

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

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

The C/OH Instruction Guide explains how to complete this form.			1 Filer ID (Ethics Commission Filers) 00089928	2 Total pages filed: 13		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST Kyle J.	MI	OFFICE USE ONLY		
	NICKNAME	LAST Morris	SUFFIX	Date Received ELECTRONICALLY FILED 01/14/2026		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 9121 Belshire Dr., Ste. 200			Date Hand-delivered or Date Postmarked		
	North Richland Hills, TX 76053			Receipt #	Amount	
				Date Processed		
				Date Imaged		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mrs.	FIRST Alyssa B. "Brooke"	MI			
	NICKNAME	LAST Morris	SUFFIX			
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 9121 Belshire Dr., Ste. 200		APT / SUITE #;	CITY;	STATE;	ZIP CODE
	North Richland Hills, TX 76182					
7 CAMPAIGN TREASURER PHONE	AREA CODE (940) 597-9389	PHONE NUMBER	EXTENSION			
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)					
9 PERIOD COVERED	Month 09/05/2025	Day	Year	Month 12/31/2025	Day	Year
10 ELECTION	ELECTION DATE Month 03/03/2026		ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special			
11 OFFICE	OFFICE HELD (if any) None Tarrant			12 OFFICE SOUGHT (if known) State Representative District 91		

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**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

**FORM C/OH
COVER SHEET PG 2**

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13 C / OH NAME	Morris, Kyle J. (Mr.)		14 Filer ID (Ethics Commission Filers) 00089928
15 NOTICE FROM POLITICAL COMMITTEE(S)	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.		
<input type="checkbox"/> Additional Pages	COMMITTEE TYPE <input checked="" type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME	Protect and Serve Texas PAC
		COMMITTEE ADDRESS	PO Box 622
		Austin, TX 78767	
		COMMITTEE CAMPAIGN TREASURER NAME	Brock, PJ
		COMMITTEE CAMPAIGN TREASURER ADDRESS	PO Box 622
		Austin, TX 78767	
16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)		\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 49,950.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES		\$ 18,437.75
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 20,612.45
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.

Mr. Kyle J. Morris

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

Signature of officer administering

Printed name of officer administering

Title of officer administering oath

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

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18 FILER NAME Morris, Kyle J. (Mr.)	19 Filer ID (Ethics Commission Filers) 00089928
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 37,450.00
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 12,500.00
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. <input type="checkbox"/> SCHEDULE E: LOANS	\$
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 18,437.75
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9. <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/4 Rpt: 4/13
2 FILER NAME Morris, Kyle J. (Mr.)		3 Filer ID (Ethics Commission Filers) 00089928
4 Date 11/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrett, Kerry	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Parkland, FL 33067	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 09/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burnett, Collin	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Burleson, TX 76028	
Principal occupation / Job title (See Instructions) Consulting		Employer (See Instructions) B&B LLC
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burnett, Jana	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Colleyville, TX 76034	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Colgan, Tradonna	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code North Richland Hills, TX 76182	
Principal occupation / Job title (See Instructions) Clerical		Employer (See Instructions) Burk Collins & Co
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dennie, Christian	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code Trophy Club, TX 76262	
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Dennie Firm

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/4 Rpt: 5/13
2 FILER NAME Morris, Kyle J. (Mr.)		3 Filer ID (Ethics Commission Filers) 00089928
4 Date 10/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Amanda	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Richland Hills, TX 76118	
8 Principal occupation / Job title (See Instructions) Director of Process & Compliance		9 Employer (See Instructions) DeMars & Associates
Date 12/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Sharla	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Hurst, TX 76054	
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) GBMC
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris Innovative Resolutions	Amount of Contribution (\$) \$10,000.00
	Contributor address; City; State; Zip Code Hurst, TX 76053	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris Innovative Resolutions	Amount of Contribution (\$) \$10,000.00
	Contributor address; City; State; Zip Code Hurst, TX 76053	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris, Brooke	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code North Richland Hills, TX 76182	
Principal occupation / Job title (See Instructions) Self employed		Employer (See Instructions) MIR

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 3/4 Rpt: 6/13
2 FILER NAME Morris, Kyle J. (Mr.)			3 Filer ID (Ethics Commission Filers) 00089928
4 Date 11/12/2025	5 Full name of contributor Morris, Charles	6 Contributor address; City; State; Zip Code Overland Park, KS 66213	7 Amount of Contribution (\$) \$500.00
	8 Principal occupation / Job title (See Instructions) AVP Software Engineer		
Date 10/30/2025	Full name of contributor Morris, Kyle	Contributor address; City; State; Zip Code North Richland Hills, TX 76182	Amount of Contribution (\$) \$2,500.00
	Principal occupation / Job title (See Instructions) Self employed		
Date 09/25/2025	Full name of contributor Morris, Kyle	Contributor address; City; State; Zip Code North Richland Hills, TX 76182	Amount of Contribution (\$) \$2,500.00
	Principal occupation / Job title (See Instructions) Self employed		
Date 09/23/2025	Full name of contributor Morris, Tim	Contributor address; City; State; Zip Code Grapevine, TX 76051	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) retired		
Date 11/23/2025	Full name of contributor Reiter, Chisam	Contributor address; City; State; Zip Code Fort Worth, TX 76107	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Self employed		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/4 Rpt: 7/13
2 FILER NAME Morris, Kyle J. (Mr.)		3 Filer ID (Ethics Commission Filers) 00089928
4 Date 09/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rounds, David	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Forney, TX 75126	
8 Principal occupation / Job title (See Instructions) Geologist		9 Employer (See Instructions) Pangeas Edge Holdings
Date 10/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sutton, Jim	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Haltom City, TX 76137	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thoennes, MaryGrace	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Southlake, TX 76092	
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Self employed
Date 09/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zorn, Jason	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Euless, TX 76039	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS**SCHEDULE A2**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 8/13
2 FILER NAME Morris, Kyle J. (Mr.)		3 Filer ID (Ethics Commission Filers) 00089928
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$
5 Date 10/28/2025	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Protect and Serve Texas PAC 7 Contributor address; City; State; Zip Code Austin, TX 78767	8 Amount of contribution (\$) 9 In-kind contribution description \$12,500.00 Campaign research <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	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 - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/5 Rpt: 9/13	2 FILER NAME Morris, Kyle J. (Mr.)	3 Filer ID (Ethics Commission Filers) 00089928
4 Date 11/05/2025	5 Payee name Catalyst Advisors Group	
6 Amount (\$) \$1,500.00	7 Payee address; City; 1108 Lavaca St 110-506 Austin, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/02/2025	Payee name Catalyst Advisors Group	
Amount (\$) \$1,500.00	Payee address; City; 1108 Lavaca St 110-506 Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/02/2025	Payee name Catalyst Advisors Group	
Amount (\$) \$500.00	Payee address; City; 1108 Lavaca St 110-506 Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/5 Rpt: 10/13	2 FILER NAME Morris, Kyle J. (Mr.)	3 Filer ID (Ethics Commission Filers) 00089928
4 Date 11/18/2025	5 Payee name Catalyst Advisors Group	
6 Amount (\$) \$750.00	7 Payee address; City; 1108 Lavaca St 110-506 Austin, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/15/2025	Payee name Catalyst Advisors Group	
Amount (\$) \$350.00	Payee address; City; 1108 Lavaca St 110-506 Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/15/2025	Payee name Catalyst Advisors Group	
Amount (\$) \$1,570.44	Payee address; City; 1108 Lavaca St 110-506 Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense text messages
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/5 Rpt: 11/13	2 FILER NAME Morris, Kyle J. (Mr.)	3 Filer ID (Ethics Commission Filers) 00089928
4 Date 09/05/2025	5 Payee name Catalyst Advisors Group	
6 Amount (\$) \$1,500.00	7 Payee address; City; 1108 Lavaca St 110-506 Austin, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/15/2025	Payee name Catalyst Advisors Group	
Amount (\$) \$350.00	Payee address; City; 1108 Lavaca St 110-506 Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense photoshoot/family
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/05/2025	Payee name Catalyst Advisors Group	
Amount (\$) \$417.31	Payee address; City; 1108 Lavaca St 110-506 Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Push cards
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/5 Rpt: 12/13	2 FILER NAME Morris, Kyle J. (Mr.)	3 Filer ID (Ethics Commission Filers) 00089928
4 Date 11/18/2025	5 Payee name Catalyst Advisors Group	
6 Amount (\$) \$1,000.00	7 Payee address; City; 1108 Lavaca St 110-506 Austin, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/06/2025	Payee name Catalyst Advisors Group	
Amount (\$) \$1,500.00	Payee address; City; 1108 Lavaca St 110-506 Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/17/2025	Payee name Catalyst Advisors Group	
Amount (\$) \$750.00	Payee address; City; 1108 Lavaca St 110-506 Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting - research
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/5 Rpt: 13/13	2 FILER NAME Morris, Kyle J. (Mr.)	3 Filer ID (Ethics Commission Filers) 00089928	
4 Date 11/25/2025	5 Payee name Catalyst Advisors Group		
6 Amount (\$) \$6,750.00	7 Payee address; City; 1108 Lavaca St 110-506 Austin, TX 78701		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense digital advertising/consulting	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held