### CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

### FORM C/OH COVER SHEET PG 1

Th	e C/OH Instruction (	Guide explains how to compl	ete this form.	1 Filer I (Ethics 0006	Commission Filers)		2 Total pages file	
3	CANDIDATE /	MS / MRS / MR	FIRST			MI		ISE ONLY
	OFFICEHOLDER	The Honorable	Kyle J.					
1	NAME		,				Date Received	
							ELECTRONICA	LLY FILED
		NICKNAME	LAST			SUFFIX	01/15/2025	
			Kacal					
				τ			Date Hand-delivered or	Date Postmarked
4	CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; APT	/ SUITE #, CI	ΙΥ,		ZIP CODE	Date Hand-delivered of	Date i Ostinarkeu
	MAILING	PO Box 6628					Receipt #	Amount
	ADDRESS							Amount
	Change of Address	College Station, TX 77805	5				Date Processed	
							Date 110003300	
							Date Imaged	
							Dute mugeu	
5	CAMPAIGN	MS / MRS / MR	FIRST			MI		
ľ	TREASURER					IVII		
	NAME							
		NICKNAME	LAST			SUFFIX		
6	CAMPAIGN	STREET ADDRESS (NO PC	BOX PLEASE);		APT / SUITE	#; CITY;	STA	TE; ZIP CODE
	TREASURER ADDRESS							
	(Residence or Business)							
7	CAMPAIGN	AREA CODE PHON	NE NUMBER	EXTENSIC	N			
	TREASURER							
	PHONE							
8	REPORT							
	TYPE	X January 15	30th day befor	e election	Runoff		15th day after can	
			_				appointment (offic	
		July 15	8th day before	election	Exceeded reporting		Final Report (Atta	ch C/OH-FR)
9	PERIOD	Month Day Year			M	onth Day	Year	
	COVERED	07/01/2024	Т	HROUGH		12/31/2024	4	
10	ELECTION	ELECTION DATE			ELEC	TION TYPE		
		Month Day Year		Primary	Ru	noff	Other	
				General	☐ Sp	ecial		
H11	OFFICE	OFFICE HELD (if any)	I		12 05	ICE SOUGHT	(if known)	
1	OFFICE	State Representative Dist	rict 12				ative District 12	
1		State Representative Dist	1101 12		Sid			
L								
1								
1			GO	TO PAG	Ξ2			
	me provided by Te	vas Ethics Commission	1404041 -	thice state			Voreio	n V4.1.0.5dd2ace2
	ins provided by Te	xas Ethics Commission	www.e	thics.state	.ix.us		versio	11 v4.1.0.5002ace2

### CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

#### FORM C/OH COVER SHEET PG 2 2 of 18

13 C / OH NAME	Kacal, Kyle J. (The H	onorable)	14 Filer ID 00067801	(Ethics Commis	sion Filers)				
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without to I officeholders are required to report this information	the candidate's or office	eholder's knowle	edge or				
Additional Pages									
		COMMITTEE ADDRESS							
	SPECIFIC								
		COMMITTEE CAMPAIGN TREASURER NAME							
		COMMITTEE CAMPAIGN TREASURER ADDRES	6S						
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THAI ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		\$	0.00				
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	\$	0.00				
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$	0.00				
	4. TOTAL POLITIC	AL EXPENDITURES		\$	18,638.95				
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LA	AST DAY OF THE	\$	0.00				
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$	0.00				
17 AFFIDAVIT		l swear, or affirm, under penalty true and correct and includes al under Title 15, Election Code.							
		The Hor	norable Kyle J. Kacal	I					
		Signature of	Candidate or Officehol	lder					
AFFIX NO	TARY STAMP / SEAL ABO	DVE							
	, this the	0	day						
of	, 20, to ce	ertify which, witness my hand and seal of office.							
Signature of offi	cer administering	Printed name of officer administering	Title of office	r administering	oath				
Forms provided by Te	xas Ethics Commission	www.ethics.state.tx.us		Version V4.1.	0.5dd2ace2				

SUBTOTALS - C/OH	co	FORM C/OH OVER SHEET PG 3
18 FILER NAME Kacal, Kyle J. (The Honorable)	<b>19</b> Filer ID 00067801	3 of 18 (Ethics Commission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE	I	SUBTOTAL AMOUNT
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. SCHEDULE E: LOANS		\$
5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	<b>\$</b> 18,638.95
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
9. SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$
10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	nittee Legal Service	ge Expense ⁄Iemorials Expense	Office Overh Polling Expe Printing Exp Salaries/Wa	ense ges/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense		
1	Total pages Schedule F1:	ILER NAME				3	Filer ID	(Ethics Commission Filers)		
	Sch: 1/15 Rpt: 4/18	Kacal, Kyle J. (The H	lonorable)				00067801			
4	Date 07/01/2024	Payee name AT&T								
6	Amount (\$)	Payee address; Cit	y; State;	; Zip Cod	9					
	\$81.94	917 William D. Fitch College Station, TX 7	-							
8	PURPOSE				Description					
Ū	OF	<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Office Overhead/Rental Expense</li> <li>(b) Description</li> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> <li>Campaign cell phone</li> </ul>								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder n	ame C	Office soug	nt		Office he	ld		
	Date	Payee name								
	07/31/2024	AT&T								
	Amount (\$)	Payee address; Cit	y; State;	; Zip Cod	e					
	\$81.95	017 William D. Fitch College Station, TX 7	-							
	PURPOSE OF EXPENDITURE	Category <sub>(See Categories</sub> Office Overhead/Rer		nedule) (		n, TX,	de of Texas. Comp officeholder living hone			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder n	ame C	Office soug	nt		Office he	ld		
	Date	Payee name								
	09/03/2024	AT&T								
	Amount (\$) \$81.95	Payee address; Cit 917 William D. Fitch		; Zip Cod	9					
		College Station, TX 7	7845							
	PURPOSE OF EXPENDITURE	Category <sub>(See Categories</sub> Office Overhead/Rer		nedule) (		n, TX,	de of Texas. Comp officeholder living hone			
	Complete ONLY if direct expenditure to benefit C/OF	andidate/Officeholder n	ame C	Office soug	nt		Office he	ld		

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense     Loan Repayment/Reimbursement       Fees     Office Overhead/Rental Expense       Food/Beverage Expense     Polling Expense       Gift/Awards/Memorials Expense     Printing Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)							
	Sch: 2/15 Rpt: 5/18	Kacal, Kyle J. (The Honorable)	00067801							
4	Date 10/01/2024	Payee name AT&T								
6	Amount (\$) \$81.95	Payee address; City; State; Zip Code 917 William D. Fitch Pkwy College Station, TX 77845								
8	PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense</li> <li>(b) Description         <ul> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense Campaign cell phone</li> </ul> </li> </ul>								
9	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	10/31/2024	AT&T								
	Amount (\$) \$81.98	Payee address;       City;       State;       Zip Code         917 William D. Fitch Pkwy       College Station, TX 77845       College Station, TX 77845								
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense I phone							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date 12/02/2024	Payee name AT&T								
	Amount (\$) \$81.98	Payee address; City; State; Zip Code 917 William D. Fitch Pkwy								
		College Station, TX 77845								
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense I phone							
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expe Legal Services The Instruction Guide	Office Polling nse Printir Salari	Overhea Expens g Exper es/Wage	se s/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense	
1	Total pages Schedule F1:	2 FIL	ER NAME				3	Filer ID	(Ethics Commission Filers)	
	Sch: 3/15 Rpt: 6/18	Ka	cal, Kyle J. (The Honorable)					00067801		
4	Date	5 Pa	/ee name				-			
	12/31/2024	AT	&T							
6	Amount (\$)	<b>7</b> Pa	vee address; City;	State; Zip	Code					
	\$81.98	91	7 William D. Fitch Pkwy							
		Co	llege Station, TX 77845							
8	PURPOSE	(a) Ca	O Category (See Categories listed at the top of this schedule)       (b) Description							
	OF		Office Overhead/Rental Expense							
	EXPENDITURE		•					officeholder living	expense	
						Campaign ce	ell p	hone		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		didate/Officeholder name	Office s	ought			Office he	eld	
	Date	Pa	/ee name							
	07/31/2024	An	nerican Momentum Bank							
	Amount (\$)	Pa	vee address; City;	State; Zip	Code					
	\$5.00	40	30 State Highway 6 S., Suite	100						
		Co	llege Station, TX 77845							
	PURPOSE OF EXPENDITURE		tegory (See Categories listed at the top counting/Banking	o of this schedule)	(b)	Check if Austin	ı, TX,	de of Texas. Com officeholder living nt fee for ca		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		didate/Officeholder name	Office s	ought			Office he	eld	
	_									
	Date		vee name							
	08/30/2024		nerican Momentum Bank							
	Amount (\$)		vee address; City;	State; Zip	Code					
	\$5.00	40	30 State Highway 6 S., Suite	100						
		Co	llege Station, TX 77845							
	PURPOSE	<b>(a)</b> Ca	egory (See Categories listed at the top	of this schedule)	<b>(</b> b)	Description				
	OF EXPENDITURE	Ac	counting/Banking					de of Texas. Com	•	
	-							officeholder living	mpaign account	
						Special state	me		mpaign account	
	Complete ONLY if direct	Can	didate/Officeholder name	Office s	iouaht			Office he	ald	
	expenditure to benefit C/OF		and the officer officer of the fille	Chices	Jugin					

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exp Legal Services The Instruction Guide	Loan Ru Office C Polling ense Printing Salaries	epayme verhea Expens Expen /Wage	ent/Reimbursement Id/Rental Expense e se s/Contract Labor		Transportation E Travel in District Travel Out of Di		
1	Total pages Schedule F1:	2 FILER	NAME				3	Filer ID	(Ethics Commission Filers)	
-	Sch: 4/15 Rpt: 7/18		Kyle J. (The Honorable)	)				00067801	(	
4	Date	5 Payee	name							
	09/30/2024	Amerio	can Momentum Bank							
6	Amount (\$) \$5.00	7 Payee 4030 S	address; City; State Highway 6 S., Suite	State; Zip C e 100	code					
			e Station, TX 77845		1					
8	PURPOSE OF EXPENDITURE		ry (See Categories listed at the to nting/Banking	p of this schedule)	(b)	Check if Austin	n, TX,	officeholder living	nplete Schedule T. g expense ampaign account	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candida	te/Officeholder name	Office so	ought			Office h	eld	
	Date	Payee	name							
	10/31/2024	Amerio	an Momentum Bank							
_	Amount (\$)	Pavee	address; City;	State; Zip (	Code					
	\$5.00	4030 \$	State Highway 6 S., Suite e Station, TX 77845							
	PURPOSE OF EXPENDITURE	(a) Catego	ry (See Categories listed at the to nting/Banking	p of this schedule)	(b)	Check if Austin	n, TX,	officeholder living	nplete Schedule T. g expense ampaign account	
	Complete ONLY if direct expenditure to benefit C/OF	Candida	te/Officeholder name	Office so	ought			Office h	eld	
	Date	Payee	name							
	11/29/2024		can Momentum Bank							
	Amount (\$) \$5.00	-	address; City; State Highway 6 S., Suite	State; Zip C e 100	Code					
		Colleg	e Station, TX 77845							
	PURPOSE OF EXPENDITURE		ry (See Categories listed at the to nting/Banking	p of this schedule)	(b)	Check if Austin	n, TX,	officeholder living	nplete Schedule T. g expense ampaign account	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candida	te/Officeholder name	Office so	ought			Office h	eld	

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Event Expense Fees Food/Beverage Expen Gift/Awards/Memorial Legal Services The Instruction G	nse s Expense	Loan Repa Office Ove Polling Exp Printing Ex Salaries/W	yment/Reimbur head/Rental Ex ense bense ages/Contract L	kpense _abor		Transportation E Travel in District Travel Out of Dis	
1	Total pages Schedule F1:	2	FILER NAM	E					3	Filer ID	(Ethics Commission Filers)
	Sch: 5/15 Rpt: 8/18			e J. (The Honora	ıble)					00067801	· · · · ·
4	Date	5	Payee name	9							
	12/31/2024		American M	Momentum Banl	ĸ						
6	Amount (\$)	7	Payee addre	ess; City;	State	; Zip Co	le				
	\$5.00		4030 State	Highway 6 S., S	Suite 100						
			College Sta	ation, TX 77845							
8	PURPOSE	(a)	Category (s	See Categories listed at	the top of this sch	nedule)	(b) Descrip	otion			
	OF EXPENDITURE		Accounting	/Banking							nplete Schedule T.
										officeholder living	
							Specia	al statei	me	nt fee for ca	impaign account
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Of	ficeholder name	(	Office sou	lht			Office h	eld
	Date		Payee name	9							
	11/25/2024		B/CS Char	nber of Comme	rce						
	Amount (\$)		Payee addre	ess; City;	State	; Zip Co	le				
	\$500.00			-		, zip co					
	Φ200.00		1733 Bhan	crest Drive, Suit	e 200						
			Bryan, TX	77802							
	PURPOSE	(a)	Category (S	See Categories listed at	the top of this sch	nedule)	(b) Descrip	otion			
	OF EXPENDITURE			ns/Donations M							nplete Schedule T.
			Candidate/	Officeholder/Po	litical Comm	nittee				officeholder living	g expense
							Spons	or of JL	LB :	Student	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Of	ficeholder name	(	Office sou	lht			Office he	eld
-			_								
	Date		Payee name								
	10/24/2024		Boyd, Bran	idon							
	Amount (\$)		Payee addre	ess; City;	State	; Zip Co	le				
	\$600.00		2508 Leyla	Lane							
			College Sta	ation, TX 77845							
	PURPOSE	(a)	Category (s	See Categories listed at	the top of this sch	nedule)	(b) Descrip	otion			
	OF EXPENDITURE		Event Expe								nplete Schedule T.
	EXPENDITORE									officeholder living	g expense
							Caterir	ng for k	<k1< th=""><th>.25 event</th><th></th></k1<>	.25 event	
	Complete ONLY if direct		Candidate/Of	ficeholder name	(	Office sou	lht			Office h	eld
	expenditure to benefit C/OI	H									
-											

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee	Event Expense Fees Food/Beverage Expe Gift/Awards/Memoria Legal Services The Instruction C	nse Is Expense	Loan Repa Office Over Polling Exp Printing Ex Salaries/W	rment/Reimbursement head/Rental Expense ense pense ages/Contract Labor		Transportation E Travel in District Travel Out of Dis		
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commission Filers)	
	Sch: 6/15 Rpt: 9/18		Kacal, Kyle	J. (The Honora	able)				00067801		
4	Date	5	Payee name					<u> </u>			
	10/24/2024		Brenham He	eritage Museur	n						
6	Amount (\$)	7	Payee addres	s; City;	State	; Zip Co	le				
	\$1,000.00		310 East Ma	ain Street							
			Brenham, T	X 77833							
8	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this sch	(elube)	(b) Description				
			Event Exper			icuaic)		outsi	ide of Texas. Com	plete Schedule T.	
	EXPENDITURE							I, TX,	, officeholder living	g expense	
							Annual Gala				
_											
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Offic	eholder name	(	Office sou	ht		Office he	eld	
	Date		Payee name								
	11/13/2024		Capitol Gift	Shop							
	Amount (\$)		Payee addres	s; City;	State	; Zip Co	le				
	\$568.31		1400 Congre	ess Ave, Suite	E1.006						
			Austin, TX 7	8701							
	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this sch	iedule)	(b) Description				
	OF EXPENDITURE			s/Donations M						nplete Schedule T.	
			Candidate/C	)fficeholder/Po	litical Comm	nittee	Christmas or		, officeholder living ments	g expense	
							Christinas of	nai	nents		
	Complete ONLY if direct		andidate/Offic	eholder name	(	Office soug	ht		Office he	eld	
	expenditure to benefit C/OF										
-	Date	Γ	Payee name								
	07/02/2024		Gables Wes	t Avenue							
	Amount (\$)	-	Payee addres	s; City;	State	; Zip Co	le				
	\$2,631.73		300 West Av			,					
	. ,			-							
			Austin, TX 7	8701							
	PURPOSE OF			e Categories listed at		iedule)	(b) Description				
	EXPENDITURE		Office Overh	nead/Rental E	kpense					plete Schedule T.	
							X Check if Austin			ustin (July 2024)	
-	Complete ONLY if direct	<u> </u>	andidate/Offic	eholder name	(	Office soug	ht		Office he	eld	
	expenditure to benefit C/OF								2		
-											

					CATECOL			( 0( a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee	EXPENDITURE Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Ei Legal Services The Instruction Guid	xpense	Loan Repa Office Ove Polling Exp Printing Ex Salaries/W	ayment rhead/l pense pense /ages/C	/Reimbursement Rental Expense Contract Labor		Transportation E Travel in District Travel Out of Dis	olicitation/Fundraising Expense ransportation Equipment & Related Expense ravel in District ravel Out of District THER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission Filers)		
-	Sch: 7/15 Rpt: 10/18			J. (The Honorabl	e)				•	00067801	(		
4	Date	5	Payee name										
	10/21/2024		GoDaddy										
6	Amount (\$)	7	Payee addre	ss; City;	State;	; Zip Co	de						
	\$44.34		14455 N. H	ayden Rd.									
			Ste. 219										
			Scottsdale,	A7 85260									
8	PURPOSE OF	(a)		ee Categories listed at the	top of this sch	edule)	(b) [	Description					
	EXPENDITURE		Advertising	Expense			Ļ			de of Texas. Com			
							L			officeholder living	expense		
							,	Campaign ad	vei	using			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offi	ceholder name	C	Office sou	ght			Office he	eld		
	Date		Payee name										
	10/24/2024		Gringo's										
	Amount (\$)		Payee addre	ss; City;	State	Zip Co	de						
	\$219.53		-	6 Frontage Rd.	o tato,	,p 00							
	φ219.00		4300 18848	o Fiolilaye Ru.									
			College Sta	tion, TX 77845									
	PURPOSE	(a)	Category (S	ee Categories listed at the	top of this sch	edule)	(b) [	Description					
	OF EXPENDITURE		Food/Bever	age Expense			Ī			de of Texas. Com			
							L			officeholder living	expense		
							(	Constituent lu	inc	h			
	Complete ONLY if direct		Candidate/Offi	ceholder name	C	Office sou	ght			Office he	eld		
	expenditure to benefit C/OF	Н											
	Date		Payee name										
	10/25/2024		HEB										
				<b>e</b> ''									
	Amount (\$)		Payee addre		State;	; Zip Co	de						
	\$48.00		949 William	D. Fitch Pkwy									
			College Sta	tion, TX 77845									
	PURPOSE	(a)	Category (S	ee Categories listed at the	top of this sch	edule)	(b) [	Description					
	OF	` <i>`</i>		age Expense		ouuroy	Γ	·	outsi	de of Texas. Com	plete Schedule T.		
	EXPENDITURE						Ē	Check if Austin,	, тх,	officeholder living	expense		
							Ī	tems for KK1	.25	event			
	Complete ONLY if direct	<u> </u>	Candidate/Offi	ceholder name	C	Office sou	ght			Office he	eld		
	expenditure to benefit C/Oł						-						

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense nmittee Legal Services The Instruction Guide ex	Office O Polling I Printing Salaries	verhea Expens Expens /Wages	se s/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense		
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)		
	Sch: 8/15 Rpt: 11/18		Kacal, Kyle J. (The Honorable)					00067801			
4	Date	5	Payee name								
	07/02/2024		Hill Country Springs Water								
6	Amount (\$)	7	Payee address; City;	State; Zip C	code						
	\$6.57		10019 S. IH35								
			Austin, TX 78747								
8	PURPOSE	(a)	Category (See Categories listed at the top of	this schedule)	(b)	Description					
	OF EXPENDITURE		Office Overhead/Rental Expense				outsi	de of Texas. Comp	plete Schedule T.		
	EXPENDITORE							officeholder living			
			Water cooler rental for capitol office								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office so	ught			Office he	ld		
	Date		Payee name								
	08/19/2024		Hill Country Springs Water								
	Amount (\$)		Payee address; City;	State; Zip C	code						
	\$15.16		10019 S. IH35								
			Austin, TX 78747								
	PURPOSE	(a)	Category (See Categories listed at the top of		(b)	Description					
	OF		Office Overhead/Rental Expense				outsi	de of Texas. Comp	plete Schedule T.		
	EXPENDITURE					Check if Austin	, TX,	officeholder living	expense		
						Water cooler	rer	ntal for capito	ol office		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office so	ught			Office he	eld		
	Date		Payee name								
	10/02/2024		Hill Country Springs Water								
	Amount (\$)		Payee address; City;	State; Zip C	ode						
	\$7.58		10019 S. IH35								
			Austin, TX 78747								
	PURPOSE	(a)	Category (See Categories listed at the top of	this schedule)	(b)	Description					
	OF EXPENDITURE		Office Overhead/Rental Expense					de of Texas. Comp			
								officeholder living			
						Water cooler	rer	nai ior capito			
		Ļ	Sondidate (Office helder rame	04:00					Id		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office so	ught			Office he	au an		
_											

		EXPENDITURE CAT	EGORIES FOR E	OX 8(a)	
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide ex	Office Overhe Polling Expen Printing Expe Salaries/Wag	nse es/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	ILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
	Sch: 9/15 Rpt: 12/18	acal, Kyle J. (The Honorable)			00067801
4	Date	ayee name			
	11/04/2024	lill Country Springs Water			
6	Amount (\$)	ayee address; City;	State; Zip Code		
	\$27.57	0019 S. IH35	·		
		ustin, TX 78747			
8	PURPOSE OF	ategory (See Categories listed at the top of	<i>,</i>	) Description	
	EXPENDITURE	Office Overhead/Rental Expense			butside of Texas. Complete Schedule T.
					TX, officeholder living expense rental for capitol office
				Water cooler	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name	Office sough	t	Office held
	Date	ayee name			
	09/27/2024	aul Dyson for Texas			
	Amount (\$)	ayee address; City;	State; Zip Code		
	\$5,000.00	040 Hwy 6, Ste 200			
	+ - ,				
		College Station, TX 77845			
	PURPOSE OF	ategory (See Categories listed at the top of	,	Description	
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political C			outside of Texas. Complete Schedule T. TX, officeholder living expense
			Johnnillee	Campaign do	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name	Office sough	t	Office held
-	Date	ayee name			
	10/24/2024	Sam's Club			
	Amount (\$)	ayee address; City;	State; Zip Code		
	\$46.32	405 Earl Rudder Fwy. S.	otato, <u>_</u> p occo		
	¢ 10.02				
		College Station, TX 77845		-	
	PURPOSE OF	ategory (See Categories listed at the top of	this schedule) (b	Description	nutsida of Toulog, Complete Ochodula T
	EXPENDITURE	ood/Beverage Expense			outside of Texas. Complete Schedule T. TX, officeholder living expense
				Items for KK1	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name	Office sough	t	Office held
-					

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:		<b>3</b> Filer ID (Ethics Commission Filers)					
	Sch: 10/15 Rpt: 13/18	Kacal, Kyle J. (The Honorable)	00067801					
4	Date 10/25/2024	5 Payee name Sam's Club						
6	Amount (\$) \$42.15	<ul> <li>Payee address; City; State; Zip Code</li> <li>1405 Earl Rudder Fwy. S.</li> <li>College Station, TX 77845</li> </ul>						
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)       (b) Description         Office Overhead/Rental Expense       Check if travel outside of Texas. Complete Schedule T.         Check if Austin, TX, officeholder living expense       Items for KK125 event						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	09/30/2024	Seidel Schroeder						
	Amount (\$) \$575.00	Payee address; City; State; Zip Code 1575 Crescent Pointe Pkwy						
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense Counting services					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	11/30/2024	Seidel Schroeder						
	Amount (\$) \$325.00	Payee address; City; State; Zip Code 1575 Crescent Pointe Pkwy						
		College Station, TX 77845						
	PURPOSE OF EXPENDITURE	Check if Austin,	utside of Texas. Complete Schedule T. TX, officeholder living expense COUNTING SERVICES					
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment				Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	2	FILER NAME					3 F	iler ID	(Ethics Commission Filers)
-	Sch: 11/15 Rpt: 14/18		Kacal, Kyle J. (The Honorable)						00067801	(
4	Date	5	Payee name							
	09/30/2024		Stalling, Max							
6	Amount (\$)	7	Payee address; City;	State	; Zip Co	le				
	\$4,300.00		571183							
			Dallas, TX 75357							
8	PURPOSE	(a)	Category (See Categories listed at the top	p of this sch	nedule)	( <b>b)</b> Descrip	otion			
	OF EXPENDITURE		Event Expense							plete Schedule T.
									fficeholder living	
						Enterta	ammenn		KKIZD EV	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	Iht			Office he	eld
	Date		Payee name							
07/01/2024 WP Engine										
Amount (\$) Payee address; City; State; Zip Code										
	\$36.24		504 Lavaca Street		, , ,					
	Suite 1000									
			Austin, TX 78701							
						(1-)				
	PURPOSE OF		Category (See Categories listed at the top	p of this sch	nedule)	(b) Descrip		utside	of Texas, Com	plete Schedule T.
	EXPENDITURE		Advertising Expense						fficeholder living	
						Campa	aign wel	bsite	e hosting	
Complete ONLY if direct         Candidate/Officeholder name         Office sought         Office held           expenditure to benefit C/OH         Office held         Office held         Office held						eld				
	Date		Payee name							
	08/01/2024		WP Engine							
	Amount (\$)		Payee address; City;	State	; Zip Co	le				
	\$36.24		504 Lavaca Street							
			Suite 1000							
			Austin, TX 78701							
-	PURPOSE		Category (See Categories listed at the top	n of this sch	odulo)	(b) Descrip	otion			
	OF		Advertising Expense		ieuuie)			utside	of Texas. Com	plete Schedule T.
	EXPENDITURE		5						fficeholder living	j expense
						Campa	aign wel	bsite	e hosting	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	lht			Office he	eld

EXPENDITURE CATEGORIES FOR BOX 8(a)											
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political C Credit Card Payment			Event Expense     Loan Repayment/Reinbursement       Fees     Office Overhead/Rental Expense       Food/Beverage Expense     Polling Expense       Gift/Awards/Memorials Expense     Printing Expense			ר ר ר	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2	FILER NAME					3	<b>3</b> F	-iler ID	(Ethics Commission Filers)
	Sch: 12/15 Rpt: 15/18		Kacal, Kyle J.	(The Honorable)					C	00067801	
4	Date	5	Payee name								
	09/03/2024		WP Engine								
6	Amount (\$)	7	Payee address;	City;	State;	Zip Co	le				
	\$36.24		504 Lavaca St	treet							
			Suite 1000								
			Austin, TX 787	701							
_	DUDDOCE					r					
8	PURPOSE OF	(a)		Categories listed at the to	p of this sche	edule)	(b) Descriptio		uteide	of Toxas Com	plete Schedule T.
	EXPENDITURE		Advertising Ex	pense						fficeholder living	
										e hosting	
								,		5	
9	Complete ONLY if direct expenditure to benefit C/O										
	Date		Payee name								
10/01/2024 WP Engine											
Amount (\$) Payee address; City; State; Zip Code											
	\$36.24		504 Lavaca St	-	,						
	+•••=		Suite 1000								
				704							
			Austin, TX 787								
	PURPOSE OF	(a)		Categories listed at the to	p of this sche	edule)	(b) Descriptio				alata Oakaduda T
	EXPENDITURE		Advertising Ex	pense						fficeholder living	plete Schedule T.
							Campaig				expense
							eampaig	,		e neeting	
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officel	nolder name	0	office soug	ht			Office he	eld
	Date		Payee name								
	11/01/2024		WP Engine								
-	Amount (\$)	⊢	Payee address;	City;	State:	Zip Co	le				
	\$36.24		504 Lavaca Si								
	+001		Suite 1000								
				701							
			Austin, TX 787	701							
	PURPOSE OF	(a)		Categories listed at the to	p of this sche	edule)	(b) Descriptio				alada Oakaalula T
	EXPENDITURE		Advertising Ex	pense						fficeholder living	plete Schedule T.
							Campaig				expense
							Jumpuly	,	5510	e nooung	
	Complete ONLY if direct	Ļ	Candidate/Officel	older name	<u> </u>	office soug	ıht			Office he	ald
	expenditure to benefit C/OF				0	mue soul	prit			Once ne	

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment			Event Expense Loan Repayment/Reimbur Fees Office Overhead/Rental Ex Food/Beverage Expense Polling Expense y - Gift/Awards/Memorials Expense Printing Expense			/Reimbursement Rental Expense Contract Labor				ise		
1	Total pages Schedule F1:	2	FILER NAM	E					3	Filer ID	(Ethics Commission I	-ilers)
	Sch: 13/15 Rpt: 16/18			e J. (The Honora	able)				-	00067801		
4	Date	5	Payee name	9								
	12/02/2024		WP Engine	9								
6	Amount (\$)	7	Payee addre	ess; City;	State	; Zip Co	de					
	\$36.24		504 Lavaca	a Street								
			Suite 1000									
			Austin, TX									
_	DUDDOOF						(1-)					
8	PURPOSE OF	(a)		See Categories listed at	the top of this sch	edule)	ן (מ) ז	Description	outoi	do of Toyac, Com	plete Schedule T.	
	EXPENDITURE		Advertising	Expense			ļ			officeholder living		
							L	Campaign we			j okponico	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Of	ficeholder name	(	Dffice sou	ght			Office he	eld	
	Date		Payee name	)								
	10/24/2024		Wal-Mart									
	Amount (\$)	$\vdash$	Payee addre	ess; City;	State	; Zip Co	de					
	\$27.02		1815 Broth	-								
			College Sta	ation, TX 77845								
	PURPOSE	(a)	Category (S	See Categories listed at	the top of this sch	iedule)	(b)	Description				
	OF EXPENDITURE		Office Ove	rhead/Rental E>	pense		Į				plete Schedule T.	
Check if Austin, TX, officeholder living expense Items for KK125 event												
								ILEMS IOF KK1	125	event		
			Canadialata (Of							Office b		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Januluale/OI	ficeholder name	(	Office sou	ynt			Office h	eiù	
		_										
	Date		Payee name									
	10/04/2024		Walgreens									
	Amount (\$)		Payee addre	ess; City;	State	; Zip Co	de					
	\$33.50		3921 W Pa	rmer Lane								
			Austin, TX	78727								
	PURPOSE	(a)	Category (S	See Categories listed at	the top of this sch	edule)	(b)	Description	_			
	OF EXPENDITURE		Office Ove	rhead/Rental E>	pense		Į				plete Schedule T.	
							Ļ			officeholder living		
								Supplies for t	ne		E .	
	0						1.5			~~~		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Of	ficeholder name	C	Office sou	ght			Office h	eld	

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense     Loan Repayment/Reimbursement       Fees     Office Overhead/Rental Expense       Food/Beverage Expense     Polling Expense       Gitt/Awards/Memorials Expense     Printing Expense       Legal Services     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)						
1	Total pages Schedule F1:	FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)						
	Sch: 14/15 Rpt: 17/18	Kacal, Kyle J. (The Honorable)00067801							
4	Date 07/31/2024	5 Payee name Willett, Terra							
6	Amount (\$) \$300.00	7 Payee address; City; State; Zip Code 3609 Oak Creek Drive Austin, TX 78727							
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contract labor for campaign services							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
08/31/2024 Willett, Terra									
	Amount (\$) \$300.00	Payee address; City; State; Zip Code 3609 Oak Creek Drive							
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense r for campaign services						
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	09/30/2024	Willett, Terra							
	Amount (\$) \$300.00	Payee address;     City;     State;     Zip Code       3609 Oak Creek Drive							
		Austin, TX 78727							
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense r for campaign services						
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	Total pages Schedule F1: 2 FILER NAME 3							
	Sch: 15/15 Rpt: 18/18	2 FILER NAME       3 Filer ID (Ethics Commission File         Kacal, Kyle J. (The Honorable)       00067801							
4	Date	5 Payee name							
	10/31/2024	Willett, Terra							
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$300.00	3609 Oak Creek Drive							
		Austin, TX 78727							
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense						
			r for campaign services						
			· · · · · · · · · · · · · · · · · · ·						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	11/30/2024	Willett, Terra							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$300.00	3609 Oak Creek Drive							
		Austin, TX 78727							
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense						
		Contract labo	r for campaign services						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	12/31/2024	Willett, Terra							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$300.00	3609 Oak Creek Drive							
		Austin, TX 78727							
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense r for campaign services						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						