | n of contributor's sp | ouse (if any) |
| Rusty Hardir | ı & Associates | | | |
| If contributor is | s a child, law firm of parent(s) (if any) | | | |
| | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTIO | ONS | | SCHEDULE A(J)1 |
|----|----------------------------|---|-------------------------|---------------------------------|----------|--|
| | The Instru | ction Guide explains ho | w to complete this t | form. | 1 | Total pages Schedule A(J)1: Sch: 10/27 Rpt: 13/48 |
| 2 | FILER NAME Carter, O. K | yler (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00062560 |
| 4 | Date 02/21/2024 | 5 Full name of contributor Hardin, Rusty (Mr.)6 Contributor address; City; S | out-of-state PAC (ID#:_ | | 7 | Amount of Contribution (\$) \$1,000.00 |
| | | Houston, TX 77010 | | | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | |
| | Attorney | | | Attorney | | |
| 10 | | employer/law firm n & Associates | | 11 Law firm of contributor's sp | oous | se (if any) |
| 12 | If contributor is | s a child, law firm of parent(s) (if | any) | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 01/29/2024 | Hastings, Tommy (Mr.) Contributor address; City; S | | | | \$1,000.00 |
| | | The Woodlands, TX 773 | 80 | | | |
| | | Principal Occupation | | Contributor's Job Title | | |
| | Attorney | | | Attorney | | <i>(1)</i> |
| | Hastings Lav | employer/law firm | | Law firm of contributor's sp | ous | se (II any) |
| | | s a child, law firm of parent(s) (if | anv) | | | |
| | ii contributor i | s a crima, raw iirin or parcrit(s) (ii | arry) | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 02/06/2024 | Hoffer, Stewart | _ | | | \$100.00 |
| | | Contributor address; City; S Houston, TX 77002 | State; Zip Code | | | |
| | Contributor's I | I Principal Occupation | | Contributor's Job Title | <u> </u> | |
| | Attorney | | | Attorney | | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| | Hicks Thoma | as LLP | | | | |
| | If contributor is | s a child, law firm of parent(s) (if | any) | • | | |
| | | | | | | |

| MONET | ARY POLITICAL CONTRIBUTION | ONS | SCHEDULE A(J)1 |
|-------------------------------|---|---------------------------------------|--|
| The Instru | ction Guide explains how to complete this | form. | 1 Total pages Schedule A(J)1: Sch: 11/27 Rpt: 14/48 |
| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| Carter, O. K | yler (The Honorable) | | 00062560 |
| 4 Date 02/15/2024 | | | 7 Amount of Contribution (\$) \$250.00 |
| | 6 Contributor address; City; State; Zip Code | | |
| | Houston, TX 77096 | | |
| 8 Contributor's F Attorney | Principal Occupation | 9 Contributor's Job Title Attorney | |
| 10 Contributor's | employer/law firm | 11 Law firm of contributor's sp | oouse (if any) |
| Morgan, Lev | vis & Bockius LLP | | |
| 12 If contributor is | s a child, law firm of parent(s) (if any) | 1 | |
| Date | Full name of contributor ut-of-state PAC (ID#: | | Amount of Contribution (\$) |
| 02/22/2024 | Houston ILA Dock and Marine Council PAC Fu | | \$1,000.00 |
| | Contributor address; City; State; Zip Code | | |
| | Texas, TX 77598 | | |
| Contributor's F | Principal Occupation | Contributor's Job Title | |
| Contributor's e | employer/law firm | Law firm of contributor's sp | pouse (if any) |
| If contributor is | s a child, law firm of parent(s) (if any) | | |
| Date | Full name of contributor ut-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 02/13/2024 | Husain Law & Associates | | \$2,000.00 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | Houston, TX 77057 | | |
| Contributor's I | Principal Occupation | Contributor's Job Title | |
| Contributor's e | employer/law firm | Law firm of contributor's sp | pouse (if any) |
| If contributor is | s a child, law firm of parent(s) (if any) | | |
| | | | |
| | | | |
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| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE A(J)1 |
|----|--|--|------------------------|--------------------------------------|----------|--|
| | The Instruction Guide explains how to complete this form. | | | | | Total pages Schedule A(J)1: Sch: 12/27 Rpt: 15/48 |
| 2 | FILER NAME Carter, O. Ky | ER NAME ter, O. Kyler (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00062560 |
| 4 | Date 5 Full name of contributor x out-of-state PAC (ID#: C00027342 1BEW PAC Voluntary Fund 6 Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) \$500.00 | | |
| | | Washington, DC 20001 | | | | |
| 8 | Contributor's I | Principal Occupation | | 9 Contributor's Job Title | | |
| 10 | Contributor's | employer/law firm | | 11 Law firm of contributor's sp | oous | se (if any) |
| 12 | 2 If contributor is | s a child, law firm of parent(s) (if | any) | | | |
| F | Date | Full name of contributor | out-of-state PAC (ID#: |) | T | Amount of Contribution (\$) |
| | 01/28/2024 | Kane Russell Coleman I Contributor address; City; | _ogan PC | | | \$1,000.00 |
| | | Dallas, TX 75202 | | | | |
| | Contributor's I | Principal Occupation | | Contributor's Job Title | | |
| | Contributor's 6 | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| | If contributor is | s a child, law firm of parent(s) (if | any) | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 02/13/2024 | Khawaja, Omar | _ | | | \$2,000.00 |
| | | Contributor address; City; Houston, TX 77024 | State; Zip Code | | | |
| _ | Contributor's I | I Principal Occupation | | Contributor's Job Title | <u> </u> | |
| | Attorney | | | Attorney | | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| | Law offices | of Omar Khawaja | | | | |
| | If contributor is | s a child, law firm of parent(s) (if | any) | | | |
| | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE A(J)1 |
|----|---|--|------------------------|----------------------------------|-------|--|
| | The Instruction Guide explains how to complete this form. | | | | | Total pages Schedule A(J)1: Sch: 13/27 Rpt: 16/48 |
| 2 | FILER NAME Carter, O. K | LER NAME arter, O. Kyler (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00062560 |
| 4 | Date 02/05/2024 | 5 Full name of contributor Kidd, Donald6 Contributor address; City; | out-of-state PAC (ID#: | | 7 | Amount of Contribution (\$) \$500.00 |
| | | Houston, TX 77056 | | | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | |
| _ | Attorney | | | Attorney | | |
| 10 | Perdue & Ki | employer/law firm dd | | 11 Law firm of contributor's sp | oous | e (if any) |
| 12 | ! If contributor is | s a child, law firm of parent(s) (i | f any) | 1 | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 01/30/2024 | Contributor address; City; | State; Zip Code | | | \$250.00 |
| | O a materilla contacta da la | Houston, TX 77040 | | O contributanta dal Titta | | |
| | Attorney | Principal Occupation | | Contributor's Job Title Attorney | | |
| | | employer/law firm | | Law firm of contributor's sp | אחוופ | e (if any) |
| | Kishinevsky | | | | | (, |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | l | | |
| F | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 02/06/2024 | Klitsas, Loren Contributor address; City; | State; Zip Code | | | \$500.00 |
| | | Houston, TX 77007 | | I | | |
| | Attorney | Principal Occupation | | Contributor's Job Title Attorney | | |
| _ | | employer/law firm | | Law firm of contributor's sp | חחווי | se (if any) |
| | Klitsas and \ | | | Law mm or contributor 5 of | Jour | o (ii diiy) |
| | | s a child, law firm of parent(s) (i | f any) | | | |
| | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE A(J)1 |
|----|---|--|------------------------|---------------------------------|--------------------------------------|--|
| | The Instruction Guide explains how to complete this form. | | | | | Total pages Schedule A(J)1: Sch: 14/27 Rpt: 17/48 |
| 2 | FILER NAME Carter, O. K | ILER NAME carter, O. Kyler (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00062560 |
| 4 | Date 01/26/2024 | 5 Full name of contributor out-of-state PAC (ID#:) 7 | | 7 | Amount of Contribution (\$) \$500.00 | |
| | | Houston, TX 77002 | | | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | |
| | Attorney | | | Attorney | | |
| 10 | Contributor's 6 | employer/law firm | | 11 Law firm of contributor's sp | oous | se (if any) |
| 12 | If contributor is | s a child, law firm of parent(s) (i | f any) | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 02/15/2024 | Leon, Carlos Contributor address; City; Sugar Land, TX 77478 | State; Zip Code | | | \$250.00 |
| | Contributor's F | Principal Occupation | | Contributor's Job Title | <u> </u> | |
| | Attorney | Timopai Coodpailori | | Attorney | | |
| | | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| | The Leon La | aw Firm | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 02/03/2024 | Lubel, Lance | _ | | | \$2,500.00 |
| | | Contributor address; City; Houston, TX 77057 | State; Zip Code | | | |
| | Contributor's I | Principal Occupation | | Contributor's Job Title | <u> </u> | |
| | Attorney | | | Attorney | | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| | Lubel Voyles | SLLP | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | | | |
| | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE A(J)1 |
|----|---|--|------------------------|---------------------------------|--------------------------------------|--|
| | The Instruction Guide explains how to complete this form. | | | | | Total pages Schedule A(J)1: Sch: 15/27 Rpt: 18/48 |
| 2 | FILER NAME Carter, O. K | LER NAME arter, O. Kyler (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00062560 |
| 4 | Date 02/12/2024 | 5 Full name of contributor out-of-state PAC (ID#:) 7 | | 7 | Amount of Contribution (\$) \$250.00 | |
| | | Houston, TX 77098 | | | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | |
| _ | Attorney | | | Attorney | | |
| 10 | | employer/law firm Zehnder Law Firm | | 11 Law firm of contributor's sp | oous | se (If any) |
| 12 | | s a child, law firm of parent(s) (i | f any) | | | |
| | | I = 1 | | | _ | |
| | Date 02/06/2024 | Full name of contributor Maida, Sam Contributor address; City; | out-of-state PAC (ID#: | | | Amount of Contribution (\$) \$250.00 |
| | | Houston, TX 77074 | | | | |
| | | Principal Occupation | | Contributor's Job Title | | |
| | Attorney | | | Attorney | | |
| | Maida Law F | employer/law firm =irm | | Law firm of contributor's sp | oous | se (If any) |
| H | | s a child, law firm of parent(s) (i | f anv) | | | |
| | | | ,, | | | |
| = | Date | Full name of contributor | out-of-state PAC (ID#: |) | Π | Amount of Contribution (\$) |
| | 02/20/2024 | Manji, Abel | _ | | | \$500.00 |
| | | Contributor address; City; Sugar Land, TX 77479 | State; Zip Code | | • | |
| | Contributor's I | Principal Occupation | | Contributor's Job Title | | |
| | Attorney | | | Attorney | | |
| Г | Contributor's | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| | Hird Chu La | wji & Manji | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | • | | |
| | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE A(J)1 |
|----|---|---|------------------------|---------------------------------|--------------------------------------|--|
| | The Instruction Guide explains how to complete this form. | | | | | Total pages Schedule A(J)1: Sch: 16/27 Rpt: 19/48 |
| 2 | FILER NAME Carter, O. K | ER NAME ter, O. Kyler (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00062560 |
| 4 | Date 02/19/2024 | te 5 Full name of contributor out-of-state PAC (ID#:) 7 | | 7 | Amount of Contribution (\$) \$500.00 | |
| | | Houston, TX 77539 | | | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | |
| | Attorney | | | Attorney | | |
| 10 | Contributor's 6 Markle DeLa | employer/law firm aCruz, LLP | | 11 Law firm of contributor's sp | oous | se (if any) |
| 12 | If contributor is | s a child, law firm of parent(s) (i | f any) | 1 | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 01/31/2024 | Marshall, Jon Contributor address; City; | State; Zip Code | | | \$1,000.00 |
| | | Katy, TX 77492 | | | | |
| | | Principal Occupation | | Contributor's Job Title | | |
| | Retired | | | Retired | | |
| | Contributor's e | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | 1 | | |
| H | Date | Full name of contributor | out-of-state PAC (ID#: | | Τ | Amount of Contribution (\$) |
| | 02/14/2024 | Martin, Mary | _ (| | | \$25.00 |
| | | Contributor address; City; Houston, TX 77056 | State; Zip Code | | | |
| _ | Contributor's F | Principal Occupation | | Contributor's Job Title | | |
| | Attorney | Timoipai Goodpation | | Attorney | | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| | Peckham Ma | artin PLLC | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | | | |
| | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE A(J)1 |
|----|---|---|------------------------|---------------------------------|------|--|
| | The Instruction Guide explains how to complete this form. | | | | | Total pages Schedule A(J)1: Sch: 17/27 Rpt: 20/48 |
| 2 | FILER NAME Carter, O. Ky | yler (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00062560 |
| 4 | Date 02/06/2024 | 5 Full name of contributor McConn, Tim6 Contributor address; City; | | | 7 | Amount of Contribution (\$) \$1,000.00 |
| | | Houston, TX 77009 | | _ | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | |
| | Attorney | | | Attorney | | |
| 10 | Contributor's e Yetter Colen | employer/law firm nan LLP | | 11 Law firm of contributor's sp | oous | e (if any) |
| 12 | ! If contributor is | s a child, law firm of parent(s) (i | f any) | | | |
| F | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 02/15/2024 | McFarlane, Heather Contributor address; City; Houston, TX 77019 | State; Zip Code | | | \$150.00 |
| _ | Contributor's I | Principal Occupation | | Contributor's Job Title | | |
| | Attorney/Me | | | Attorney/Mediator | | |
| | | employer/law firm | | Law firm of contributor's sp | oous | e (if any) |
| | McFarlane, I | PLLC | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 01/29/2024 | Mendez, Ben Contributor address; City; | State; Zip Code | | | \$250.00 |
| | | Houston, TX 77059 | | | | |
| | Contributor's I | Principal Occupation | | Contributor's Job Title | | |
| | Engineer | | | Engineer | | |
| | | employer/law firm | | Law firm of contributor's sp | oous | e (if any) |
| | Houston Me | | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | | | |
| | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE A(J)1 |
|----|---|---|------------------------|--|----------|--|
| | The Instruction Guide explains how to complete this form. | | | | | Total pages Schedule A(J)1: Sch: 18/27 Rpt: 21/48 |
| 2 | FILER NAME Carter, O. K | R NAME er, O. Kyler (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00062560 |
| 4 | Date 02/20/2024 5 Full name of contributor out-of-state PAC (ID#:) Mitchell, Robert 6 Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) \$2,500.00 | | |
| | | Mobile, AL 36604 | | | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | |
| | Attorney | | | Attorney | | |
| 10 | | employer/law firm n Bounds, LLC | | 11 Law firm of contributor's sp | oous | e (if any) |
| 12 | | s a child, law firm of parent(s) (if | f anv) | | | |
| | . Il contributor i | s a crima, law iiiii or parcria(s) (ii | uny) | | | |
| F | Date | Full name of contributor | out-of-state PAC (ID#: |) | l | Amount of Contribution (\$) |
| | 01/26/2024 | Moore, Daryl Contributor address; City; | <u> </u> | | - | \$1,000.00 |
| | | Houston, TX 77010 | | | | |
| | | Principal Occupation | | Contributor's Job Title | | |
| | Attorney | and a conflorer fines | | Attorney | | o (it am) |
| | AZA | employer/law firm | | Law firm of contributor's sp | Jous | e (II any) |
| - | | s a child, law firm of parent(s) (i | any) | | | |
| | | | | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 02/14/2024 | Mundy, Dennis | | | | \$500.00 |
| | | Contributor address; City; Tomball, TX 77375 | | | | |
| | Contributor's F | I Principal Occupation | | Contributor's Job Title | <u> </u> | |
| | Attorney | | | Attorney | | |
| Г | Contributor's | employer/law firm | | Law firm of contributor's sp | oous | e (if any) |
| | Self | | | | | |
| | If contributor is | s a child, law firm of parent(s) (if | any) | • | | |
| | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE A(J)1 |
|----|---|--|------------------------|--|----------|--|
| | The Instruction Guide explains how to complete this form. | | | | | Total pages Schedule A(J)1: Sch: 19/27 Rpt: 22/48 |
| 2 | FILER NAME Carter, O. K | NAME O. Kyler (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00062560 |
| 4 | Date 02/02/2024 | 5 Full name of contributor Murphy, John6 Contributor address; City; | out-of-state PAC (ID#: | | 7 | Amount of Contribution (\$) \$100.00 |
| | | Spring, TX 77379 | | | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | |
| _ | Attorney | | | Attorney | | |
| 10 | | employer/law firm ardi & Carrabba, P.C. | | 11 Law firm of contributor's sp | oous | se (if any) |
| 12 | | s a child, law firm of parent(s) (i | f any) | I. | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | T | Amount of Contribution (\$) |
| | 02/16/2024 | Narsete, Michael Contributor address; City; | State; Zip Code | | | \$750.00 |
| | | Houston, TX 77056 | | T | | |
| | | Principal Occupation | | Contributor's Job Title | | |
| | Attorney | employer/law firm | | Attorney Law firm of contributor's sp | 2011 | oo (if anu) |
| | Self | employer/iaw iiiii | | Law IIIII of Continution 5 Sp | Jous | se (II arry) |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | | | |
| F | Date | Full name of contributor | out-of-state PAC (ID#: |) | T | Amount of Contribution (\$) |
| | 02/15/2024 | Olive, Kenneth | _ | | | \$100.00 |
| | | Contributor address; City; Houston, TX 77096 | State; Zip Code | | | |
| | Contributor's I | I Principal Occupation | | Contributor's Job Title | <u> </u> | |
| | Political/Gov | ernment Consulting | | Political/Government Co | ons | ulting |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| | OliveGRPC | | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | | | |
| | | | | | | |

| MONET | ARY POLITICAL | CONTRIBUTIO | DNS | SCHEDULE A(J)1 |
|------------------------------|---|--|--|--|
| The Instru | ction Guide explains ho | 1 Total pages Schedule A(J)1: Sch: 20/27 Rpt: 23/48 | | |
| 2 FILER NAME | | | | 3 Filer ID (Ethics Commission Filers) |
| Carter, O. K | . Kyler (The Honorable) | | 00062560 | |
| 4 Date 02/03/2024 | 5 Full name of contributor Parrott, Mike 6 Contributor address; City; | | | 7 Amount of Contribution (\$) \$100.00 |
| | Houston, TX 77015 | | | |
| 8 Contributor's I Retired | Principal Occupation | | 9 Contributor's Job Title Retired | |
| 10 Contributor's of Retired | employer/law firm | | 11 Law firm of contributor's s | spouse (if any) |
| | s a child, law firm of parent(s) (| if any) | | |
| Data | Full name of contributor | | <u> </u> | Amount of Contribution (#) |
| Date 01/26/2024 | Full name of contributor Patterson, Aubrey | out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) \$5,000.00 |
| 01/20/2024 | Contributor address; City; | State; Zip Code | | |
| | Austin, TX 78732 | | | |
| | Principal Occupation | | Contributor's Job Title | |
| Owner | | | Owner | |
| Patterson Pr | employer/law firm | | Law firm of contributor's s Daspit Law Firm | spouse (if any) |
| | s a child, law firm of parent(s) (| if any) | Daspit Law Filli | |
| ii continuatori | s a criliu, law lilili or parerius) (| ii ariy) | | |
| Date | Full name of contributor | out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| 01/26/2024 | Plumbers Local Union N | | | \$500.00 |
| | Contributor address; City; | State; Zip Code | | ···· |
| | Houston, TX 77249 | | <u> </u> | |
| Contributor's I | Principal Occupation | | Contributor's Job Title | |
| Contributor's | employer/law firm | | Law firm of contributor's s | spouse (if any) |
| If contributor i | s a child, law firm of parent(s) (| if any) | | |
| | | | | |

| MONET | TARY POLITICAL | CONTRIBUTIO | ONS | SCHEDULE A(J)1 |
|--------------------------|--|--|---------------------------------------|-------------------------------|
| The Instru | ction Guide explains ho | 1 Total pages Schedule A(J)1: Sch: 21/27 Rpt: 24/48 | | |
| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) | |
| | yler (The Honorable) | | | 00062560 |
| 4 Date | 5 Full name of contributor | out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) |
| 01/26/2024 | Political Action Committe | ee of Winstead PC | | \$1,000.00 |
| | 6 Contributor address; City; S Dallas, TX 75201 | State; Zip Code | | |
| O Caratuila staula | | | Contributorio Job Title | |
| 8 Contributor's | Principal Occupation | | 9 Contributor's Job Title | |
| 10 Contributor's | employer/law firm | | 11 Law firm of contributor's sp | pouse (if any) |
| 12 If contributor | is a child, law firm of parent(s) (if | any) | | |
| Date | Full name of contributor | Quit of state DAC (ID#: | | Amount of Contribution (\$) |
| 01/31/2024 | Remels, Keith | out-of-state PAC (ID#: | | \$250.00 |
| 01/01/2024 | Contributor address; City; S | State; Zip Code | | . Ψ230.00 |
| | Houston, TX 77056 | | T | |
| | Principal Occupation | | Contributor's Job Title | |
| Attorney | | | Attorney | |
| | employer/law firm | | Law firm of contributor's sp | oouse (if any) |
| Dow Golub | Remels & Gilbreath PLLC | | | |
| If contributor i | is a child, law firm of parent(s) (if | any) | | |
| Date | Full name of contributor | out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 02/07/2024 | Rendon, Josefina | | | \$500.00 |
| | Contributor address; City; | State: Zin Code | | 1 |
| | | J. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. | | |
| | Houston, TX 77007 | | | |
| Contributor's | Principal Occupation | | Contributor's Job Title | |
| Attorney/Me | ediator | | Attorney/Mediator | |
| | employer/law firm | | Law firm of contributor's sp | pouse (if any) |
| Self | | | | |
| If contributor | is a child, law firm of parent(s) (if | any) | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
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| MONET | TARY POLITICAL | CONTRIBUTIO | ONS | SCHEDULE A(J)1 |
|------------------------------|--|------------------------|--|--|
| The Instru | iction Guide explains ho | w to complete this t | form. | 1 Total pages Schedule A(J)1: Sch: 22/27 Rpt: 25/48 |
| 2 FILER NAME Carter, O. K | yler (The Honorable) | | | 3 Filer ID (Ethics Commission Filers) 00062560 |
| 4 Date 02/08/2024 | ate 5 Full name of contributor out-of-state PAC (ID#:) 7 | | 7 Amount of Contribution (\$) \$1,000.00 | |
| | Houston, TX 77002 | | | |
| 8 Contributor's | Principal Occupation | | 9 Contributor's Job Title | |
| 10 Contributor's | employer/law firm | | 11 Law firm of contributor's sp | pouse (if any) |
| 12 If contributor | is a child, law firm of parent(s) (if | any) | | |
| Date | Full name of contributor | out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 02/09/2024 | Reynolds, Chris Contributor address; City; \$ | — | | \$2,500.00 |
| | Houston, TX 77002 | | T | |
| | Principal Occupation | | Contributor's Job Title | |
| Attorney | | | Attorney | |
| | employer/law firm | | Law firm of contributor's sp | oouse (if any) |
| Reynolds Fr | | | | |
| If contributor | is a child, law firm of parent(s) (if | any) | | |
| Date | Full name of contributor | out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 01/30/2024 | Sears, Ross A. | | | \$500.00 |
| | Contributor address; City; S Houston, TX 77002 | State; Zip Code | | |
| Contributor's | Principal Occupation | | Contributor's Job Title | |
| Attorney | | | Attorney | |
| Contributor's | employer/law firm | | Law firm of contributor's sp | oouse (if any) |
| Self | | | | |
| If contributor | is a child, law firm of parent(s) (if | any) | | |
| | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE A(J)1 |
|--|--|--|------------------------|--|--------------------------------------|--|
| | The Instruction Guide explains how to complete this form. | | | | 1 | Total pages Schedule A(J)1: Sch: 23/27 Rpt: 26/48 |
| 2 | FILER NAME | yler (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00062560 |
| 4 | Date 02/15/2024 | ate 5 Full name of contributor out-of-state PAC (ID#:) 7 | | 7 | Amount of Contribution (\$) \$500.00 | |
| | | Houston, TX 77004 | | | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | |
| _ | Attorney | | | Attorney | | |
| 10 | Roberts Mar | employer/law firm kland LLP | | 11 Law firm of contributor's sp | oou | se (If any) |
| 12 | ! If contributor is | s a child, law firm of parent(s) (i | f any) | J | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | Π | Amount of Contribution (\$) |
| | 02/18/2024 Shaw, Myles Contributor address; City; State; Zip Code | | | \$500.00 | | |
| | | Houston, TX 77035 | | _ | | |
| | | Principal Occupation | | Contributor's Job Title | | |
| | Attorney | employer/law firm | | Attorney Law firm of contributor's sp | 2011 | as (if any) |
| | Self | етпрюуетлам штп | | Law IIIII of Contributor's Sp | Jou | se (II aliy) |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | 1 | | |
| H | Date | Full name of contributor | out-of-state PAC (ID#: |) | Ι | Amount of Contribution (\$) |
| | 02/19/2024 | Sher, Andrew | _ | | | \$250.00 |
| | | Contributor address; City; Sugar Land, TX 77479 | State; Zip Code | | | |
| | Contributor's I | I Principal Occupation | | Contributor's Job Title | | |
| Attorney | | | | | | |
| Contributor's employer/law firm Law firm of contributor's sp | | oou | se (if any) | | | |
| The Sher Law Firm | | | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | | | |
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| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE A(J)1 |
|--|---|--|------------------------|---------------------------------|--------------------------------------|--|
| | The Instruction Guide explains how to complete this form. | | | | 1 | Total pages Schedule A(J)1: Sch: 24/27 Rpt: 27/48 |
| 2 | FILER NAME Carter, O. K | yler (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00062560 |
| 4 | Date 02/15/2024 | tte 5 Full name of contributor out-of-state PAC (ID#:) | | 7 | Amount of Contribution (\$) \$500.00 | |
| | | Houston, TX 77018 | | | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | |
| | Attorney | | | Attorney | | |
| 10 | Contributor's of Hilda Sibriar | employer/law firm 1 | | 11 Law firm of contributor's sp | oous | se (if any) |
| 12 | If contributor is | s a child, law firm of parent(s) (if | any) | I. | | |
| F | Date | Full name of contributor | out-of-state PAC (ID#: |) | Τ | Amount of Contribution (\$) |
| 02/02/2024 Smith, Donald Contributor address; City; State; Zip Code | | | \$1,000.00 | | | |
| | | Palm Harbor, FL 34684 | | | | |
| | Contributor's F | Principal Occupation | | Contributor's Job Title | • | |
| | ALR Judge | | | Retired | | |
| | Contributor's e | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| | If contributor is | s a child, law firm of parent(s) (if | any) | <u>l</u> | | |
| | Dete | Full name of contributor | | | - | Amount of Contribution (th) |
| | Date 02/20/2024 | Smyser, Craig | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) \$500.00 |
| Contributor address; City; State; Zip Code Washington, DC 20036 | | | \$ | | | |
| | Contributor's I | I Principal Occupation | | Contributor's Job Title | <u> </u> | |
| Attorney Attorney | | | | | | |
| Contributor's employer/law firm Law firm of contributor's sp | | oous | se (if any) | | | |
| Steptoe LLP | | | | | | |
| | If contributor is | s a child, law firm of parent(s) (if | any) | | | |
| | | | | | | |

| | MONETARY POLITICAL CONTRIBUTIONS | | | | | SCHEDULE A(J)1 | |
|---|---|--|-------------------------|--------------------------------|----------------|---------------------------------------|------------|
| | The Instru | ction Guide explains hov | v to complete this f | orm. | 1 | ges Schedule A(J)1: /27 Rpt: 28/48 | |
| 2 | FILER NAME | | | | 3 Filer ID | (Ethics Commission | Filers) |
| | Carter, O. K | /ler (The Honorable) | | | 000625 | 60 | |
| 4 | Date 5 Full name of contributor out-of-state PAC (ID#:) 02/08/2024 Susman Godfrey LLP | | 7 Amount o | of Contribution (\$) | \$4,000.00 | | |
| | | 6 Contributor address; City; S Houston, TX 77002 | tate; Zip Code | | | | |
| 8 | Contributor's I | L Principal Occupation | | 9 Contributor's Job Title | | | |
| 10 | Contributor's 6 | employer/law firm | | 11 Law firm of contributor's s | pouse (if any) | | |
| 12 | ! If contributor is | s a child, law firm of parent(s) (if | any) | I | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#:_ |) | Amount o | of Contribution (\$) | |
| | 02/22/2024 | Teltschik Grubbs, PLLC | | | | | \$250.00 |
| | | Contributor address; City; S | tate; Zip Code | | | | |
| | | Sugar Land, TX 77478 | | , | | | |
| | Contributor's Principal Occupation Contributor's Job Title | | | Contributor's Job Title | | | |
| | Contributor's employer/law firm | | | Law firm of contributor's s | pouse (if any) | | |
| | If contributor is | s a child, law firm of parent(s) (if | any) | | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#:_ |) | Amount o | of Contribution (\$) | |
| | 02/24/2024 | Vinson & Elkins Texas P | AC | | | 9 | \$2,500.00 |
| | | Contributor address; City; S | tate; Zip Code | | | | |
| | | Houston, TX 77002 | | _ | | | |
| | Contributor's I | Principal Occupation | | Contributor's Job Title | | | |
| Contributor's employer/law firm | | Law firm of contributor's s | pouse (if any) | | | | |
| If contributor is a child, law firm of parent(s) (if any) | | | | | | | |
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| MONET | ARY POLITICAL CONTRIBUTI | ONS | SCHEDULE A(J)1 |
|--|---|--|--|
| The Instru | ction Guide explains how to complete this | 1 Total pages Schedule A(J)1: Sch: 26/27 Rpt: 29/48 | |
| 2 FILER NAME Carter, O. K | yler (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00062560 |
| 4 Date 02/20/2024 | eate 5 Full name of contributor out-of-state PAC (ID#:) | | 7 Amount of Contribution (\$) \$150.00 |
| | Houston, TX 77233 | | |
| 8 Contributor's | Principal Occupation | 9 Contributor's Job Title | |
| 10 Contributor's | employer/law firm | 11 Law firm of contributor's sp | pouse (if any) |
| 12 If contributor i | s a child, law firm of parent(s) (if any) | | |
| Date | Full name of contributor out-of-state PAC (ID: | #:) | Amount of Contribution (\$) |
| 02/20/2024 | | | \$500.00 |
| | Houston, TX 77009 | T | |
| Contributor's | Principal Occupation | Contributor's Job Title | |
| Contributor's | employer/law firm | Law firm of contributor's sp | pouse (if any) |
| If contributor i | s a child, law firm of parent(s) (if any) | | |
| Date | Full name of contributor out-of-state PAC (ID# | #:) | Amount of Contribution (\$) |
| 02/22/2024 | Wilson, Susan | | \$1,500.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77063 | | |
| Contributor's | Principal Occupation | Contributor's Job Title | 1 |
| Attorney Attorney | | | |
| Contributor's employer/law firm Law firm of contributor's sp | | pouse (if any) | |
| SBSB Easth | | | |
| If contributor i | s a child, law firm of parent(s) (if any) | | |
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| | MONET | SCHEDULE A(J)1 | | | |
|----|-------------------|--|---------------------------------|---|-----------------------------------|
| | The Instru | ction Guide explains how to complete this f | | I pages Schedule A(J)1: : 27/27 Rpt: 30/48 | |
| 2 | FILER NAME | | | | ID (Ethics Commission Filers) |
| _ | | yler (The Honorable) | | | 62560 |
| 4 | Date 01/29/2024 | 5 Full name of contributor out-of-state PAC (ID#:_ Zwernemann, Allen (Mr.) |) | / Amo | unt of Contribution (\$) \$250.00 |
| | 01/23/2024 | 6 Contributor address; City; State; Zip Code | | | Ψ250.00 |
| | | Contributor address, City, State, Zip Code | | | |
| | | Houston, TX 77009 | | | |
| 8 | Contributor's I | Principal Occupation | 9 Contributor's Job Title | | |
| | Attorney | | Attorney | | |
| 10 | | employer/law firm | 11 Law firm of contributor's sp | ouse (if a | any) |
| | The Zwerner | mann Law Firm | | | |
| 12 | If contributor is | s a child, law firm of parent(s) (if any) | | | |
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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

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

| | 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: 1/8 Rpt: 31/48 | Carter, O. Kyler (The Honorable) 00062560 |
| 4 | Date | 5 Payee name |
| | 02/06/2024 | Aceves Communications |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| l | \$29,527.46 | PO Box 6514 |
| l | | |
| | | Houston, TX 77265 |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| l | OF EXPENDITURE | Advertising Expense Check if travel outside of Texas. Complete Schedule T. |
| l | | Check if Austin, TX, officeholder living expense Campaign video, campaign mailer, campaign |
| l | | messaging |
| 9 | Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| L | experiantire to benefit G/O | ' |
| | Date | Payee name |
| l | 02/15/2024 | Aceves Communications |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$47,719.38 | PO Box 6514 |
| l | | |
| | | Houston, TX 77265 |
| Г | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| l | OF EXPENDITURE | Advertising Expense Check if travel outside of Texas. Complete Schedule T. |
| l | | Check if Austin, TX, officeholder living expense Campaign video, campaign mailer, campaign |
| l | | messaging |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/O | |
| F | Date | Payee name |
| l | 02/19/2024 | Aceves Communications |
| ┝ | Amount (\$) | Payee address; City; State; Zip Code |
| l | \$151,450.00 | PO Box 6514 |
| l | · | |
| | | Houston, TX 77265 |
| | 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. |
| l | | Check if Austin, TX, officeholder living expense Campaign digital, radio and tv messaging |
| | | Campaign digital, faulo and to messaging |
| \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/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

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 comple | te this form. |
|---|---|--|--|
| 1 | Total pages Schedule F1: | 2 FILER NAME | 3 Filer ID (Ethics Commission Filers) |
| | Sch: 2/8 Rpt: 32/48 | Carter, O. Kyler (The Honorable) | 00062560 |
| 4 | Date | 5 Payee name | · |
| | 02/15/2024 | American Express | |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code | |
| | \$2,478.21 | PO Box 650448 | |
| | | | |
| | | Dallas, TX 75265-0448 | |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) | Description |
| | OF EXPENDITURE | Credit Card Payment | Check if travel outside of Texas. Complete Schedule T. |
| | - | | Check if Austin, TX, officeholder living expense Credit card payment of campaign expenses |
| | | | Credit card payment of campaign expenses |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought | Office held |
| | expenditure to benefit C/O | | Cilide Held |
| _ | Date | Payee name | |
| | 01/29/2024 | Burks, Thyra | |
| | Amount (\$) | Payee address; City; State; Zip Code | |
| | \$1,000.00 | 5606 Beldart | |
| | Ψ1,000.00 | 3000 Beldart | |
| | | Houston, TX 77033 | |
| | PURPOSE | | Description |
| | OF | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | Description Check if travel outside of Texas. Complete Schedule T. |
| | EXPENDITURE | Salaries/ wages/contract Labor | Check if Austin, TX, officeholder living expense |
| | | | Campaign sign placement |
| | | | |
| | Complete ONLY if direct expenditure to benefit C/Ol | Candidate/Officeholder name Office sought | Office held |
| | experience to borionic Grou | | |
| | Date | Payee name | |
| | 02/23/2024 | Burks, Thyra | |
| | Amount (\$) | Payee address; City; State; Zip Code | |
| | \$4,600.00 | 5606 Beldart | |
| | | | |
| | | Houston, TX 77033 | |
| | PURPOSE OF | 1 ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' | Description |
| | EXPENDITURE | Salaries/Wages/Contract Labor | Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | | Campaign literature distribution |
| | | | . 3 |
| H | Complete ONLY if direct | Candidate/Officeholder name Office sought | Office held |
| | expenditure to benefit C/O | | |
| | | | |
| | | | |
| l | | | |

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 Salaries (Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

| | Candidate/Officeholder/Politica Credit Card Payment | 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: 3/8 Rpt: 33/48 | Carter, O. Kyler (The Honorable) 00062560 |
| 4 | Date | 5 Payee name |
| | 01/26/2024 | Campaign Warriors |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$750.00 | 14237 E Sam Houston Pkwy N |
| | | Suite 200 #289 |
| | | Houston, TX 77044 |
| 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. |
| | | Consulting fee |
| | | Consuming lee |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| Ĺ | expenditure to benefit C/OI | |
| | Date | Payee name |
| | 02/01/2024 | Chan, Leana |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$2,117.50 | 2302 Wordsworth St |
| | | |
| | | Houston, TX 77030 |
| | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | EXPENDITURE | Salaries/Wages/Contract Labor |
| | | Campaign contract labor |
| | | Gainpaigh contact tabol |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | |
| | Date | Payee name |
| | 02/15/2024 | Chan, Leana |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$2,500.00 | 2302 Wordsworth St |
| | | |
| | | Houston, TX 77030 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Salaries/Wages/Contract Labor |
| | - | Check if Austin, TX, officeholder living expense Campaign contract labor |
| | | Campaign contract labor |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | |
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

| 1 Total pages Schedule F1: Sch: 4/8 Rpt: 34/48 Carter, O. Kyler (The Honorable) 4 Date O2/20/2024 Payee name Chase Cardmember Service 6 Amount (\$) Payee address; City; State; Zip Code PO Box 94014 Palatine, IL 60094 | | Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | |
|---|----------|--|---|
| Sch: 4/8 Rpt: 34/48 | _ | | , |
| Date OZ/20/2024 | 1 | | |
| Chase Cardmember Service 7 Payse address; City; State; Zip Code 8 PURPOSE OF EXPENDITURE (a) Category (see Categories issed at the top of this schedule) 9 Complete ONLY if direct expenditure to benefit C/OH Date 0/2/12/2024 Amount (8) Payse name 0/2/12/2024 Payse address; City; State; Zip Code 1 Office sought Office held Date Candidate/Officeholder name 0/2/10/2024 Amount (8) Payse address; City; State; Zip Code EXPENDITURE (a) Category (see Categories issed at the top of this schedule) Advertising Expense Office sought Office held | | Sch: 4/8 Rpt: 34/48 | Carter, O. Kyler (The Honorable) 00062560 |
| Amount (\$) Fayee address; City; State; Zip Code | 4 | Date | 5 Payee name |
| PORPOSE OF EXPENDITURE Candidate/Officeholder name Office sought Office held | | 02/20/2024 | Chase Cardmember Service |
| PORPOSE OF EXPENDITURE Candidate/Officeholder name Office sought Office held | 6 | Amount (\$) | 7 Pavee address: Citv: State: Zip Code |
| Palatine, IL 60094 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Credit Card Payment Credit Card payment of campaign expenses 9 Complete ONLY if direct expenditure to benefit CroH Date | | * * | |
| Category See Categories listed at the top of this schedule Credit Card Payment Credit Card Payment of Campaign expenses | | +, | |
| Category See Categories listed at the top of this schedule Credit Card Payment Credit Card Payment of Campaign expenses | | | Deletine II 60004 |
| Credit Card Payment | | | |
| Credit Card Payment Credit Card Payment Credit Card payment of campaign expenses | 8 | | |
| PURPOSE OF EXPENDITURE Candidate/Officeholder name Office sought Office held | | | orean cara rayment |
| 9 Complete ONLY if direct expenditure to benefit C/OH Date | | | |
| Date 02/09/2024 Date 02/09/2024 J&N Enterprises, Inc. Amount (\$) \$3,961.95 Payee address; City; State; Zip Code 2519 Fairway Park Drive Houston, TX 77092 PURPOSE OF EXPENDITURE Candidate/Officeholder name Office sought Office held Date 02/12/2024 Date 02/12/2024 Date 02/12/2024 Date 03/12/2024 Date 04/12/2024 Date 05/12/2024 Date 06/12/2024 Date 06/12/2024 Date 06/12/2024 Date 06/12/2024 Date 07/12/2024 Date 08/12/2024 Date 09/12/2024 Date | | | Credit card payment of campaign expenses |
| Date 02/09/2024 Date 02/09/2024 J&N Enterprises, Inc. Amount (\$) \$3,961.95 Payee address; City; State; Zip Code 2519 Fairway Park Drive Houston, TX 77092 PURPOSE OF EXPENDITURE Candidate/Officeholder name Office sought Office held Date 02/12/2024 Date 02/12/2024 Date 02/12/2024 Date 03/12/2024 Date 04/12/2024 Date 05/12/2024 Date 06/12/2024 Date 06/12/2024 Date 06/12/2024 Date 06/12/2024 Date 07/12/2024 Date 08/12/2024 Date 09/12/2024 Date | | | |
| Date 02/09/2024 J&N Enterprises, Inc. Amount (\$) Payee address; City; State; Zip Code 2519 Fairway Park Drive Houston, TX 77092 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Advertising Expense Complete ONLY if direct expenditure to benefit C/OH Date 02/12/2024 Date 02/12/2024 Amount (\$) Payee name 02/12/2024 Johnston Campaigns Amount (\$) Payee address; City; State; Zip Code 1415 South Voss Suite 217 Houston, TX 77057 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Advertising Expense (b) Description Check if avaston, TX, officeholder living expense (b) Description Check if avaston, TX, officeholder living expense Check if avaston, TX, officeholder living expense Printing expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held | 9 | | |
| Date O2/12/2024 Amount (\$) Payee name O2/12/2024 Amount (\$) Payee name O2/12/2024 Amount (\$) Payee address; City; State; Zip Code Candidate/Officeholder name O2/12/2024 Amount (\$) Payee name O2/12/2024 OA/12/2024 OA | | experience to benefit of or | ' |
| Amount (\$) Payee address; City; State; Zip Code \$3,961.95 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Advertising Expense (a) Category (see Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign sweatshirts Complete ONLY if direct expenditure to benefit C/OH Date 02/12/2024 Johnston Campaigns Amount (\$) Payee address; City; State; Zip Code 1415 South Voss Suite 217 Houston, TX 77057 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if I ravel outside of Texas. Complete Schedul | | Date | Payee name |
| ### PURPOSE OF EXPENDITURE Advertising Expense (a) Category (see Categories listed at the top of this schedule) (b) Description Check if Tauvel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign sweatshirts Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held | | 02/09/2024 | J&N Enterprises, Inc. |
| ### PURPOSE OF EXPENDITURE Advertising Expense (a) Category (see Categories listed at the top of this schedule) (b) Description Check if Tauvel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign sweatshirts Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held | | Amount (\$) | Payee address; City; State; Zip Code |
| PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign sweatshirts Complete ONLY if direct expenditure to benefit C/OH Date 02/12/2024 Date 02/12/2024 Amount (\$) Payee name Johnston Campaigns Amount (\$) Payee address; City; State; Zip Code 1415 South Voss Suite 217 Houston, TX 77057 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Printing expense | | • • | |
| PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign sweatshirts Complete ONLY if direct expenditure to benefit C/OH Date 02/12/2024 Date 02/12/2024 Amount (\$) Payee name Johnston Campaigns Amount (\$) Payee address; City; State; Zip Code \$2,000.00 1415 South Voss Suite 217 Houston, TX 77057 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held Office held | | , | |
| PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign sweatshirts Complete ONLY if direct expenditure to benefit C/OH Date 02/12/2024 Date 02/12/2024 Amount (\$) Payee name Johnston Campaigns Amount (\$) Payee address; City; State; Zip Code \$2,000.00 1415 South Voss Suite 217 Houston, TX 77057 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held Office held | | | Houston TV 77002 |
| Advertising Expense Advertising Expense Advertising Expense Complete ONLY if direct expenditure to benefit C/OH Date 02/12/2024 Date 02/12/2024 Date 02/12/2024 Date 02/12/2024 Date 02/12/2024 Date 03/12/2024 Date 04/12/2024 Date 05/12/2024 Date 06/12/2024 Date 06/12/2024 Date 07/12/2024 Date 08/12/2024 Date 08/12/2024 Date 09/12/2024 Date 09/1 | | | Houston, TX 77092 |
| Check if Austin, TX, officeholder living expense Campaign sweatshirts | | | |
| Complete ONLY if direct expenditure to benefit C/OH Date | | | Advertising Expense |
| Complete ONLY if direct expenditure to benefit C/OH Date 02/12/2024 Date 02/12/2024 Date 1 Payee name 2 Johnston Campaigns Amount (\$) Payee address; City; State; Zip Code \$2,000.00 \$2,000.00 \$2,000.00 \$2,000.00 \$2,000.00 Purpose OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held Office held | | | |
| Date 02/12/2024 Payee name Johnston Campaigns Amount (\$) Payee address; City; State; Zip Code 1415 South Voss Suite 217 Houston, TX 77057 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held | | | Campaign sweatshirts |
| Date 02/12/2024 Payee name Johnston Campaigns Amount (\$) Payee address; City; State; Zip Code 1415 South Voss Suite 217 Houston, TX 77057 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held | | Operation ONLY if allowed | Our stide to 10 ff as had done as one |
| Date 02/12/2024 Date 02/12/2024 Date 02/12/2024 Date Date 02/12/2024 Date Date 02/12/2024 Date Date Date Date Date Date Date Dat | | | · · |
| Dohnston Campaigns Amount (\$) Payee address; City; State; Zip Code \$2,000.00 \$2,000. | | | |
| Amount (\$) \$2,000.00 \$2,000.00 Payee address; City; State; Zip Code 1415 South Voss Suite 217 Houston, TX 77057 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Printing expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held | | Date | Payee name |
| \$2,000.00 1415 South Voss Suite 217 Houston, TX 77057 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Printing expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held | | 02/12/2024 | Johnston Campaigns |
| Suite 217 Houston, TX 77057 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Printing expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held | | Amount (\$) | Payee address; City; State; Zip Code |
| Houston, TX 77057 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Printing expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held | | \$2,000.00 | 1415 South Voss |
| Houston, TX 77057 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Printing expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held | | | Suite 217 |
| PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Printing expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held | | | |
| Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Printing expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held | | | |
| EXPENDITURE Advertising Expense Check if Austin, TX, officeholder living expense Printing expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held | | | l |
| Complete ONLY if direct Candidate/Officeholder name Office sought Office held | | | / Advertising Expense |
| Complete ONLY if direct Candidate/Officeholder name Office sought Office held | | | |
| | | | |
| | \vdash | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | | | |
| | | | |
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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

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

| | Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | | Travel Out of District OTHER (enter a category not listed above) |
|---|--|--|--|
| 1 | Total pages Schedule F1: | 2 FILER NAME | 3 Filer ID (Ethics Commission Filers) |
| | Sch: 5/8 Rpt: 35/48 | Carter, O. Kyler (The Honorable) | 00062560 |
| 4 | Date | 5 Payee name | |
| | 01/30/2024 | Levine, Burt | |
| 6 | Amount (\$) \$300.00 | 7 Payee address; City; State; Zip Code 9600 Glenfield Court 148 Houston, TX 77096 | |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| • | OF EXPENDITURE | Salaries/Wages/Contract Labor | utside of Texas. Complete Schedule T. TX, officeholder living expense ntract labor |
| 9 | Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought | Office held |
| | Date | Payee name | |
| | 02/02/2024 | McCree, Rynette | |
| | Amount (\$) | Payee address; City; State; Zip Code | |
| | \$1,000.00 | 4911 W Airport | |
| | | 3103 | |
| | | Houston, TX 77085 | |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| | OF EXPENDITURE | Salaries/Wages/Contract Labor | utside of Texas. Complete Schedule T. |
| | | Contract labor | TX, officeholder living expense |
| | | Contract labor | 101 GOTV |
| | Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought | Office held |
| | Date | Payee name | |
| | 02/15/2024 | McCree, Rynette | |
| | Amount (\$) | Payee address; City; State; Zip Code | |
| | \$2,500.00 | 4911 W Airport | |
| | | 3103 | |
| | | Houston, TX 77085 | |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| | OF EXPENDITURE | Salaries/ Wages/Contract Eabor | utside of Texas. Complete Schedule T. |
| | | | TX, officeholder living expense |
| | | Contract labor | |
| | 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

Event Expense Fees Food/Beverage Expense 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/Politica Credit Card Payment | - Gift/Awards/Memorials Expense Printing Expense Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form. | Travel Out of District OTHER (enter a category not listed above) | | |
|----------|--|---|--|--|--|
| _ | | | T | | |
| 1 | Total pages Schedule F1: | | 3 Filer ID (Ethics Commission Filers) | | |
| | Sch: 6/8 Rpt: 36/48 | Carter, O. Kyler (The Honorable) | 00062560 | | |
| 4 | Date | 5 Payee name | | | |
| | 01/31/2024 | Mission One USA | | | |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code | | | |
| | \$500.00 | ABC Street | | | |
| | | | | | |
| | | Houston, TX 77077 | | | |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | | | |
| | OF | | outside of Texas. Complete Schedule T. | | |
| | EXPENDITURE | Contributions/Bondtons Made By | , TX, officeholder living expense | | |
| | | | 501(c)(3) organization to sponsor | | |
| | | community s | ports uniforms | | |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought | Office held | | |
| | expenditure to benefit C/OI | 1 | | | |
| | Date | Payee name | | | |
| | 01/30/2024 | Moreno, Monica (Ms.) | | | |
| | Amount (\$) | Payee address; City; State; Zip Code | | | |
| | \$2,500.00 | 4900 Fournace PI | | | |
| | | Suite 560 | | | |
| | | | | | |
| | | Bellaire, TX 77401 | | | |
| | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description | | | |
| | EXPENDITURE | Salaries/Wages/Contract Eabor | outside of Texas. Complete Schedule T. , TX, officeholder living expense | | |
| | | | anagement; fundraiser assistance; sign | | |
| | | placement | anagement, fundraiser assistance, sign | | |
| \vdash | Complete ONLY if direct | Candidate/Officeholder name Office sought | Office held | | |
| | expenditure to benefit C/OI | · · · · · · · · · · · · · · · · · · · | | | |
| | Date | Payee name | | | |
| | 01/26/2024 | Patino Strategies LLC | | | |
| | | | | | |
| | Amount (\$) | Payee address; City; State; Zip Code | | | |
| | \$14,900.00 | PO Box 925631 | | | |
| | | | | | |
| | | Houston, TX 77292 | | | |
| | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description | | | |
| | EXPENDITURE | Advertising Expense | outside of Texas. Complete Schedule T. | | |
| | | | ı, TX, officeholder living expense | | |
| | | Campaign po | וות | | |
| _ | Complete ONLY if direct | Candidate/Officeholder name Office sought | Office held | | |
| | expenditure to benefit C/OI | • | Office rigiu | | |
| | | | | | |
| | | | | | |
| | | | | | |
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POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

| | Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment | | Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exp Legal Services | Office Pollin eense Printi Salar | e Overhea g Expens ng Expens ies/Wages | se s/Contract Labor | Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above) | | Equipment & Related Expense : strict |
|---|---|--|---|---|---|------------------------|---|---------------------|--|
| | | | The Instruction Guide | e explains now to | compi | ete tnis form. | _ | | |
| 1 | Total pages Schedule F1: | | | | | | 3 | Filer ID | (Ethics Commission Filers) |
| | Sch: 7/8 Rpt: 37/48 | Carter, O. K | yler (The Honorab | ıle) | | | | 00062560 | |
| 4 | Date | 5 Payee name | | | | | • | | |
| | 02/23/2024 | Patino Strat | egies LLC | | | | | | |
| 6 | Amount (\$) | 7 Payee addres | ss; City; | State; Zip | Code | | | | |
| • | \$11,500.00 | PO Box 925 | 631 | State, Zip | Code | | | | |
| _ | DUDDOOF | | | | (1-) | | | | |
| 8 | PURPOSE OF EXPENDITURE | (a) Category _{(Se} | e Categories listed at the to Expense | op of this schedule) | (b) | Check if Austin, | , TX, | officeholder living | nplete Schedule T. g expense nd advertising expenses |
| 9 | Complete ONLY if direct expenditure to benefit C/Oh | Candidate/Offic | ceholder name | Office | sought | | | Office h | eld |
| | Date | Payee name | | | | | | | |
| | 02/13/2024 | Secceur Inv | estigations & Secu | ırity, Inc. | | | | | |
| | Amount (\$) | Payee addres | ss; City; | State; Zip | Code | | | | |
| | \$10,673.00 | _ | Ranch Blvd | - in | | | | | |
| | += 0,0.0.00 | Ste H120-92 | | | | | | | |
| | | | | | | | | | |
| | | Katy, TX 77 | 494 | | | | | | |
| | PURPOSE OF EXPENDITURE | (a) Category _{(Se} Advertising | e Categories listed at the to Expense | op of this schedule) | (b) | | , TX, | officeholder living | nplete Schedule T. g expense |
| | Complete ONLY if direct expenditure to benefit C/OF | Candidate/Offic | ceholder name | Office | sought | | | Office h | eld |
| | Date | Payee name | | | | | | | |
| | 02/14/2024 | Sprint 2 Prir | nt | | | | | | |
| | Amount (\$) \$2,202.89 | Payee addres 8748 Clay F Ste. 300 Houston, T> | ₹d. | State; Zip | Code | | | | |
| | PURPOSE OF EXPENDITURE | (a) Category _{(Se} Advertising | e Categories listed at the to Expense | op of this schedule) | (b) | | , TX, | officeholder living | nplete Schedule T. g expense |
| | Complete ONLY if direct expenditure to benefit C/Oh | Candidate/Offic | ceholder name | Office | sought | | | Office h | eld |
| _ | rms provided by Toyas F | thing Commission | nn | u athics state | hy i i c | | | | Version V2 5 1 9000c47f |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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
Travel Out of District

| | Candidate/Officenoider/Politica Credit Card Payment | I Com | The Instruction Guide explains how to co | - | ete this form. | | OTHER (enter a ca | ategory not listed above) |
|---|--|--------|--|---------|-------------------------------------|-----|---|----------------------------|
| 1 | Total pages Schedule F1: | 2 | FILER NAME | | | 3 | Filer ID | (Ethics Commission Filers) |
| | Sch: 8/8 Rpt: 38/48 | | Carter, O. Kyler (The Honorable) | | | | 00062560 | |
| 4 | Date | 5 | Payee name | | | | | |
| | 01/31/2024 | | Stripe | | | | | |
| 6 | Amount (\$) \$423.25 | | Payee address; City; State; Zip Co 510 Townsend St San Francisco, CA 94103 | de | | | | |
| 8 | PURPOSE | | | (h) | Description | | | |
| • | OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Accounting/Banking | (13) | Check if travel of Check if Austin, | TX, | le of Texas. Comple officeholder living e bution transa | |
| 9 | Complete ONLY if direct expenditure to benefit C/O | Н С | andidate/Officeholder name Office sou | ght | | | Office held | d |
| Г | Date | | Payee name | | | | | |
| | 02/24/2024 | | Stripe | | | | | |
| | Amount (\$) \$922.82 | | Payee address; City; State; Zip Co 510 Townsend St San Francisco, CA 94103 | de | | | | |
| | | | | <i></i> | | | | |
| | PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) | Check if Austin, | TX, | le of Texas. Comple officeholder living e bution transa | |
| | Complete ONLY if direct expenditure to benefit C/O | | andidate/Officeholder name Office sou | ght | | | Office held | 1 |
| | | | | | | | | |

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

| | | The Inst | ruction Guide explains how | to complete | this form. | (* ** ** ****************************** | , | , |
|---------------|---|---|----------------------------------|--------------------------|---|---|-----------|--------------|
| 1 | Total pages Schedule F4: | 2 FILER NAME | | | | 3 Filer ID (Ethio | cs Commis | sion Filers) |
| | Sch: 1/8 Rpt: 39/48 | Carter, O. Kyler (Th | ne Honorable) | | | 00062560 | | |
| 4 | CREDIT CARD ISSUER | | ncial institution n Express | EXPEN | OF UNITEMIZED DITURES SED TO A CREDIT | \$ | 1,423.2 | 25 |
| 6 | PAYMENT | (a) Amount Charged \$515.00 | (b) Date of Charge 02/02/2024 | (c) Date(s) 02/15/20 | Credit Card Issuer 24 | Paid | | |
| 7 | PAYEE | (a) Payee name Koerber, Nata | | | address; uthmore Blvd. TX 77004 | City, | State, | Zip Code |
| 8 | PURPOSE OF EXPENDITURE X Political | (a) Category (See Categories listed at the top Consulting Expense | of this schedule) | (b) Descrip Consultin | otion | | | |
| | Non-Political | (c) Check if travel outside | of Texas. Complete Schedule T. | | Check if Austin, TX, | officeholder living exp | ense | |
| 9 ∈ | Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder | name Office | e sought | | Office held | | |
| | PAYMENT | (a) Amount Charged \$412.00 | (b) Date of Charge 02/01/2024 | (c) Date(s) 02/15/20 | Credit Card Issuer 24 | Paid | | |
| | PAYEE | (a) Payee name Shortstop Phodeos | | (b) Payee 7222 Avo | | City, | State, | Zip Code |
| | PURPOSE OF EXPENDITURE X Political | (a) Category (See Categories listed at the top Advertising Expense | of this schedule) | (b) Descrip | otion | | | |
| | Non-Political | (c) Check if travel outside | of Texas. Complete Schedule T. | | Check if Austin, TX, | officeholder living exp | ense | |
| € | Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder | name Office | e sought | | Office held | | |
| | PAYMENT | (a) Amount Charged \$309.00 | (b) Date of Charge 02/05/2024 | (c) Date(s) 02/15/20 | Credit Card Issuer 24 | Paid | | |
| | PAYEE | (a) Payee name Levine, Burt | | 148 | address; enfield Court TX 77096 | City, | State, | Zip Code |
| | PURPOSE OF EXPENDITURE X Political | (a) Category (See Categories listed at the top Salaries/Wages/Contr | ract Labor | (b) Descrip Campaig | n contract labor | | | |
| | Non-Political | · · · · · · · · · · · · · · · · · · · | of Texas. Complete Schedule T. | | Check if Austin, TX, | officeholder living exp | ense | |
| € | Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder | name Office | e sought | | Office held | | |
| ĺ | | | | | | | | |

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

| | The Instr | ruction Guide explains how | to complete this form. | | | |
|--------------------------------------|--|--------------------------------|---|--------------------------|-----------|--------------|
| 1 Total pages Schedule F4: | 2 FILER NAME | | | 3 Filer ID (Ethic | s Commiss | sion Filers) |
| Sch: 2/8 Rpt: 40/48 | Carter, O. Kyler (Th | ne Honorable) | | 00062560 | | |
| 4 CREDIT CARD ISSUER | | ncial institution revious | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD | \$ | 1,423.2 | 25 |
| 6 PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Credit Card Issuer | r Paid | | |
| | \$834.66 | 01/26/2024 | 02/15/2024 | | | |
| 7 PAYEE | (a) Payee name | | (b) Payee address; | City, | State, | Zip Code |
| | Constant Contact | | 1601 Trapelo Road | | | |
| | (-) 0-1 | | Waltham, MA 02451 | | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top | of this schedule) | (b) Description Campaign email marketing | a services | | |
| X Political | Advertising Expense | | Campaign email marketin | g services | | |
| Non-Political | · · · · · · · · · · · · · · · · · · · | of Texas. Complete Schedule T. | <u> </u> | officeholder living expe | ense | |
| 9 Complete ONLY if direct | Candidate/Officeholder | name Office | e sought | Office held | | |
| expenditure to benefit C/OH PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Credit Card Issuer | r Daid | | |
| FATMENT | | | 02/15/2024 | raiu | | |
| | \$103.00 | 02/14/2024 | | | | |
| PAYEE | (a) Payee name | | (b) Payee address; | City, | State, | Zip Code |
| | Davis, Joy | | 612 Park Trail | | | |
| | , , , , , | | Houston, TX 77019 | | | |
| PURPOSE OF | (a) Category | | (b) Description | | | |
| EXPENDITURE | (See Categories listed at the top | of this schedule) | Community event expense | e | | |
| X Political | Event Expense | | | | | |
| Non-Political | (C) Check if travel outside of | of Texas. Complete Schedule T. | Check if Austin, TX, | officeholder living expe | ense | |
| Complete ONLY if direct | Candidate/Officeholder | name Office | e sought | Office held | | |
| expenditure to benefit C/OH | | | | | | |
| PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Credit Card Issuer | r Paid | | |
| | | | | | | |
| PAYEE | (a) Payee name | | (b) Payee address; | City, | State, | Zip Code |
| | | | | | | |
| | | | | | | |
| | (a) Cataman | | (h) Description | | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top | of this schedule) | (b) Description | | | |
| Political | | | | | | |
| Non-Political | (c) Check if travel outside | of Texas. Complete Schedule T. | | | | |
| Complete ONLY if direct | Candidate/Officeholder | name Office | e sought | Office held | | |
| expenditure to benefit C/OH | | | | | | |
| | | | | | | |

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

| | | The Inst | ruction Guide explains how | to complete | this form. | (* ** ** ****************************** | , | , |
|---------------|---|--|----------------------------------|------------------------------|---|---|------------|--------------|
| 1 | Total pages Schedule F4: | 2 FILER NAME | | | | 3 Filer ID (Ethio | cs Commiss | sion Filers) |
| | Sch: 3/8 Rpt: 41/48 | Carter, O. Kyler (Th | ne Honorable) | | | 00062560 | | |
| 4 | CREDIT CARD ISSUER | | ncial institution rd Services | EXPEN | OF UNITEMIZED DITURES SED TO A CREDIT | \$ | 1,423.2 | 25 |
| 6 | PAYMENT | (a) Amount Charged \$500.00 | (b) Date of Charge 02/01/2024 | (c) Date(s) 02/20/20 | Credit Card Issuel 24 | r Paid | | |
| 7 | PAYEE | (a) Payee name Lillie Schechter Cor | nsulting | Ste 740 Houston, | vay Plaza TX 77046 | City, | State, | Zip Code |
| 8 | PURPOSE OF EXPENDITURE X Political | (a) Category (See Categories listed at the top Consulting Expense | of this schedule) | (b) Descrip Campaig | otion n consulting | | | |
| | Non-Political | ` | of Texas. Complete Schedule T. | | Check if Austin, TX, | officeholder living exp | ense | |
| 9 е | Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder | name Office | e sought | | Office held | | |
| | PAYMENT | (a) Amount Charged \$3,586.00 | (b) Date of Charge 01/26/2024 | (c) Date(s) 02/20/20 | Credit Card Issuer 24 | r Paid | | |
| | PAYEE | (a) Payee name Texas Democratic I | Party | (b) Payee PO Box 1 Austin, T | 15707 | City, | State, | Zip Code |
| | PURPOSE OF EXPENDITURE X Political | (a) Category (See Categories listed at the top Advertising Expense | of this schedule) | (b) Descrip | otion | | | |
| | Non-Political | (c) Check if travel outside | of Texas. Complete Schedule T. | | Check if Austin, TX, | officeholder living exp | ense | |
| e | Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder | name Office | e sought | | Office held | | |
| | PAYMENT | (a) Amount Charged \$500.00 | (b) Date of Charge 02/15/2024 | (c) Date(s) 02/20/20 | Credit Card Issuel 24 | r Paid | | |
| | PAYEE | (a) Payee name Black Women of Gr | reater Houston | Ste 420 | address; Holcombe Blvd. TX 77025 | City, | State, | Zip Code |
| | PURPOSE OF EXPENDITURE X Political | (a) Category (See Categories listed at the top Fees | of this schedule) | (b) Descrip Members | | | | |
| | Non-Political | 1 | of Texas. Complete Schedule T. | | Check if Austin, TX, | officeholder living exp | ense | |
| е | Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder | name Office | e sought | | Office held | | |
| ı | | | | | | | | |

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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/Officeriolder/Folitica | 3 | ruction Guide explains how | • | TILK (elitel a categor) | y Hot listed a | bove) |
|---|---|--|----------------------------------|--|-------------------------|----------------|--------------|
| 1 | Total pages Schedule F4: | | · | · | 3 Filer ID (Ethic | s Commiss | sion Filers) |
| | Sch: 4/8 Rpt: 42/48 | Carter, O. Kyler (Th | ne Honorable) | | 00062560 | | , |
| 4 | CREDIT CARD ISSUER | Name of final | ncial institution revious | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD | \$ | 1,423.2 | 25 |
| 6 | PAYMENT | (a) Amount Charged \$2,500.00 | (b) Date of Charge 01/27/2024 | (c) Date(s) Credit Card Issuel 02/20/2024 | r Paid | | |
| 7 | PAYEE | (a) Payee name Houston Lawyers A | ssociation | (b) Payee address; PO Box 300009 Houston, TX 77230 | City, | State, | Zip Code |
| 8 | PURPOSE OF EXPENDITURE X Political | (a) Category (See Categories listed at the top Advertising Expense | of this schedule) | (b) Description Gala sponsorship | | | |
| | Non-Political | () | of Texas. Complete Schedule T. | | officeholder living exp | ense | |
| 9 | Complete ONLY if direct | Candidate/Officeholder | name Office | e sought | Office held | | |
| е | expenditure to benefit C/OH | | | | | | |
| | PAYMENT | (a) Amount Charged \$500.00 | (b) Date of Charge 01/30/2024 | (c) Date(s) Credit Card Issuer 02/20/2024 | r Paid | | |
| | PAYEE | (a) Payee name Baytown Area Dem | ocrats | (b) Payee address; 111 Cedar Bayou Rd Baytown, TX 77520 | City, | State, | Zip Code |
| | PURPOSE OF EXPENDITURE X Political | (a) Category (See Categories listed at the top Event Expense | of this schedule) | (b) Description Sponsorship of Mardi Gra | s event | | |
| | Non-Political | (C) Check if travel outside | of Texas. Complete Schedule T. | Check if Austin, TX, | officeholder living exp | ense | |
| е | Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder | name Office | e sought | Office held | | |
| | PAYMENT | (a) Amount Charged \$250.00 | (b) Date of Charge 01/29/2024 | (c) Date(s) Credit Card Issuer 02/20/2024 | r Paid | | |
| | PAYEE | (a) Payee name Houston County De | emocrats | (b) Payee address; Houston County Houston County, TX 7700 | City, | State, | Zip Code |
| | PURPOSE OF EXPENDITURE X Political | (a) Category (See Categories listed at the top Event Expense | of this schedule) | (b) Description Event sponsorship | | | |
| L | Non-Political | \(\frac{1}{2}\) | of Texas. Complete Schedule T. | <u> </u> | officeholder living exp | ense | |
| е | Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder | name Office | e sought | Office held | | |
| l | | | | | | | |

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

| | | The Inst | ruction Guide explains how | to complete this form. | | | |
|---|---|---|---------------------------------------|--|----------------------------------|-----------|--------------|
| 1 | Total pages Schedule F4: | 2 FILER NAME | | | 3 Filer ID (Ethic | s Commiss | sion Filers) |
| | Sch: 5/8 Rpt: 43/48 | Carter, O. Kyler (Th | ne Honorable) | | 00062560 | | |
| 4 | CREDIT CARD ISSUER | | ncial institution revious | 5 TOTAL OF UNITEMIZE EXPENDITURES CHARGED TO A CRICARD | \$ | 1,423.2 | 25 |
| 6 | PAYMENT | (a) Amount Charged \$278.41 | (b) Date of Charge 02/07/2024 | (c) Date(s) Credit Card I: 02/20/2024 | ssuer Paid | | |
| 7 | PAYEE | (a) Payee name Irma's Southwest G | irill | (b) Payee address; 1475 Texas Avenue Houston, TX 77002 | City, | State, | Zip Code |
| 8 | PURPOSE OF EXPENDITURE X Political | (a) Category (See Categories listed at the top Food/Beverage Expe | | (b) Description Officeholder expense | - lunch with staff | | |
| | Non-Political | (c) Check if travel outside | of Texas. Complete Schedule T. | | n, TX, officeholder living expe | ense | |
| | Complete ONLY if direct | Candidate/Officeholder | name Office | e sought | Office held | | |
| е | xpenditure to benefit C/OH | | | | | | |
| | PAYMENT | (a) Amount Charged \$103.20 | (b) Date of Charge 01/26/2024 | (c) Date(s) Credit Card I: 02/20/2024 | ssuer Paid | | |
| | PAYEE | (a) Payee name | | (b) Payee address; | City, | State, | Zip Code |
| | | Davis, Joy | | 612 Park Trail | | | |
| | | | | Houston, TX 77019 | | | |
| | PURPOSE OF EXPENDITURE X Political | (a) Category (See Categories listed at the top Salaries/Wages/Conti | | (b) Description Campaign contract la | bor | | |
| | Non-Political | (c) Check if travel outside | of Texas. Complete Schedule T. | Check if Austi | in, TX, officeholder living expe | ense | |
| е | Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder | · · · · · · · · · · · · · · · · · · · | e sought | Office held | | |
| | PAYMENT | (a) Amount Charged \$257.55 | (b) Date of Charge 02/14/2024 | (c) Date(s) Credit Card I: 02/20/2024 | ssuer Paid | | |
| | PAYEE | (a) Payee name Mt Pleasant Baptist | Church | (b) Payee address; 4819 Hershe St Houston, TX 77020 | City, | State, | Zip Code |
| | PURPOSE OF EXPENDITURE X Political | | ns Made By er/Political Committee | (b) Description Contribution for churc | | | |
| | Non-Political | 1 | of Texas. Complete Schedule T. | <u> </u> | in, TX, officeholder living expe | ense | |
| е | Complete ONLY if direct xpenditure to benefit C/OH | Candidate/Officeholder | name Office | e sought | Office held | | |
| ı | | | | | | | |

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

| | The Insti | ruction Guide explains how | to complete th | is form. | | | |
|-----------------------------|---|--------------------------------|----------------------------|--|--------------------------|-----------|--------------|
| 1 Total pages Schedule F4: | 2 FILER NAME | | | | 3 Filer ID (Ethic | s Commiss | sion Filers) |
| Sch: 6/8 Rpt: 44/48 | Carter, O. Kyler (Th | ne Honorable) | | | 00062560 | | |
| 4 CREDIT CARD ISSUER | | ncial institution revious | EXPEND | F UNITEMIZED ITURES ED TO A CREDIT | \$ | 1,423.2 | 25 |
| 6 PAYMENT | (a) Amount Charged | (b) Date of Charge | | Credit Card Issuer | Paid | | |
| | \$605.64 | 01/27/2024 | 02/20/202 | 4 | | | |
| 7 PAYEE | (a) Payee name | | (b) Payee a | ddress; | City, | State, | Zip Code |
| | USA Flower Shop | | 5330 Chim | nney Rock | | | |
| | | | Houston, T | | | | |
| 8 PURPOSE OF | (a) Category | of this cobodula) | (b) Descripti | | | | |
| EXPENDITURE X Political | (See Categories listed at the top Gift/Awards/Memorial | | Flowers fo | r supporters- fu | neral arrangem | ents | |
| Non-Political | (C) Check if travel outside | of Texas. Complete Schedule T. | | Check if Austin, TX, | officeholder living expe | ense | |
| 9 Complete ONLY if direct | Candidate/Officeholder | name Offic | e sought | | Office held | | |
| expenditure to benefit C/OH | | | | | | | |
| PAYMENT | (a) Amount Charged | (b) Date of Charge | | Credit Card Issuer | Paid | | |
| | \$1,000.00 | 02/14/2024 | 02/20/202 | 4 | | | |
| PAYEE | (a) Payee name | | (b) Payee a | ddress; | City, | State, | Zip Code |
| | Kinadam Duildam C | Satis a dual | 401 Stude | wood Drive | | | |
| | Kingdom Builders C | Jameurai | #205 | | | | |
| | | | Houston, T | | | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top | of this schedule) | (b) Descripti | | | | |
| l <u> </u> | Contributions/Donatio | | Contributio | n for church co | mmunity event | | |
| X Political | Candidate/Officeholde | er/Political Committee | | | | | |
| Non-Political | (7) | of Texas. Complete Schedule T. | | Check if Austin, TX, | officeholder living expe | ense | |
| Complete ONLY if direct | Candidate/Officeholder | name Office | e sought | | Office held | | |
| expenditure to benefit C/OH | | | | | | | |
| PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) 0 02/20/202 | Credit Card Issuer | Paid | | |
| | \$1,500.00 | 02/14/2024 | 02/20/202 | 4 | | | |
| PAYEE | (a) Payee name | <u> </u> | (b) Payee a | ddress; | City, | State, | Zip Code |
| | | | Houston | • | • | | · |
| | CLW Forty Plus Mo | dels | | | | | |
| | | | Houston, T | X 77002 | | | |
| PURPOSE OF | (a) Category | | (b) Descripti | on | | | |
| EXPENDITURE | (See Categories listed at the top Advertising Expense | of this schedule) | Sponsorsh | ip of 501(c)(3) o | organization sc | holarship | event |
| X Political | / Auvertising Expense | | | | | | |
| Non-Political | (c) Check if travel outside | of Texas. Complete Schedule T. | | Check if Austin, TX, | officeholder living expe | ense | |
| Complete ONLY if direct | Candidate/Officeholder | name Office | e sought | | Office held | | |
| expenditure to benefit C/OH | | | | | | | |

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

| | The Insti | ruction Guide explains how | to complete this form. | | | |
|--|---|---------------------------------------|--|--------------------------------|----------------|--|
| 1 Total pages Schedule F4: | 2 FILER NAME | | | 3 Filer ID (Ethics Comm | ission Filers) | |
| Sch: 7/8 Rpt: 45/48 | Carter, O. Kyler (Th | ne Honorable) | | 00062560 | | |
| 4 CREDIT CARD ISSUER | | ncial institution revious | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD | \$ 1,423 | 1.25 | |
| 6 PAYMENT | (a) Amount Charged \$2,918.17 | (b) Date of Charge 01/26/2024 | (c) Date(s) Credit Card Issue 02/20/2024 | er Paid | | |
| 7 PAYEE | (a) Payee name Tony's Restaurant | | (b) Payee address; 3755 Richmond Houston, TX 77046 | City, State | , Zip Code | |
| 8 PURPOSE OF EXPENDITURE X Political | (a) Category (See Categories listed at the top Food/Beverage Exper | | (b) Description Food and beverage for ca | ampaign fundraiser | | |
| Non-Political | (c) Check if travel outside | of Texas. Complete Schedule T. | Check if Austin, TX | , officeholder living expense | | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder | name Offic | e sought | Office held | | |
| PAYMENT | (a) Amount Charged \$275.00 | (b) Date of Charge 02/01/2024 | (c) Date(s) Credit Card Issue 02/20/2024 | er Paid | | |
| PAYEE | (a) Payee name State Bar of Texas | | (b) Payee address; 1414 Colorado Street Austin, TX 78701 | City, State | , Zip Code | |
| PURPOSE OF EXPENDITURE X Political | (a) Category (See Categories listed at the top of this schedule) Fees | | (b) Description Officeholder expense - license fees | | | |
| Non-Political | (c) Check if travel outside | of Texas. Complete Schedule T. | Check if Austin, TX | , officeholder living expense | | |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder | name Offic | e sought | Office held | | |
| PAYMENT | (a) Amount Charged \$514.65 | (b) Date of Charge 02/02/2024 | (c) Date(s) Credit Card Issue 02/20/2024 | er Paid | | |
| PAYEE | (a) Payee name Davis, Joy | | (b) Payee address; 612 Park Trail Houston, TX 77019 | City, State | , Zip Code | |
| PURPOSE OF EXPENDITURE X Political | (a) Category (See Categories listed at the top Salaries/Wages/Contr | · · · · · · · · · · · · · · · · · · · | (b) Description Campaign contract labor | | | |
| Non-Political | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | of Texas. Complete Schedule T. | | t, officeholder living expense | | |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder | name Offic | e sought | Office held | | |

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

Printing Expense Salaries/Wages/Contract Labor

| | The Instr | ruction Guide explains how | to complete this form. | | | |
|---|---|--------------------------------|--|--------------------------|-----------|--------------|
| 1 Total pages Schedule F4: | 2 FILER NAME | | | 3 Filer ID (Ethic | s Commiss | sion Filers) |
| Sch: 8/8 Rpt: 46/48 | Carter, O. Kyler (Th | ne Honorable) | | 00062560 | | |
| 4 CREDIT CARD ISSUER | | ncial institution revious | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD | \$ | 1,423.2 | 25 |
| 6 PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Credit Card Issue | r Paid | | |
| | \$514.65 | 02/02/2024 | 02/20/2024 | | | |
| 7 PAYEE | (a) Payee name | • | (b) Payee address; | City, | State, | Zip Code |
| | Mendoza, Victor | | 612 Park Trail | | | |
| | (a) Oata wa wa | | Houston, TX 77019 | | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top | of this schedule) | (b) Description Campaign contract labor | | | |
| X Political | Salaries/Wages/Contr | ract Labor | Campaign contract labor | | | |
| Non-Political | ` | of Texas. Complete Schedule T. | | officeholder living expe | ense | |
| 9 Complete ONLY if direct | Candidate/Officeholder | name Office | e sought | Office held | | |
| expenditure to benefit C/OH | (a) Amazunt Chavarad | (h) Data of Charge | (a) Data(a) Gradit Cand Jacob | - Daid | | |
| PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Credit Card Issuel 02/20/2024 | r Paid | | |
| | \$235.05 | 02/01/2024 | | | | |
| PAYEE | (a) Payee name | I | (b) Payee address; | City, | State, | Zip Code |
| | Torchy's | | 5537 Weslayan St | | | |
| | | | Houston, TX 77005 | | | |
| PURPOSE OF | (a) Category (See Categories listed at the top | of this schodulo) | (b) Description | | | |
| EXPENDITURE | Food/Beverage Exper | | Food for campaign event | | | |
| X Political | | | | | | |
| Non-Political | · · · — | of Texas. Complete Schedule T. | | officeholder living expe | ense | |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder | name Office | e sought | Office held | | |
| PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Credit Card Issue | r Paid | | |
| | \$433.00 | 02/10/2024 | 02/20/2024 | | | |
| PAYEE | (a) Payee name | | (b) Payee address; | City, | State, | Zip Code |
| | Pool Table Crew | | Houston | | | |
| | | | Houston, TX 77002 | | | |
| PURPOSE OF | (a) Category | | (b) Description | | | |
| EXPENDITURE | (See Categories listed at the top Contributions/Donatio | | Pool table repair at Heigh | ts Tower Retire | ment Ce | nter |
| X Political | Candidate/Officeholde | | | | | |
| Non-Political | (c) Check if travel outside | of Texas. Complete Schedule T. | Check if Austin, TX, | officeholder living expe | ense | |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder | name Office | e sought | Office held | | |
| , | L | | | | | |

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 47/48 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Carter, O. Kyler (The Honorable) 00062560 5 Name of person from whom amount is received 8 Amount (\$) Date 01/31/2024 Prosperity Bank \$41.51 6 Address of person from whom amount is received; City; State; Zip Code Houston, TX 77007 Purpose for which amount is received Check if political contribution returned to filer Interest on campaign checking account

| Hand As of The Last Day of The Reporting Period | |
|---|--|
| The Instruction Guide explains how to complete this form. | 1 Total pages Schedule M: Sch: 1/1 Rpt: 48/48 |
| 2 FILER NAME Carter, O. Kyler (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00062560 |
| Description of Asset Apple laptop computer | |
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