

# JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM **JC/OH**  
COVER SHEET PG 1

<b>The JC/OH Instruction Guide explains how to complete this form.</b>		<b>1</b> Filer ID (Ethics Commission Filers) 00062560	<b>2</b> Total pages filed:  67				
<b>3</b> CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR The Honorable	FIRST O. Kyler	MI	<b>OFFICE USE ONLY</b>			
	NICKNAME Kyle	LAST Carter	SUFFIX		Date Received <b>ELECTRONICALLY FILED</b> 07/14/2024		
<b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE			Date Hand-delivered or Date Postmarked			
	<b>REDACTED PER 254.0313, GOV'T CODE</b>			Receipt # _____ Amount _____			
				Date Processed _____			
				Date Imaged _____			
<b>5</b> CAMPAIGN TREASURER NAME	MS / MRS / MR Mrs.	FIRST Melanie S.	MI				
	NICKNAME	LAST Carter	SUFFIX				
<b>6</b> CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE						
	<b>REDACTED PER 254.0313, GOV'T CODE</b>						
<b>7</b> CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
	(713)	227-0042					
<b>8</b> REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)						
	<input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)						
<b>9</b> PERIOD COVERED	Month	Day	Year	THROUGH	Month	Day	Year
		02/25/2024				06/30/2024	
<b>10</b> ELECTION	ELECTION DATE			ELECTION TYPE			
	Month	Day	Year	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other	
		11/05/2024		<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special		
<b>11</b> OFFICE	OFFICE HELD (if any)			<b>12</b> OFFICE SOUGHT (if known)			
	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

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**13** C / OH NAME Carter, O. Kyler (The Honorable) **14** Filer ID (Ethics Commission Filers)  
00062560

**15** NOTICE FROM POLITICAL COMMITTEE(S)  
 Additional Pages

This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

COMMITTEE TYPE	COMMITTEE NAME
<input type="checkbox"/> GENERAL	
<input type="checkbox"/> SPECIFIC	
	COMMITTEE ADDRESS
	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

<b>16</b> CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	10.00
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	96,685.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	2,242.73
	4. <b>TOTAL POLITICAL EXPENDITURES</b>	\$	180,487.63
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	84,356.08
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

**17** AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

The Honorable O. Kyler Carter  
\_\_\_\_\_  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

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

# SUBTOTALS - JC/OH

<b>18</b> FILER NAME Carter, O. Kyler (The Honorable)	<b>19</b> Filer ID (Ethics Commission Filers) 00062560
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<b>20</b> SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
NAME OF SCHEDULE		
1.	<input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$ 94,685.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 2,000.00
3.	<input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$
4.	<input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 151,377.33
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 29,110.30
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 55.71

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 1/23 Rpt: 4/67
<b>2</b> FILER NAME Carter, O. Kyler (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062560
<b>4</b> Date 05/21/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abdul, Mike	<b>7</b> Amount of Contribution (\$)  \$500.00
	<b>6</b> Contributor address; City; State; Zip Code  East Bernard, TX 77435	
<b>8</b> Contributor's Principal Occupation Owner		<b>9</b> Contributor's Job Title Owner
<b>10</b> Contributor's employer/law firm Traditions Chevrolet		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 05/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abrams, Barry	Amount of Contribution (\$)  \$2,500.00
	Contributor address; City; State; Zip Code  Houston, TX 77079	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Blank Rome LLP		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Agosto, Bernardino	Amount of Contribution (\$)  \$1,000.00
	Contributor address; City; State; Zip Code  Houston, TX 77002	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Abraham Watkins Nichols Agosto Aziz & Stogner		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 2/23 Rpt: 5/67
<b>2</b> FILER NAME Carter, O. Kyler (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062560
<b>4</b> Date 05/21/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnold, Kurt	<b>7</b> Amount of Contribution (\$) \$5,000.00
	<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77007	
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm Arnold & Itkin LLP		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 05/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beckcom, Brian	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Houston, TX 77057	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm VB Attorneys		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Birnberg, Gerald	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  Houston, TX 77024	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Law Office of Gerald M. Birnberg		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A(J)1: Sch: 3/23 Rpt: 6/67
2 FILER NAME Carter, O. Kyler (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062560
4 Date 02/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boudreaux, Olan	7 Amount of Contribution (\$)  \$250.00
	6 Contributor address; City; State; Zip Code  Houston, TX 77008	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm The Boudreaux Law Firm, P.C.		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 03/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carrigan, Mark	Amount of Contribution (\$)  \$1,000.00
	Contributor address; City; State; Zip Code  Houston, TX 77027	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Carrigan Law Firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carrigan, Mark	Amount of Contribution (\$)  \$1,000.00
	Contributor address; City; State; Zip Code  Houston, TX 77027	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Carrigan Law Group P.C.		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A(J)1: Sch: 4/23 Rpt: 7/67
2 FILER NAME Carter, O. Kyler (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062560
4 Date 02/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cienfuegos Jr., Daniel	7 Amount of Contribution (\$)  \$50.00
	6 Contributor address; City; State; Zip Code  Houston, TX 77018	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Crim & Villalpando, PC		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Robert (Mr.)	Amount of Contribution (\$)  \$5,000.00
	Contributor address; City; State; Zip Code  Houston, TX 77270	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Community for a Safer America PAC	Amount of Contribution (\$)  \$5,000.00
	Contributor address; City; State; Zip Code  Katy, TX 77494	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 5/23 Rpt: 8/67
<b>2</b> FILER NAME Carter, O. Kyler (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062560
<b>4</b> Date 05/15/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cordova, Elizabeth ..... <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77036	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Contributor's Principal Occupation Court reporter		<b>9</b> Contributor's Job Title Court reporter
<b>10</b> Contributor's employer/law firm Harris County		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 05/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cordova, Elizabeth ..... Contributor address; City; State; Zip Code  Houston, TX 77036	Amount of Contribution (\$)  \$250.00
Contributor's Principal Occupation Court reporter		Contributor's Job Title Court reporter
Contributor's employer/law firm Harris County		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 03/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dao, Andrew ..... Contributor address; City; State; Zip Code  Houston, TX 77006	Amount of Contribution (\$)  \$500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Daly & Black		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 6/23 Rpt: 9/67
<b>2</b> FILER NAME Carter, O. Kyler (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062560
<b>4</b> Date 02/26/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Das, Micky N. (Mr.)	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77024		
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm Tyler & Das		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 05/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Feldman, Cris	Amount of Contribution (\$)  \$500.00
Contributor address; City; State; Zip Code  Houston, TX 77098		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Feldman & Feldman PC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flores, Steven	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code  Humble, TX 77396		
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm Retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A(J)1: Sch: 7/23 Rpt: 10/67
2 FILER NAME Carter, O. Kyler (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062560
4 Date 03/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Chris	7 Amount of Contribution (\$) \$2,000.00
	6 Contributor address; City; State; Zip Code  Houston, TX 77019	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Chris Garcia Law Group, PC		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gray Reed & McGraw LLP	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  Houston, TX 77056	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hastings, Tommy (Mr.)	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code  The Woodlands, TX 77380	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Hastings Law Firm P.C.		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 8/23 Rpt: 11/67
<b>2</b> FILER NAME Carter, O. Kyler (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062560
<b>4</b> Date 05/06/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hawash, Michael	<b>7</b> Amount of Contribution (\$)  \$500.00
	<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77006	
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm Hawash Cicack & Gaston LLP		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 05/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Ana	Amount of Contribution (\$)  \$1,000.00
	Contributor address; City; State; Zip Code  Houston, TX 77251	
Contributor's Principal Occupation State Representative		Contributor's Job Title State Representative
Contributor's employer/law firm State of Texas		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 03/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoerster, Pamela	Amount of Contribution (\$)  \$500.00
	Contributor address; City; State; Zip Code  League City, TX 77573	
Contributor's Principal Occupation Attorney/Mediator		Contributor's Job Title Attorney/Mediator
Contributor's employer/law firm Pamela S. Hoerster		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 9/23 Rpt: 12/67
<b>2</b> FILER NAME Carter, O. Kyler (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062560
<b>4</b> Date 05/24/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Horne, Chastiti	<b>7</b> Amount of Contribution (\$) <span style="float:right">\$250.00</span>
<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77019		
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm Horne Rota Moos, LLP		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 02/28/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00027342</u> ) IBEW PAC Voluntary Fund	Amount of Contribution (\$) <span style="float:right">\$750.00</span>
Contributor address; City; State; Zip Code  Washington, DC 20001		
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Itkin, Jason	Amount of Contribution (\$) <span style="float:right">\$5,000.00</span>
Contributor address; City; State; Zip Code  Houston, TX 77007		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Arnold & Itkin LLP		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 10/23 Rpt: 13/67
<b>2</b> FILER NAME Carter, O. Kyler (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062560
<b>4</b> Date 05/07/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kherkher, Steven ..... <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77098	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm Kherkher Garcia, LLP		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 06/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kherkher, Steven ..... Contributor address; City; State; Zip Code  Houston, TX 77098	Amount of Contribution (\$)  \$1,000.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Kherkher Garcia, LLP		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 04/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kishinevsky, Leo ..... Contributor address; City; State; Zip Code  Houston, TX 77040	Amount of Contribution (\$)  \$200.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Kishinevsky Law Firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 11/23 Rpt: 14/67
<b>2</b> FILER NAME Carter, O. Kyler (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062560
<b>4</b> Date 05/16/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kishinevsky, Leo	<b>7</b> Amount of Contribution (\$)  \$200.00
	<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77040	
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm Kishinevsky Law Firm		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 05/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koerber, Nata	Amount of Contribution (\$)  \$25.00
	Contributor address; City; State; Zip Code  Houston, TX 77004	
Contributor's Principal Occupation Counselor		Contributor's Job Title Counselor
Contributor's employer/law firm City of Houston		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 03/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kretzer, Seth	Amount of Contribution (\$)  \$250.00
	Contributor address; City; State; Zip Code  Houston, TX 77002	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Law Office of Seth Kretzer		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A(J)1: Sch: 12/23 Rpt: 15/67
2 FILER NAME Carter, O. Kyler (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062560
4 Date 05/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kretzer, Seth	7 Amount of Contribution (\$)  \$250.00
	6 Contributor address; City; State; Zip Code  Houston, TX 77002	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Law Office of Seth Kretzer		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Offices of Jose R. Lopez II PC	Amount of Contribution (\$)  \$1,000.00
	Contributor address; City; State; Zip Code  Houston, TX 77007	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 06/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leavitt, Christopher	Amount of Contribution (\$)  \$500.00
	Contributor address; City; State; Zip Code  Houston, TX 77056	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A(J)1: Sch: 13/23 Rpt: 16/67
2 FILER NAME Carter, O. Kyler (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062560
4 Date 05/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leibowitz, Thomas (Mr.)	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code  Houston, TX 77063	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Thomas J. Leibowitz, Attorney at Law		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 02/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leibowitz, Thomas (Mr.)	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Houston, TX 77063	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Thomas Leibowitz, Attorney at Law		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lowery, Tillyn	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Katy, TX 77494	
Contributor's Principal Occupation Real Estate		Contributor's Job Title Founder
Contributor's employer/law firm TL Global		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A(J)1: Sch: 14/23 Rpt: 17/67
2 FILER NAME Carter, O. Kyler (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062560
4 Date 03/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maberry, Eric (Mr.)	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code  Houston, TX 77024	
8 Contributor's Principal Occupation VP		9 Contributor's Job Title VP
10 Contributor's employer/law firm Vista		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mahendru, Ashish	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code  Houston, TX 77008	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Mahendru, PC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKamie, Reginald E (Mr.)	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  Houston, TX 77219	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A(J)1: Sch: 15/23 Rpt: 18/67
2 FILER NAME Carter, O. Kyler (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062560
4 Date 03/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMillan, Chance	7 Amount of Contribution (\$)  \$2,500.00
	6 Contributor address; City; State; Zip Code  Houston, TX 77002	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm McMillan Law Firm, PLLC		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 03/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Medina, David	Amount of Contribution (\$)  \$100.00
	Contributor address; City; State; Zip Code  Houston, TX 77030	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Chamberlain Hrdlicka		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mithoff, Richard	Amount of Contribution (\$)  \$1,000.00
	Contributor address; City; State; Zip Code  Houston, TX 77002	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Mithoff Law		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 16/23 Rpt: 19/67
<b>2</b> FILER NAME Carter, O. Kyler (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062560
<b>4</b> Date 05/21/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Daryl	<b>7</b> Amount of Contribution (\$) \$1,000.00
<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77098		
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm AZA		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 05/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mundy, Dennis	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code  Tomball, TX 77375		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Narsete, Michael	Amount of Contribution (\$) \$750.00
Contributor address; City; State; Zip Code  Houston, TX 77056		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Michael S Narsette PC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 17/23 Rpt: 20/67
<b>2</b> FILER NAME Carter, O. Kyler (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062560
<b>4</b> Date 02/29/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nielsen, Eric <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77092	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm The Nielsen Law Firm, P.C.		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Padilla, John <hr/> Contributor address; City; State; Zip Code  Houston, TX 77057	Amount of Contribution (\$)  \$1,500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Padilla & Rodriguez, LLP		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Piekalkiewicz, Andrew <hr/> Contributor address; City; State; Zip Code  Houston, TX 77041	Amount of Contribution (\$)  \$5,000.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Law Offices of Andrew "Pike" Piekalkiewicz, PLLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 18/23 Rpt: 21/67
<b>2</b> FILER NAME Carter, O. Kyler (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062560
<b>4</b> Date 05/08/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pipe Fitters Local Union 211 C.O.P.E. Account <hr/> <b>6</b> Contributor address; City; State; Zip Code  Deer Park, TX 77536	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Contributor's Principal Occupation		<b>9</b> Contributor's Job Title
<b>10</b> Contributor's employer/law firm		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 05/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Plumbers Local Union No. 68 PAC Fund <hr/> Contributor address; City; State; Zip Code  Houston, TX 77249	Amount of Contribution (\$)  \$1,000.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 03/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Prather, Kelly <hr/> Contributor address; City; State; Zip Code  Houston, TX 77008	Amount of Contribution (\$)  \$500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Kelly Greenwood Prather		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 19/23 Rpt: 22/67
<b>2</b> FILER NAME Carter, O. Kyler (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062560
<b>4</b> Date 05/21/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pusch, Anthony <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77007	<b>7</b> Amount of Contribution (\$)  \$5,000.00
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm Pusch & Nguyen		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 03/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rigby, Pat <hr/> Contributor address; City; State; Zip Code  Houston, TX 77098	Amount of Contribution (\$)  \$500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Rigby & Rigby		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roth & Associates Law Group <hr/> Contributor address; City; State; Zip Code  Houston, TX 77006	Amount of Contribution (\$)  \$500.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 20/23 Rpt: 23/67
<b>2</b> FILER NAME Carter, O. Kyler (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062560
<b>4</b> Date 05/21/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seerden, Andrew <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77009	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm Seerden Law Firm		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 05/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sorrels, Randall <hr/> Contributor address; City; State; Zip Code  Houston, TX 77007	Amount of Contribution (\$)  \$1,000.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Sorrels Law		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spagnoletti Law Firm <hr/> Contributor address; City; State; Zip Code  Houston, TX 77002	Amount of Contribution (\$)  \$5,000.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 21/23 Rpt: 24/67
<b>2</b> FILER NAME Carter, O. Kyler (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062560
<b>4</b> Date 05/20/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spagnoletti, Marcus ..... <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77002	<b>7</b> Amount of Contribution (\$)  \$5,000.00
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm Spagnoletti Law Firm		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 05/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sullivan, Roger (Mr.) ..... Contributor address; City; State; Zip Code  Houston, TX 77007	Amount of Contribution (\$)  \$2,500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Brann Sullivan Trial Lawyers		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Poerschke Law Firm PC ..... Contributor address; City; State; Zip Code  Houston, TX 77079	Amount of Contribution (\$)  \$1,000.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 22/23 Rpt: 25/67
<b>2</b> FILER NAME Carter, O. Kyler (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062560
<b>4</b> Date 05/20/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, S. Scott <hr/> <b>6</b> Contributor address; City; State; Zip Code  Richmond, TX 77469	<b>7</b> Amount of Contribution (\$)  \$5,000.00
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm The West Law Firm		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 05/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wischnewsy, Darryl <hr/> Contributor address; City; State; Zip Code  Houston, TX 77034	Amount of Contribution (\$)  \$1,000.00
Contributor's Principal Occupation Owner		Contributor's Job Title Owner
Contributor's employer/law firm Bayway Auto Group		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright Close & Barger, LLP <hr/> Contributor address; City; State; Zip Code  Houston, TX 77056	Amount of Contribution (\$)  \$1,000.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A(J)1: Sch: 23/23 Rpt: 26/67
2 FILER NAME Carter, O. Kyler (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062560
4 Date 05/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zehl, Ryan (Mr.)	7 Amount of Contribution (\$) \$1,500.00
	6 Contributor address; City; State; Zip Code  Houston, TX 77056	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Zehl & Associates		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zemo, Millen	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  Houston, TX 77007	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Calpine		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 06/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zwernemann, Allen (Mr.)	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  Houston, TX 77009	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm The Zwernemann Law Firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A2: Sch: 1/1 Rpt: 27/67	
2 FILER NAME Carter, O. Kyler (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062560	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 03/15/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Latino Labor Leadership PAC	8 Amount of contribution (\$) \$2,000.00	9 In-kind contribution description GOTV text messaging
	7 Contributor address; City; State; Zip Code  Bellaire, TX 77401	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/16 Rpt: 28/67	<b>2</b> FILER NAME Carter, O. Kyle (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062560
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<b>4</b> Date 02/25/2024	<b>5</b> Payee name Aceves Communications
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<b>6</b> Amount (\$) \$45,650.50	<b>7</b> Payee address; City; State; Zip Code PO Box 6514  Houston, TX 77265
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign mailer
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/28/2024	Payee name American Express
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Amount (\$) \$764.86	Payee address; City; State; Zip Code PO Box 650448  Dallas, TX 75265-0448
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Credit Card Payment	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment of campaign expenditures
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/25/2024	Payee name American Express
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Amount (\$) \$474.60	Payee address; City; State; Zip Code PO Box 650448  Dallas, TX 75265-0448
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Credit Card Payment	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment of campaign expenditures
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 2/16 Rpt: 29/67	<b>2</b> FILER NAME Carter, O. Kyle (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062560
<b>4</b> Date 03/18/2024	<b>5</b> Payee name American Express	
<b>6</b> Amount (\$) \$6,235.95	<b>7</b> Payee address; City; State; Zip Code PO Box 650448  Dallas, TX 75265-0448	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Credit Card Payment	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment of campaign expenditures
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/29/2024	Payee name American Express	
Amount (\$) \$488.84	Payee address; City; State; Zip Code PO Box 650448  Dallas, TX 75265-0448	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment of campaign expenditures
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/30/2024	Payee name American Express	
Amount (\$) \$165.60	Payee address; City; State; Zip Code PO Box 650448  Dallas, TX 75265-0448	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment of campaign expenditures
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 3/16 Rpt: 30/67	<b>2</b> FILER NAME Carter, O. Kyle (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062560
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<b>4</b> Date 02/25/2024	<b>5</b> Payee name Baptist Ministers Association of Houston & Vicinity
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<b>6</b> Amount (\$) \$1,000.00	<b>7</b> Payee address; City; State; Zip Code 7817 Calhoun Rd  Houston, TX 77033
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense GOTV expense
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/06/2024	Payee name Beal, Malvin
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Amount (\$) \$185.00	Payee address; City; State; Zip Code 20106 Cypresswood Estates Run  Spring, TX 77088
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign materials distribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/04/2024	Payee name Beal, Malvin
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Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 20106 Cypresswood Estates Run  Spring, TX 77373
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign materials distribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F1: Sch: 4/16 Rpt: 31/67	<b>2</b>	FILER NAME Carter, O. Kyle (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00062560
<b>4</b>	Date 03/04/2024	<b>5</b>	Payee name Burks, Thyra		
<b>6</b>	Amount (\$) \$720.00	<b>7</b>	Payee address; City; State; Zip Code 5606 Beldart  Houston, TX 77033		
<b>8</b>	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign assistance/poll workers		
<b>9</b>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 03/01/2024		Payee name Burks, Thyra		
	Amount (\$) \$4,015.00		Payee address; City; State; Zip Code 5606 Beldart  Houston, TX 77033		
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign assistance/poll workers		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 03/25/2024		Payee name CLW Forty Plus Models		
	Amount (\$) \$300.00		Payee address; City; State; Zip Code Houston  Houston, TX 77002		
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sponsorship of Forty Plus Models Scholarship program		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 5/16 Rpt: 32/67	<b>2</b> FILER NAME Carter, O. Kyle (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062560
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<b>4</b> Date 03/04/2024	<b>5</b> Payee name Campaign Warriors
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<b>6</b> Amount (\$) \$1,455.00	<b>7</b> Payee address; City; State; Zip Code 14237 E Sam Houston Pkwy N Suite 200 #289 Houston, TX 77044
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign materials distribution
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/01/2024	Payee name Chan, Leana
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Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 2302 Wordsworth St  Houston, TX 77030
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/28/2024	Payee name Chase Cardmember Service
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Amount (\$) \$4,465.54	Payee address; City; State; Zip Code PO Box 94014  Palatine, IL 60094
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Credit Card Payment	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment of campaign expenditures
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F1: Sch: 6/16 Rpt: 33/67	<b>2</b>	FILER NAME Carter, O. Kyle (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00062560
<b>4</b>	Date 05/07/2024	<b>5</b>	Payee name Chase Cardmember Service		
<b>6</b>	Amount (\$) \$204.00	<b>7</b>	Payee address; City; State; Zip Code PO Box 94014  Palatine, IL 60094		
<b>8</b>	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Credit Card Payment	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment of campaign expenditures		
<b>9</b>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 04/26/2024		Payee name Chase Cardmember Service		
	Amount (\$) \$1,800.82		Payee address; City; State; Zip Code PO Box 94014  Palatine, IL 60094		
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Credit Card Payment	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment of campaign expenditures		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 03/27/2024		Payee name Chase Cardmember Service		
	Amount (\$) \$103.42		Payee address; City; State; Zip Code PO Box 94014  Palatine, IL 60094		
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Credit Card Payment	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment of campaign expenditures		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 7/16 Rpt: 34/67	<b>2</b> FILER NAME Carter, O. Kyle (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062560
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<b>4</b> Date 03/18/2024	<b>5</b> Payee name Chase Cardmember Service
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<b>6</b> Amount (\$) \$5,317.74	<b>7</b> Payee address; City; State; Zip Code PO Box 94014  Palatine, IL 60094
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Credit Card Payment	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment of campaign expenditures
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/29/2024	Payee name Chase Cardmember Service
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Amount (\$) \$5,373.43	Payee address; City; State; Zip Code PO Box 94014  Palatine, IL 60094
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Credit Card Payment	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment of campaign expenditures
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/30/2024	Payee name Chase Cardmember Service
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Amount (\$) \$3,903.91	Payee address; City; State; Zip Code PO Box 94014  Palatine, IL 60094
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Credit Card Payment	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment of campaign expenditures
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 8/16 Rpt: 35/67	<b>2</b> FILER NAME Carter, O. Kyle (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062560
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<b>4</b> Date 02/25/2024	<b>5</b> Payee name Harris County Democratic Lawyers Association
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<b>6</b> Amount (\$) \$500.00	<b>7</b> Payee address; City; State; Zip Code P.O. Box 130978  Houston, TX 77219
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sponsorship of event
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/22/2024	Payee name Houston Health Foundation
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Amount (\$) \$1,000.00	Payee address; City; State; Zip Code P.O Box 20272  Houston, TX 77225
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sponsorship of Community Reentry Network Program graduation
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/12/2024	Payee name J&N Enterprises, Inc.
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Amount (\$) \$1,067.80	Payee address; City; State; Zip Code 2519 Fairway Park Drive  Houston, TX 77092
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign push cards
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 9/16 Rpt: 36/67	<b>2</b> FILER NAME Carter, O. Kyle (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062560
<b>4</b> Date 03/05/2024	<b>5</b> Payee name James, Gianni	
<b>6</b> Amount (\$) \$1,260.00	<b>7</b> Payee address; City; State; Zip Code 8102 Conner Cove  Richmond, TX 77407	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign materials distribution
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/01/2024	Payee name Mendoza, John	
Amount (\$) \$1,190.00	Payee address; City; State; Zip Code Houston  Houston, TX 77002	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign sign placement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/12/2024	Payee name Monarch Printing Co. Inc.	
Amount (\$) \$514.18	Payee address; City; State; Zip Code 6605 McGrew  Houston, TX 77087	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign letterhead and envelopes
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 10/16 Rpt: 37/67	<b>2</b> FILER NAME Carter, O. Kyle (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062560
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<b>4</b> Date 06/05/2024	<b>5</b> Payee name Moreno, Monica (Ms.)
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<b>6</b> Amount (\$) \$1,500.00	<b>7</b> Payee address; City; State; Zip Code 4900 Fournace PI Suite 560 Bellaire, TX 77401
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor for fundraiser and campaign sign pickup
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/04/2024	Payee name Moreno, Monica (Ms.)
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Amount (\$) \$5,000.00	Payee address; City; State; Zip Code 4900 Fournace PI Suite 560 Bellaire, TX 77401
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor for campaign primary election
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/05/2024	Payee name Palmer, Gloria
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Amount (\$) \$180.00	Payee address; City; State; Zip Code 7413 N Parker Road  Houston, TX 77016
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign materials distribution/poll workers
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 11/16 Rpt: 38/67	<b>2</b> FILER NAME Carter, O. Kyle (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062560
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<b>4</b> Date 03/04/2024	<b>5</b> Payee name Palmer, Gloria
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<b>6</b> Amount (\$) \$720.00	<b>7</b> Payee address; City; State; Zip Code 7413 N Parker Road  Houston, TX 77016
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign materials distribution/poll workers
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/01/2024	Payee name Palmer, Gloria
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Amount (\$) \$5,740.00	Payee address; City; State; Zip Code 7413 N Parker Road  Houston, TX 77016
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign materials distribution/poll workers
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/25/2024	Payee name Palmer, Gloria
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Amount (\$) \$4,600.00	Payee address; City; State; Zip Code 7413 N Parker Road  Houston, TX 77016
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign materials distribution/poll workers
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 12/16 Rpt: 39/67	<b>2</b> FILER NAME Carter, O. Kyle (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062560
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<b>4</b> Date 03/08/2024	<b>5</b> Payee name Patino Strategies LLC
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<b>6</b> Amount (\$) \$8,980.50	<b>7</b> Payee address; City; State; Zip Code PO Box 925631  Houston, TX 77292
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting fees and phonebank
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/01/2024	Payee name Rivera, Mauricio
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Amount (\$) \$1,440.00	Payee address; City; State; Zip Code 8205 Pillot St  Houston, TX 77029
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign sign placement
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/27/2024	Payee name Sam's Club
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Amount (\$) \$1,075.54	Payee address; City; State; Zip Code 5310 S. Rice Ave.  Houston, TX 77081
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food and beverage costs for poll workers
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 13/16 Rpt: 40/67	<b>2</b> FILER NAME Carter, O. Kyle (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062560
<b>4</b> Date 03/05/2024	<b>5</b> Payee name Sam's Club	
<b>6</b> Amount (\$) \$3,090.93	<b>7</b> Payee address; City; State; Zip Code 5310 S. Rice Ave.  Houston, TX 77081	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food and beverage costs for poll workers
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/08/2024	Payee name Scale to Win	
Amount (\$) \$4,586.24	Payee address; City; State; Zip Code 13742 Harper Street  Santa Ana, CA 92703	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign text messaging
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/28/2024	Payee name Scale to Win	
Amount (\$) \$4,267.18	Payee address; City; State; Zip Code 13742 Harper Street  Santa Ana, CA 92703	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign text messaging
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 14/16 Rpt: 41/67	<b>2</b> FILER NAME Carter, O. Kyle (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062560
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<b>4</b> Date 03/12/2024	<b>5</b> Payee name Secceur Investigations & Security, Inc.
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<b>6</b> Amount (\$) \$6,871.00	<b>7</b> Payee address; City; State; Zip Code 23501 Cinco Ranch Blvd Ste H120-920 Katy, TX 77494
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign sign placement
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/29/2024	Payee name Stripe
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Amount (\$) \$29.30	Payee address; City; State; Zip Code 510 Townsend St  San Francisco, CA 94103
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contribution transaction fees - February
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/31/2024	Payee name Stripe
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Amount (\$) \$189.20	Payee address; City; State; Zip Code 510 Townsend St  San Francisco, CA 94103
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contribution transaction fees - March
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 15/16 Rpt: 42/67	<b>2</b> FILER NAME Carter, O. Kyle (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062560
<b>4</b> Date 04/30/2024	<b>5</b> Payee name Stripe	
<b>6</b> Amount (\$) \$78.90	<b>7</b> Payee address; City; State; Zip Code 510 Townsend St  San Francisco, CA 94103	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contribution transaction fees - April
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/31/2024	Payee name Stripe	
Amount (\$) \$1,672.93	Payee address; City; State; Zip Code 510 Townsend St  San Francisco, CA 94103	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contribution transaction fees - May
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/30/2024	Payee name Stripe	
Amount (\$) \$22.35	Payee address; City; State; Zip Code 510 Townsend St  San Francisco, CA 94103	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contribution transaction fees - June
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 16/16 Rpt: 43/67	<b>2</b> FILER NAME Carter, O. Kyle (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062560
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<b>4</b> Date 03/07/2024	<b>5</b> Payee name Uber
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<b>6</b> Amount (\$) \$317.82	<b>7</b> Payee address; City; State; Zip Code HQ1455 Market St #400 San Francisco, CA 94103
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Uber travel for poll workers
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/01/2024	Payee name VM Solutions
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Amount (\$) \$4,140.00	Payee address; City; State; Zip Code 12030 Greenrock Ln  Houston, TX 77044
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign materials distribution/poll workers
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/25/2024	Payee name VM Solutions
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Amount (\$) \$4,623.00	Payee address; City; State; Zip Code 12030 Greenrock Ln  Houston, TX 77044
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign materials distribution/poll workers
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

# 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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 1/23 Rpt: 44/67		<b>2</b> FILER NAME Carter, O. Kyle (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062560	
<b>4</b> CREDIT CARD ISSUER		Name of financial institution Chase Cardmember Service		<b>5</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,646.48	
<b>6</b> PAYMENT		(a) Amount Charged \$206.10	(b) Date of Charge 03/15/2024	(c) Date(s) Credit Card Issuer Paid 02/29/2024	
<b>7</b> PAYEE		(a) Payee name Davis, Joy		(b) Payee address; City, State, Zip Code 612 Park Trail Houston, TX 77019	
<b>8</b> PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description Campaign materials distribution	
		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
				Office held	
<b>PAYMENT</b>		(a) Amount Charged \$204.00	(b) Date of Charge 04/19/2024	(c) Date(s) Credit Card Issuer Paid 05/07/2024	
<b>PAYEE</b>		(a) Payee name USPS		(b) Payee address; City, State, Zip Code 5350 Bellaire Blvd Bellaire, TX 77401	
<b>PURPOSE OF EXPENDITURE</b>		(a) Category (See Categories listed at the top of this schedule) Postage		(b) Description Postage for campaign mailer	
		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
				Office held	
<b>PAYMENT</b>		(a) Amount Charged \$598.00	(b) Date of Charge 03/15/2024	(c) Date(s) Credit Card Issuer Paid 02/29/2024	
<b>PAYEE</b>		(a) Payee name Landers Brannon LLC		(b) Payee address; City, State, Zip Code 2900 N Quinlan Park Rd Austin, TX 78732	
<b>PURPOSE OF EXPENDITURE</b>		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Campaign website service fees	
		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
				Office held	

# EXPENDITURES MADE BY CREDIT CARD

# 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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F4: Sch: 2/23 Rpt: 45/67	<b>2</b>	FILER NAME Carter, O. Kyle (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00062560
<b>4</b>	CREDIT CARD ISSUER	Name of financial institution see previous		<b>5</b>	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,646.48
<b>6</b>	PAYMENT	(a) Amount Charged \$74.01	(b) Date of Charge 03/15/2024	(c) Date(s) Credit Card Issuer Paid 02/29/2024	
<b>7</b>	PAYEE	(a) Payee name AT&T		(b) Payee address; City, State, Zip Code 3773 Southwest Freeway Houston, TX 77027	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Wi-fi hot spot		(b) Description Wi-fi hot spot	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
<b>9</b>	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
<b>PAYMENT</b>	(a) Amount Charged \$2,259.00	(b) Date of Charge 03/15/2024	(c) Date(s) Credit Card Issuer Paid 02/29/2024		
<b>PAYEE</b>	(a) Payee name Landers Brannon LLC		(b) Payee address; City, State, Zip Code 2900 N Quinlan Park Rd Austin, TX 78732		
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Campaign website service fees		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate/Officeholder name		Office sought	Office held	
<b>PAYMENT</b>	(a) Amount Charged \$915.00	(b) Date of Charge 03/15/2024	(c) Date(s) Credit Card Issuer Paid 02/29/2024		
<b>PAYEE</b>	(a) Payee name Jewish Herald Voice		(b) Payee address; City, State, Zip Code 3403 Audley Street Houston, TX 77098		
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Campaign advertisement		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate/Officeholder name		Office sought	Office held	

# EXPENDITURES MADE BY CREDIT CARD

**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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F4: Sch: 3/23 Rpt: 46/67	<b>2</b>	FILER NAME Carter, O. Kyle (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00062560
<b>4</b>	CREDIT CARD ISSUER	Name of financial institution see previous		<b>5</b>	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,646.48
<b>6</b>	PAYMENT	(a) Amount Charged \$190.90	(b) Date of Charge 03/15/2024	(c) Date(s) Credit Card Issuer Paid 02/29/2024	
<b>7</b>	PAYEE	(a) Payee name Home Depot		(b) Payee address; City, State, Zip Code 5445 West Loop Houston, TX 77081	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Campaign sign supplies	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
<b>9</b>	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
<b>6</b>	PAYMENT	(a) Amount Charged \$500.00	(b) Date of Charge 02/26/2024	(c) Date(s) Credit Card Issuer Paid 02/29/2024	
<b>7</b>	PAYEE	(a) Payee name Community Justice		(b) Payee address; City, State, Zip Code 4711 Yoakum Houston, TX 77006	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description GOTV expense	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
<b>9</b>	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
<b>6</b>	PAYMENT	(a) Amount Charged \$272.66	(b) Date of Charge 03/01/2024	(c) Date(s) Credit Card Issuer Paid 03/18/2024	
<b>7</b>	PAYEE	(a) Payee name Taco Cabana		(b) Payee address; City, State, Zip Code 11079 Westheimer Rd Houston, TX 77042	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Food for teachers luncheon	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
<b>9</b>	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held

# EXPENDITURES MADE BY CREDIT CARD

# 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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F4: Sch: 4/23 Rpt: 47/67	<b>2</b>	FILER NAME Carter, O. Kyle (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00062560
<b>4</b>	CREDIT CARD ISSUER	Name of financial institution see previous		<b>5</b>	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,646.48
<b>6</b>	PAYMENT	(a) Amount Charged \$153.00	(b) Date of Charge 03/03/2024	(c) Date(s) Credit Card Issuer Paid 03/18/2024	
<b>7</b>	PAYEE	(a) Payee name Public Storage		(b) Payee address; City, State, Zip Code 5200 Gulfton Drive Houston, TX 77081	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Campaign storage facility fee	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
<b>9</b>	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
<b>PAYMENT</b>	(a) Amount Charged \$500.00	(b) Date of Charge 03/01/2024	(c) Date(s) Credit Card Issuer Paid 03/18/2024		
<b>PAYEE</b>	(a) Payee name Lillie Schechter Consulting	(b) Payee address; City, State, Zip Code 1 Greenway Plaza Ste 740 Houston, TX 77046			
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description Campaign consulting fee		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	
<b>PAYMENT</b>	(a) Amount Charged \$385.23	(b) Date of Charge 03/14/2024	(c) Date(s) Credit Card Issuer Paid 03/18/2024		
<b>PAYEE</b>	(a) Payee name Costco	(b) Payee address; City, State, Zip Code 3836 Richmond Ave Houston, TX 77027			
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Officeholder expense - snacks for jurors		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	

# EXPENDITURES MADE BY CREDIT CARD

# 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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F4: Sch: 5/23 Rpt: 48/67	<b>2</b>	FILER NAME Carter, O. Kyle (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00062560
<b>4</b>	CREDIT CARD ISSUER	Name of financial institution see previous		<b>5</b>	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,646.48
<b>6</b>	PAYMENT	(a) Amount Charged \$70.07	(b) Date of Charge 03/15/2024	(c) Date(s) Credit Card Issuer Paid 02/29/2024	
<b>7</b>	PAYEE	(a) Payee name Home Depot		(b) Payee address; City, State, Zip Code 5445 West Loop Houston, TX 77081	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Campaign sign supplies	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
<b>9</b>	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
<b>6</b>	PAYMENT	(a) Amount Charged \$250.00	(b) Date of Charge 03/15/2024	(c) Date(s) Credit Card Issuer Paid 04/26/2024	
<b>7</b>	PAYEE	(a) Payee name Allies in Hope		(b) Payee address; City, State, Zip Code 2328 Fannin St Houston, TX 77002	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description Contribution to 501(c)(3) organization	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
<b>9</b>	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
<b>6</b>	PAYMENT	(a) Amount Charged \$309.00	(b) Date of Charge 03/24/2024	(c) Date(s) Credit Card Issuer Paid 04/26/2024	
<b>7</b>	PAYEE	(a) Payee name Mt Pleasant Baptist Church		(b) Payee address; City, State, Zip Code 4819 Hershe St Houston, TX 77020	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description Contribution for church community event	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
<b>9</b>	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held

# EXPENDITURES MADE BY CREDIT CARD

# 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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F4: Sch: 6/23 Rpt: 49/67	<b>2</b>	FILER NAME Carter, O. Kyle (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00062560
<b>4</b>	CREDIT CARD ISSUER	Name of financial institution see previous		<b>5</b>	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,646.48
<b>6</b>	PAYMENT	(a) Amount Charged \$159.90	(b) Date of Charge 03/01/2024	(c) Date(s) Credit Card Issuer Paid 03/18/2024	
<b>7</b>	PAYEE	(a) Payee name NGP Van, Inc		(b) Payee address; City, State, Zip Code 655 15th St. NW, Suite 650 Washington, DC 20005	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description VAN fees	
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense					
<b>9</b>	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
<b>PAYMENT</b>	(a) Amount Charged \$1,029.30	(b) Date of Charge 03/01/2024	(c) Date(s) Credit Card Issuer Paid 03/18/2024		
<b>PAYEE</b>	(a) Payee name Davis, Joy	(b) Payee address; City, State, Zip Code 612 Park Trail Houston, TX 77019			
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description Contract labor		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	
<b>PAYMENT</b>	(a) Amount Charged \$64.91	(b) Date of Charge 03/03/2024	(c) Date(s) Credit Card Issuer Paid 03/18/2024		
<b>PAYEE</b>	(a) Payee name Adobe	(b) Payee address; City, State, Zip Code 11501 Domain Drive Austin, TX 78758			
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description Campaign software fee		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	

# EXPENDITURES MADE BY CREDIT CARD

# SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By -	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F4: Sch: 7/23 Rpt: 50/67	<b>2</b>	FILER NAME Carter, O. Kyle (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00062560
<b>4</b>	<b>CREDIT CARD ISSUER</b>	Name of financial institution see previous		<b>5</b>	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,646.48
<b>6</b>	<b>PAYMENT</b>	(a) Amount Charged \$781.03	(b) Date of Charge 03/06/2024	(c) Date(s) Credit Card Issuer Paid 03/18/2024	
<b>7</b>	<b>PAYEE</b>	(a) Payee name Pitch 25		(b) Payee address; City, State, Zip Code 2120 Walker St Houston, TX 77003	
<b>8</b>	<b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(b) Description Food and beverage for primary election watch party	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b>	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
<b>PAYMENT</b>	(a) Amount Charged \$1,680.47	(b) Date of Charge 03/07/2024	(c) Date(s) Credit Card Issuer Paid 03/18/2024		
<b>PAYEE</b>	(a) Payee name Public Storage		(b) Payee address; City, State, Zip Code 5200 Gulfton Drive Houston, TX 77081		
<b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(b) Description Campaign storage facility fee		
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	Office held
<b>PAYMENT</b>	(a) Amount Charged \$74.01	(b) Date of Charge 03/21/2024	(c) Date(s) Credit Card Issuer Paid 04/26/2024		
<b>PAYEE</b>	(a) Payee name AT&T		(b) Payee address; City, State, Zip Code 3773 Southwest Freeway Houston, TX 77027		
<b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Wifi <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(b) Description Wifi hotspot for campaign		
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	Office held

# EXPENDITURES MADE BY CREDIT CARD

## 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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 8/23 Rpt: 51/67	<b>2</b> FILER NAME Carter, O. Kyle (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062560
<b>4</b> CREDIT CARD ISSUER	Name of financial institution see previous	<b>5</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,646.48
<b>6</b> PAYMENT	(a) Amount Charged \$159.90	(b) Date of Charge 04/01/2024
<b>7</b> PAYEE	(a) Payee name NGP Van, Inc	(c) Date(s) Credit Card Issuer Paid 04/26/2024
<b>8</b> PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description VAN fees
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
<b>PAYMENT</b>	(a) Amount Charged \$64.91	(b) Date of Charge 04/03/2024
<b>PAYEE</b>	(a) Payee name Adobe	(c) Date(s) Credit Card Issuer Paid 04/26/2024
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Payee address;                      City,                      State,                      Zip Code 11501 Domain Drive Austin, TX 78758
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
<b>PAYMENT</b>	(a) Amount Charged \$500.00	(b) Date of Charge 04/24/2024
<b>PAYEE</b>	(a) Payee name Netherland-America Foundation	(c) Date(s) Credit Card Issuer Paid 05/28/2024
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Payee address;                      City,                      State,                      Zip Code 505 8th Avenue, Suite 12A-05 New York, NY 10018	(b) Description Contribution to 501(c)(3) organization
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F4: Sch: 9/23 Rpt: 52/67	<b>2</b>	FILER NAME Carter, O. Kyle (The Honorable)		<b>3</b>	Filer ID (Ethics Commission Filers) 00062560
<b>4</b>	CREDIT CARD ISSUER	Name of financial institution see previous		<b>5</b>	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 1,646.48
<b>6</b>	PAYMENT	(a) Amount Charged \$366.59	(b) Date of Charge 04/25/2024	(c) Date(s) Credit Card Issuer Paid 05/28/2024		
<b>7</b>	PAYEE	(a) Payee name El Tiempo Cantina		(b) Payee address; City, State, Zip Code 2910 Navigation Blvd Houston, TX 77003		
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Officeholder expense - lunch for staff		
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b>	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	
<b>PAYMENT</b>	(a) Amount Charged \$153.00	(b) Date of Charge 04/03/2024	(c) Date(s) Credit Card Issuer Paid 04/26/2024			
<b>PAYEE</b>	(a) Payee name Public Storage		(b) Payee address; City, State, Zip Code 5200 Gulfton Drive Houston, TX 77081			
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Campaign storage facility fee			
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held		
<b>PAYMENT</b>	(a) Amount Charged \$250.00	(b) Date of Charge 04/04/2024	(c) Date(s) Credit Card Issuer Paid 04/26/2024			
<b>PAYEE</b>	(a) Payee name Texas Board of Legal		(b) Payee address; City, State, Zip Code 505 E Huntland Drive #400 Austin, TX 78752			
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description Officeholder expense - fees			
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held		

# EXPENDITURES MADE BY CREDIT CARD

# 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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 10/23 Rpt: 53/67	<b>2</b> FILER NAME Carter, O. Kyle (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062560
<b>4</b> CREDIT CARD ISSUER	Name of financial institution see previous		<b>5</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,646.48
<b>6</b> PAYMENT	(a) Amount Charged \$500.00	(b) Date of Charge 04/06/2024	(c) Date(s) Credit Card Issuer Paid 04/26/2024
<b>7</b> PAYEE	(a) Payee name Lillie Schechter Consulting	(b) Payee address; City, State, Zip Code 1 Greenway Plaza Ste 740 Houston, TX 77046	
<b>8</b> PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description Campaign consulting fee
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
<b>PAYMENT</b>	(a) Amount Charged \$1,664.00	(b) Date of Charge 04/18/2024	(c) Date(s) Credit Card Issuer Paid 05/28/2024
<b>PAYEE</b>	(a) Payee name Houston Bar Association	(b) Payee address; City, State, Zip Code 1001 Fannin Ste 1300 Houston, TX 77002	
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description Table for annual dinner
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
<b>PAYMENT</b>	(a) Amount Charged \$74.01	(b) Date of Charge 04/20/2024	(c) Date(s) Credit Card Issuer Paid 05/28/2024
<b>PAYEE</b>	(a) Payee name AT&T	(b) Payee address; City, State, Zip Code 3773 Southwest Freeway Houston, TX 77027	
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Wifi		(b) Description Wifi hotspot for campaign
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

# EXPENDITURES MADE BY CREDIT CARD

# 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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 11/23 Rpt: 54/67		<b>2</b> FILER NAME Carter, O. Kyle (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062560	
<b>4</b> CREDIT CARD ISSUER		Name of financial institution see previous		<b>5</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,646.48	
<b>6</b> PAYMENT		(a) Amount Charged \$525.00	(b) Date of Charge 04/30/2024	(c) Date(s) Credit Card Issuer Paid 05/28/2024	
<b>7</b> PAYEE		(a) Payee name The Garland R Walker American		(b) Payee address; City, State, Zip Code 700 Milam Street Suite 800 Houston, TX 77002	
<b>8</b> PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description Table for annual awards dinner	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
				Office held	
<b>PAYMENT</b>		(a) Amount Charged \$159.90	(b) Date of Charge 05/01/2024	(c) Date(s) Credit Card Issuer Paid 05/28/2024	
<b>PAYEE</b>		(a) Payee name NGP Van, Inc		(b) Payee address; City, State, Zip Code 655 15th St. NW, Suite 650 Washington, DC 20005	
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description VAN fees	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
				Office held	
<b>PAYMENT</b>		(a) Amount Charged \$500.00	(b) Date of Charge 05/01/2024	(c) Date(s) Credit Card Issuer Paid 05/28/2024	
<b>PAYEE</b>		(a) Payee name Lillie Schechter Consulting		(b) Payee address; City, State, Zip Code 1 Greenway Plaza Ste 740 Houston, TX 77046	
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description Campaign consulting fee	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
				Office held	

# EXPENDITURES MADE BY CREDIT CARD

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F4: Sch: 12/23 Rpt: 55/67	<b>2</b>	FILER NAME Carter, O. Kyle (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00062560
<b>4</b>	CREDIT CARD ISSUER	Name of financial institution see previous		<b>5</b>	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,646.48
<b>6</b>	PAYMENT	(a) Amount Charged \$153.00	(b) Date of Charge 05/03/2024	(c) Date(s) Credit Card Issuer Paid 06/28/2024	
<b>7</b>	PAYEE	(a) Payee name Public Storage		(b) Payee address; City, State, Zip Code 5200 Gulfon Drive Houston, TX 77081	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Campaign storage facility fee	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
<b>9</b>	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
<b>PAYMENT</b>	(a) Amount Charged \$2,743.25	(b) Date of Charge 05/21/2024	(c) Date(s) Credit Card Issuer Paid 06/30/2024		
<b>PAYEE</b>	(a) Payee name Tony's Restaurant	(b) Payee address; City, State, Zip Code 3755 Richmond Houston, TX 77046			
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Food and beverage for campaign fundraiser event		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	
<b>PAYMENT</b>	(a) Amount Charged \$153.00	(b) Date of Charge 06/03/2024	(c) Date(s) Credit Card Issuer Paid 06/30/2024		
<b>PAYEE</b>	(a) Payee name Public Storage	(b) Payee address; City, State, Zip Code 5200 Gulfon Drive Houston, TX 77081			
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Campaign storage facility fee		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	

# EXPENDITURES MADE BY CREDIT CARD

# 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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F4: Sch: 13/23 Rpt: 56/67	<b>2</b>	FILER NAME Carter, O. Kyle (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00062560
<b>4</b>	<b>CREDIT CARD ISSUER</b>	Name of financial institution see previous		<b>5</b>	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,646.48
<b>6</b>	<b>PAYMENT</b>	(a) Amount Charged \$260.00	(b) Date of Charge 06/01/2024	(c) Date(s) Credit Card Issuer Paid 06/30/2024	
<b>7</b>	<b>PAYEE</b>	(a) Payee name Houston Bar Association		(b) Payee address; City, State, Zip Code 1001 Fannin Ste 1300 Houston, TX 77002	
<b>8</b>	<b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Advertising Expense <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(b) Description Sponsorship for event	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
<b>9</b>	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
<b>PAYMENT</b>	(a) Amount Charged \$290.18	(b) Date of Charge 05/01/2024	(c) Date(s) Credit Card Issuer Paid 05/28/2024		
<b>PAYEE</b>	(a) Payee name Costco		(b) Payee address; City, State, Zip Code 3836 Richmond Ave Houston, TX 77027		
<b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(b) Description Officeholder expense - snacks for jurors		
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	Office held
<b>PAYMENT</b>	(a) Amount Charged \$64.91	(b) Date of Charge 05/03/2024	(c) Date(s) Credit Card Issuer Paid 05/28/2024		
<b>PAYEE</b>	(a) Payee name Adobe		(b) Payee address; City, State, Zip Code 11501 Domain Drive Austin, TX 78758		
<b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Fees <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(b) Description Campaign software fee		
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	Office held

# EXPENDITURES MADE BY CREDIT CARD

**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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F4: Sch: 14/23 Rpt: 57/67	<b>2</b> FILER NAME Carter, O. Kyle (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062560
<b>4</b>	<b>CREDIT CARD ISSUER</b> Name of financial institution see previous	<b>5</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,646.48	
<b>6</b>	<b>PAYMENT</b> (a) Amount Charged \$13.60	(b) Date of Charge 05/07/2024	(c) Date(s) Credit Card Issuer Paid 05/28/2024
<b>7</b>	<b>PAYEE</b> (a) Payee name USPS	(b) Payee address; City, State, Zip Code 5350 Bellaire Blvd Bellaire, TX 77401	
<b>8</b>	<b>PURPOSE OF EXPENDITURE</b> (a) Category (See Categories listed at the top of this schedule) Postage  <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(b) Description Postage for campaign mailer	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b>	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
<b>PAYMENT</b>	(a) Amount Charged \$74.02	(b) Date of Charge 05/20/2024	(c) Date(s) Credit Card Issuer Paid 06/30/2024
<b>PAYEE</b>	(a) Payee name AT&T	(b) Payee address; City, State, Zip Code 3773 Southwest Freeway Houston, TX 77027	
<b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Wifi  <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(b) Description Wifi hotspot for campaign	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
<b>PAYMENT</b>	(a) Amount Charged \$500.00	(b) Date of Charge 06/01/2024	(c) Date(s) Credit Card Issuer Paid 06/30/2024
<b>PAYEE</b>	(a) Payee name Lillie Schechter Consulting	(b) Payee address; City, State, Zip Code 1 Greenway Plaza Ste 740 Houston, TX 77046	
<b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Consulting Expense  <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(b) Description Campaign consulting fee	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

# EXPENDITURES MADE BY CREDIT CARD

# 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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F4: Sch: 15/23 Rpt: 58/67	<b>2</b>	FILER NAME Carter, O. Kyle (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00062560
<b>4</b>	<b>CREDIT CARD ISSUER</b>	Name of financial institution see previous		<b>5</b>	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,646.48
<b>6</b>	<b>PAYMENT</b>	(a) Amount Charged \$64.91	(b) Date of Charge 06/03/2024	(c) Date(s) Credit Card Issuer Paid 06/30/2024	
<b>7</b>	<b>PAYEE</b>	(a) Payee name Adobe		(b) Payee address; City, State, Zip Code 11501 Domain Drive Austin, TX 78758	
<b>8</b>	<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description Campaign software fee	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
<b>9</b>	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
<b>PAYMENT</b>	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer Paid		
<b>PAYEE</b>	(a) Payee name	(b) Payee address; City, State, Zip Code			
<b>PURPOSE OF EXPENDITURE</b> <input type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule)		(b) Description		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	
<b>PAYMENT</b>	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer Paid		
<b>PAYEE</b>	(a) Payee name	(b) Payee address; City, State, Zip Code			
<b>PURPOSE OF EXPENDITURE</b> <input type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule)		(b) Description		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	

# EXPENDITURES MADE BY CREDIT CARD

**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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F4: Sch: 16/23 Rpt: 59/67	<b>2</b>	FILER NAME Carter, O. Kyle (The Honorable)		<b>3</b>	Filer ID (Ethics Commission Filers) 00062560
<b>4</b>	<b>CREDIT CARD ISSUER</b>	Name of financial institution American Express		<b>5</b>	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 1,646.48
<b>6</b>	<b>PAYMENT</b>	(a) Amount Charged \$556.20	(b) Date of Charge 03/02/2024	(c) Date(s) Credit Card Issuer Paid 03/18/2024		
<b>7</b>	<b>PAYEE</b>	(a) Payee name Shepard, Burnita		(b) Payee address; City, State, Zip Code 901 Conklin St Houston, TX 77088		
<b>8</b>	<b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description Campaign materials distribution		
		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b>	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	
<b>PAYMENT</b>	(a) Amount Charged \$852.84	(b) Date of Charge 03/10/2024	(c) Date(s) Credit Card Issuer Paid 03/18/2024			
<b>PAYEE</b>	(a) Payee name Morera, Vilma		(b) Payee address; City, State, Zip Code 12030 Greenrock Lane Houston, TX 77044			
<b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description Campaign materials distribution/poll workers			
		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	
<b>PAYMENT</b>	(a) Amount Charged \$53.30	(b) Date of Charge 03/12/2024	(c) Date(s) Credit Card Issuer Paid 03/18/2024			
<b>PAYEE</b>	(a) Payee name Zoom		(b) Payee address; City, State, Zip Code 55 Almaden Boulevard San Jose, CA 95113			
<b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description Zoom fees			
		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	

# EXPENDITURES MADE BY CREDIT CARD

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F4: Sch: 17/23 Rpt: 60/67	<b>2</b>	FILER NAME Carter, O. Kyle (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00062560
<b>4</b>	CREDIT CARD ISSUER	Name of financial institution see previous		<b>5</b>	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,646.48
<b>6</b>	PAYMENT	(a) Amount Charged \$32.46	(b) Date of Charge 03/14/2024	(c) Date(s) Credit Card Issuer Paid 03/18/2024	
<b>7</b>	PAYEE	(a) Payee name Landers Brannon LLC		(b) Payee address; City, State, Zip Code 2900 N Quinlan Park Rd Austin, TX 78732	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Campaign website fees	
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense					
<b>9</b>	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
<b>PAYMENT</b>	(a) Amount Charged \$741.60	(b) Date of Charge 03/14/2024	(c) Date(s) Credit Card Issuer Paid 03/18/2024		
<b>PAYEE</b>	(a) Payee name Maldonado, Antonio		(b) Payee address; City, State, Zip Code 6814 Evans St Houston, TX 77061		
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description Campaign materials distribution		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	
<b>PAYMENT</b>	(a) Amount Charged \$32.46	(b) Date of Charge 03/15/2024	(c) Date(s) Credit Card Issuer Paid 04/25/2024		
<b>PAYEE</b>	(a) Payee name Landers Brannon LLC		(b) Payee address; City, State, Zip Code 2900 N Quinlan Park Rd Austin, TX 78732		
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Campaign website fees		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	

# EXPENDITURES MADE BY CREDIT CARD

# 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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F4: Sch: 18/23 Rpt: 61/67	<b>2</b>	FILER NAME Carter, O. Kyle (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00062560
<b>4</b>	CREDIT CARD ISSUER	Name of financial institution see previous		<b>5</b>	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,646.48
<b>6</b>	PAYMENT	(a) Amount Charged \$309.00	(b) Date of Charge 04/06/2024	(c) Date(s) Credit Card Issuer Paid 04/25/2024	
<b>7</b>	PAYEE	(a) Payee name Levine, Burt		(b) Payee address; City, State, Zip Code 9600 Glenfield Court 148 Houston, TX 77096	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description Campaign contract labor	
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense					
<b>9</b>	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
<b>PAYMENT</b>	(a) Amount Charged \$324.45	(b) Date of Charge 05/08/2024	(c) Date(s) Credit Card Issuer Paid 05/28/2024		
<b>PAYEE</b>	(a) Payee name Yahoo		(b) Payee address; City, State, Zip Code 701 1st Ave. Sunnyvale, CA 94089		
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Campaign website hosting fees		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	
<b>PAYMENT</b>	(a) Amount Charged \$21.48	(b) Date of Charge 06/09/2024	(c) Date(s) Credit Card Issuer Paid 06/30/2024		
<b>PAYEE</b>	(a) Payee name Yahoo		(b) Payee address; City, State, Zip Code 701 1st Ave. Sunnyvale, CA 94089		
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Campaign website hosting fees		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	

# EXPENDITURES MADE BY CREDIT CARD

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F4: Sch: 19/23 Rpt: 62/67	<b>2</b>	FILER NAME Carter, O. Kyle (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00062560
<b>4</b>	CREDIT CARD ISSUER	Name of financial institution see previous		<b>5</b>	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,646.48
<b>6</b>	PAYMENT	(a) Amount Charged \$53.30	(b) Date of Charge 06/12/2024	(c) Date(s) Credit Card Issuer Paid 06/30/2024	
<b>7</b>	PAYEE	(a) Payee name Zoom		(b) Payee address; City, State, Zip Code 55 Almaden Boulevard San Jose, CA 95113	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description Zoom fees	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
<b>9</b>	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
<b>PAYMENT</b>	(a) Amount Charged \$488.84	(b) Date of Charge 02/25/2024	(c) Date(s) Credit Card Issuer Paid 02/29/2024		
<b>PAYEE</b>	(a) Payee name Chan, Leana	(b) Payee address; City, State, Zip Code 2302 Wordsworth St Houston, TX 77030			
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description Campaign staff		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	
<b>PAYMENT</b>	(a) Amount Charged \$515.00	(b) Date of Charge 03/01/2024	(c) Date(s) Credit Card Issuer Paid 03/18/2024		
<b>PAYEE</b>	(a) Payee name Koerber, Nata	(b) Payee address; City, State, Zip Code 3110 Southmore Blvd. Houston, TX 77004			
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description Consulting fee		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	

# EXPENDITURES MADE BY CREDIT CARD

**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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F4: Sch: 20/23 Rpt: 63/67	<b>2</b>	FILER NAME Carter, O. Kyle (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00062560
<b>4</b>	<b>CREDIT CARD ISSUER</b>	Name of financial institution see previous		<b>5</b>	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,646.48
<b>6</b>	<b>PAYMENT</b>	(a) Amount Charged \$618.00	(b) Date of Charge 03/01/2024	(c) Date(s) Credit Card Issuer Paid 03/18/2024	
<b>7</b>	<b>PAYEE</b>	(a) Payee name Levine, Burt		(b) Payee address; City, State, Zip Code 9600 Glenfield Court 148 Houston, TX 77096	
<b>8</b>	<b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(b) Description Campaign contract labor	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b>	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
<b>PAYMENT</b>	(a) Amount Charged \$1,222.80	(b) Date of Charge 03/01/2024	(c) Date(s) Credit Card Issuer Paid 03/18/2024		
<b>PAYEE</b>	(a) Payee name Maldonado, Antonio		(b) Payee address; City, State, Zip Code 6814 Evans St Houston, TX 77061		
<b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(b) Description Campaign materials distribution		
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	Office held
<b>PAYMENT</b>	(a) Amount Charged \$53.30	(b) Date of Charge 04/12/2024	(c) Date(s) Credit Card Issuer Paid 04/25/2024		
<b>PAYEE</b>	(a) Payee name Zoom		(b) Payee address; City, State, Zip Code 55 Almaden Boulevard San Jose, CA 95113		
<b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Event Expense <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(b) Description Zoom fees		
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	Office held

# EXPENDITURES MADE BY CREDIT CARD

# 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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 21/23 Rpt: 64/67		<b>2</b> FILER NAME Carter, O. Kyle (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062560	
<b>4</b> CREDIT CARD ISSUER		Name of financial institution see previous		<b>5</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,646.48	
<b>6</b> PAYMENT		(a) Amount Charged \$243.31	(b) Date of Charge 04/08/2024	(c) Date(s) Credit Card Issuer Paid 05/28/2024	
<b>7</b> PAYEE		(a) Payee name Demeris Barbeque		(b) Payee address; City, State, Zip Code 2911 S Shepherd Dr Houston, TX 77098	
<b>8</b> PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Officeholder expense - lunch with office staff	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
				Office held	
<b>PAYMENT</b>		(a) Amount Charged \$32.46	(b) Date of Charge 04/15/2024	(c) Date(s) Credit Card Issuer Paid 05/28/2024	
<b>PAYEE</b>		(a) Payee name Landers Brannon LLC		(b) Payee address; City, State, Zip Code 2900 N Quinlan Park Rd Austin, TX 78732	
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Campaign website fees	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
				Office held	
<b>PAYMENT</b>		(a) Amount Charged \$52.98	(b) Date of Charge 04/23/2024	(c) Date(s) Credit Card Issuer Paid 05/28/2024	
<b>PAYEE</b>		(a) Payee name Yahoo		(b) Payee address; City, State, Zip Code 701 1st Ave. Sunnyvale, CA 94089	
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Campaign website hosting fees	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
				Office held	

# EXPENDITURES MADE BY CREDIT CARD

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F4: Sch: 22/23 Rpt: 65/67	<b>2</b>	FILER NAME Carter, O. Kyle (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00062560
<b>4</b>	CREDIT CARD ISSUER	Name of financial institution see previous		<b>5</b>	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,646.48
<b>6</b>	PAYMENT	(a) Amount Charged \$21.48	(b) Date of Charge 04/09/2024	(c) Date(s) Credit Card Issuer Paid 04/25/2024	
<b>7</b>	PAYEE	(a) Payee name Yahoo		(b) Payee address; City, State, Zip Code 701 1st Ave. Sunnyvale, CA 94089	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Campaign website hosting fees	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b>	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
<b>PAYMENT</b>	(a) Amount Charged \$21.48	(b) Date of Charge 03/09/2024	(c) Date(s) Credit Card Issuer Paid 03/18/2024		
<b>PAYEE</b>	(a) Payee name Yahoo		(b) Payee address; City, State, Zip Code 701 1st Ave. Sunnyvale, CA 94089		
<b>PURPOSE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Campaign website hosting fees	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	
<b>PAYMENT</b>	(a) Amount Charged \$53.30	(b) Date of Charge 05/12/2024	(c) Date(s) Credit Card Issuer Paid 05/28/2024		
<b>PAYEE</b>	(a) Payee name Zoom		(b) Payee address; City, State, Zip Code 55 Almaden Boulevard San Jose, CA 95113		
<b>PURPOSE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description Zoom fees	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	

# EXPENDITURES MADE BY CREDIT CARD

**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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F4: Sch: 23/23 Rpt: 66/67	<b>2</b>	FILER NAME Carter, O. Kyle (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00062560
<b>4</b>	CREDIT CARD ISSUER	Name of financial institution see previous		<b>5</b>	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,646.48
<b>6</b>	PAYMENT	(a) Amount Charged \$32.46	(b) Date of Charge 05/15/2024	(c) Date(s) Credit Card Issuer Paid 06/30/2024	
<b>7</b>	PAYEE	(a) Payee name Landers Brannon LLC		(b) Payee address; City, State, Zip Code 2900 N Quinlan Park Rd Austin, TX 78732	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Campaign website fees	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b>	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
<b>PAYMENT</b>	(a) Amount Charged \$1,220.55	(b) Date of Charge 03/01/2024	(c) Date(s) Credit Card Issuer Paid 03/18/2024		
<b>PAYEE</b>	(a) Payee name Neely, Cedric		(b) Payee address; City, State, Zip Code 10402 Castleton St Houston, TX 77016		
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description Campaign materials distribution		
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	Office held

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

SCHEDULE K

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule K: Sch: 1/1 Rpt: 67/67
<b>2</b> FILER NAME Carter, O. Kyler (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062560
<b>4</b> Date 02/29/2024	<b>5</b> Name of person from whom amount is received Prosperity Bank <hr/> <b>6</b> Address of person from whom amount is received; City; State; Zip Code  Houston, TX 77007	<b>8</b> Amount (\$)  \$34.41
<b>7</b> Purpose for which amount is received Interest on campaign checking account <input type="checkbox"/> Check if political contribution returned to filer		
Date 03/31/2024	Name of person from whom amount is received Prosperity Bank <hr/> Address of person from whom amount is received; City; State; Zip Code  Houston, TX 77007	Amount (\$)  \$4.65
Purpose for which amount is received Interest on campaign checking account <input type="checkbox"/> Check if political contribution returned to filer		
Date 04/30/2024	Name of person from whom amount is received Prosperity Bank <hr/> Address of person from whom amount is received; City; State; Zip Code  Houston, TX 77007	Amount (\$)  \$1.91
Purpose for which amount is received Interest on campaign checking account <input type="checkbox"/> Check if political contribution returned to filer		
Date 05/31/2024	Name of person from whom amount is received Prosperity Bank <hr/> Address of person from whom amount is received; City; State; Zip Code  Houston, TX 77007	Amount (\$)  \$4.51
Purpose for which amount is received Interest on campaign checking account <input type="checkbox"/> Check if political contribution returned to filer		
Date 06/30/2024	Name of person from whom amount is received Prosperity Bank <hr/> Address of person from whom amount is received; City; State; Zip Code  Houston, TX 77007	Amount (\$)  \$10.23
Purpose for which amount is received Interest on campaign checking account <input type="checkbox"/> Check if political contribution returned to filer		