# **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)	2 Total pages filed:		
3 CANDIDATE/ OFFICEHOLDER	MS / MRS / MR	FIRST <b>Kyle</b>	MI	OFFICE USE ONLY		
NAME	NICKNAME	LAST	SUFFIX	Date Received	_	
		LeVell		RECEIVED	,_	
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX		CITY; STATE; ZIP CODE	By Jennifer Kirkland at 8:42 am, Oct 28, 202	<b>5</b>	
MAILING ADDRESS		Kyle, Tx 78640				
Change of Address	AREA CODE	PHONE NUMBER	EXTENSION			
5 CANDIDATE/ OFFICEHOLDER PHONE	(	PHONE NUMBER	EATENSION	Date Hand-delivered or Date Postmarked  Receipt # Amount \$		
6 CAMPAIGN TREASURER	MS / MRS / MR	first <b>Jill</b>	MI	Receipt # Amount \$  Date Processed		
NAME	NICKNAME	LAST	SUFFIX			
		Dilbeck		Date Imaged		
7 CAMPAIGN	STREET ADDRESS	(NO PO BOX PLEASE); APT / SL	JITE #; CITY;	STATE; ZIP CODE		
TREASURER ADDRESS		Kyle, Tx 78640				
(Residence or Business)						
8 CAMPAIGN TREASURER	AREA CODE	PHONE NUMBER	EXTENSION			
PHONEOntinued	C <sub>(</sub> o	le A1 Ane	dote Report Attached (I	Digital transactions)		
9 REPORT TYPE	January 15	30th day before el	lection Runoff	15th day after campaign treasurer appointment (Officeholder Only)		
	July 15	8th day before elect	ction Exceeded Modified Reporting Limit	Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month	Day Year	Month	Day Year		
	9	/ 27 / 2025	THROUGH 10	/ 26 / 2025		
11 ELECTION	ELECTION DA	ATE	ELECTION TYPE			
	Month Day Year Primary Runoff Other Description					
	11/ 4 /	2025 General	Special		-	
12 OFFICE	OFFICE HELD (if any)	<u> </u>	13 OFFICE SOUGHT (if known	I)		
			City Council District 1	- City of Kyle,Texas		
14 NOTICE FROM POLITICAL	THE CANDIDATE / OFFIC	CEHOLDER. THESE EXPENDITURES	MAY HAVE BEEN MADE WITHOUT THE CAN	IADE BY POLITICAL COMMITTEES TO SUPPORT DIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.	R	
COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME				
Additional Pages	GENERAL	COMMITTEE ADDRESS				
	SPECIFIC	COMMITTEE CAMPAIGN TREA	ASURER NAME			
		COMMITTEE CAMPAIGN TRE	EASURER ADDRESS			
	1	CO TO	DACE 2		_	
		GO TO	PAGE 2			

## CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

### FORM C/OH

CAMPAIG	N FIN	ANCE REPORT	CO	VER SHEET PG 2
15 C/OH NAME		1	16 Filer I	D (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1.	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)		\$ 145.00
	2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 2,524.43
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURE.		\$ 118.71
	4.	TOTAL POLITICAL EXPENDITURES		\$ 2,432.80
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST OF REPORTING PERIOD	DAY	\$ 1,845.31
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD	THE	\$ 0
	•	affirm, under penalty of perjury, that the accompanying report is true e reported by me under Title 15, Election Code.		
		Signature of Can		

Continued Co

le A1 Anedote Report Attached (Digital transactions)

#### Please complete either option below:

(1) Affidavit					
NOTARY STAMP/SEAL					
Sworn to and subscribed before m	ne by Kyle LeVell		_ this the <u>27th</u>	day of <u>C</u>	October,
20 <u>25</u> , to certify which, with	tness my hand and seal of office.				
Signature of officer administering oath	Printed name of of	ficer administering oath		Title of office	cer administering oath
		OR			
(2) Unsworn Declaration					
My name is Kyle LeVell		, and my date	of birth is		
My address is		<sub>,</sub> Kyle	, <u>Tx</u> ,	78640	USA
Executed in Hays	(street) County, State of Texas	(city) , on the 27th day	(state) of October (month)	(zip code) , 20 25 (year)	(country)
		Signatur	e of Candidate/Off	iceholder (De	eclarant)

#### **SUBTOTALS - C/OH**

### FORM C/OH COVER SHEET PG 3

19	FILER NAME	20 Filer ID (Ethics Co	mmission Filers)
	Kyle LeVell		
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 2669.43
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 105.00	
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		<sup>\$</sup> 0
4.	SCHEDULE E: LOANS	\$ O	
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CO	NTRIBUTIONS	\$ 2,432.80
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$ 0
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL	CONTRIBUTIONS	\$ 0
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 0
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUN	NDS	\$ 0
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A		\$ 0
11.	Continued Co le A1 Anedote Report Atta schedule i: non-political expenditures made from political co	ched (Digital tran	sactions)
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUT TO FILER	TIONS RETURNED	\$ 0

#### **MONETARY POLITICAL CONTRIBUTIONS**

#### SCHEDULE A1

If the requested information is not applicable, **DO NOT include this page in the report.** 

The	Instruction Guide explains how	to complete this	form.		1 Total pages Schedule A1:
2 FILER NAME Kyle LeVell					3 Filer ID (Ethics Commission Filers)
4 Date 10/21/2025	Full name of contributor     Stewart Oliver	out-of-state PAC	C (ID#:	)	7 Amount of contribution (\$) \$300.00
	6 Contributor address;	City;	State;	Zip Code	. 4000.00
		Kyle	Tx	78640	
8 Principal occu	pation / Job title (See Instructions)		9 Empl	oyer (See Instruc	ctions)
Self Employed					
Date 10/13/2025	Full name of contributor  Debra Broderick	out-of-state PAC	C (ID#:	)	Amount of contribution (\$)
	Contributor address;	City;	State;	Zip Code	\$100.00
		Kyle	Tx	78640	
Principal occup	pation / Job title (See Instructions)		Empl	oyer (See Instruc	tions)
Contir	aued Co	le A1 Ane	dote Re	nort Attache	ed (Digital transactions)
Date 10/08/2025	Full name of contributor  J.C White	out-of-state PAC	C (ID#:	)	Amount of contribution (\$)
	Contributor address;	City;	State;	Zip Code	\$500.00
		Suwanee	Ga	30024	
Principal occup	pation / Job title (See Instructions)		Empl	oyer (See Instruc	tions)
Date 10/25/2025	Full name of contributor  J.C White	out-of-state PAC	C (ID#:	)	Amount of contribution (\$)
	Contributor address;	City;	State;	Zip Code	\$1,000.00
		Suwanee	Ga	30024	ψ1,000.00
Principal occup	pation / Job title (See Instructions)		Empl	oyer (See Instruc	ctions)
Self Employed					

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

### NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

#### SCHEDULE A2

If the requested information is not applicable, **DO NOT include this page in the report.** 

Th	ne Instruction Guide explain	s how to complete	this form	n.	1 Total pages Schedu	ule A2:
2 FILER NAMI	E				3 Filer ID (Ethics Co	mmission Filers)
4 TOTAL O	F UNITEMIZED IN-KIN	D POLITICAL C	ONTRII	BUTIONS	\$ 54.00	
5 Date 6 Full name of contributor Out-of-state PAC (ID#:  10/13/2025 Gabe Parsley				)	8 Amount of Contribution \$	9 In-kind contribution description
	7 Contributor address;	City;	State;	Zip Code 78640	\$50.00	Cookies & Event Space Fee
10 Principal occ	cupation / Job title (FOR NON-	<u>-</u>		I	er (FOR NON-JUDICIA	de of Texas. Complete Schedule T. AL)(See Instructions)
	principal occupation (FOR JU	DICIAL)		_		DICIAL)(See Instructions)
<b>14</b> Contributor's	employer/law firm (FOR JUDI	CIAL)		15 Law firn	of contributor's spous	se (if any) (FOR JUDICIAL)
<b>16</b> If contributor	is a child, law firm of parent(s)	(if any) (FOR JUDIO	CIAL)	<u> </u>		
Date 10/13/2025	Full name of contributor  Rose Burke	out-of-state PAC (II	nedote	Report A	tached (Digital Amount of Contribution \$	transactions) In-kind contribution description
10/13/2023	Contributor address;	City;	State;	Zip Code	\$55.00	Wine bottles
Principal occ	cupation / Job title (FOR NON-	Kyle JUDICIAL) (See Insti		78640 Employe	Check if travel outsider (FOR NON-JUDICIA	de of Texas. Complete Schedule T.  AL)(See Instructions)
CPA/Con		, ,	,		handler Roofing	
Contributor's	principal occupation (FOR JU	DICIAL)		Contribu	utor's job title (FOR JU	DICIAL)(See Instructions)
Contributor's	employer/law firm (FOR JUDI	CIAL)		Law firn	n of contributor's spous	se (if any) (FOR JUDICIAL)
If contributor	r is a child, law firm of parent(s	(if any) (FOR JUDIO	CIAL)	l		
	ATTACH	ADDITIONAL COP	PIES OF 1	HIS SCHEDU	JLE AS NEEDED	

Forms provided by Texas Ethics Commission

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

### POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

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

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District

4 =	The Instruction Guide explains how to o	complete this form.	
Total pages Schedule F1:	2 FILER NAME Kyle LeVell		3 Filer ID (Ethics Commission Filers)
<b>1</b> Date	5 Payee name		1
9/29/2025	Canva		
6 Amount (\$)	7 Payee address;	City;	State; Zip Code
\$250.00	3212 E. Cesar Chavez Street Building 1, Suite 1300	Austin	Tx 78702
3	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Advertising	Paper	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aus	tin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
Continued (	OSO MARKETING LLC AUSTIN TXR	Report Attached	d (Digital transactions)
Amount (\$)	Payee address;	City;	State; Zip Code
\$1,936.59	237 Limestone Trl	Austin	Tx 78737
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Advertising	Ciano	
OF EXPENDITURE	Advertising	Signs	
OF	Check if travel outside of Texas. Complete Schedule T.		tin, TX, officeholder living expense
OF	Check if travel outside of Texas. Complete Schedule T.  Candidate / Officeholder name		tin, TX, officeholder living expense Office held
OF EXPENDITURE  Complete ONLY if direct	Check if travel outside of Texas. Complete Schedule T.  Candidate / Officeholder name	Check if Aus	
OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OF	Check if travel outside of Texas. Complete Schedule T.  Candidate / Officeholder name	Check if Aus	
OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OF	Check if travel outside of Texas. Complete Schedule T.  Candidate / Officeholder name  Payee name	Check if Aus	
OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OF  Date  10/16/2025	Check if travel outside of Texas. Complete Schedule T.  Candidate / Officeholder name  Payee name  Canva	Check if Aus Office sought	Office held
OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OF  Date  10/16/2025  Amount (\$)	Check if travel outside of Texas. Complete Schedule T.  Candidate / Officeholder name  Payee name  Canva  Payee address;  3212 E. Cesar Chavez Street	Check if Aus Office sought City;	Office held  State; Zip Code
OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OF  Date  10/16/2025  Amount (\$)	Check if travel outside of Texas. Complete Schedule T.  Candidate / Officeholder name  Payee name  Canva  Payee address;  3212 E. Cesar Chavez Street Building 1, Suite 1300	Check if Aus Office sought  City;  Austin	Office held  State; Zip Code
OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OF  Date  10/16/2025  Amount (\$)  \$112.50  PURPOSE OF	Check if travel outside of Texas. Complete Schedule T.  Candidate / Officeholder name  Payee name  Canva  Payee address;  3212 E. Cesar Chavez Street Building 1, Suite 1300  Category (See Categories listed at the top of this schedule)	Check if Aus Office sought  City; Austin  Description  Paper	Office held  State; Zip Code



# AFFIDAVIT FOR CANDIDATE OR OFFICEHOLDER: ELECTRONIC FILING EXEMPTION

An exemption affidavit must be submitted with each paper report.

Beginning on January 1, 2025, a candidate or officeholder who has accepted more than \$33,910 in political contributions or made more than \$33,910 in political expenditures in <u>any</u> calendar year must file all subsequent reports electronically.

Filer name	Filer ID #
Kyle LeVell	

OFFICE U	ISE ONLY
Date Received	
Date Hand-delivered	or Date Postmarked
Receipt #	Amount \$
Date Processed	
Date Imaged	

- 1. I swear or affirm that I have not accepted more than \$33,910 in political contributions or made more than \$33,910 in political expenditures in a calendar year.
- 2. I further swear or affirm that I do not use computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
- 3. I further swear or affirm that no person acting as my agent or consultant, and no person with whom I contract, uses computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
- 4. I further swear or affirm that I understand that I am required to file my campaign finance reports electronically if I, my agent or consultant, or a person with whom I contract exceeds \$33,910 in political contributions or political expenditures in a calendar year, or uses computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
- 5. I am filing this affidavit with the Campaign Report report due on 10/27/2025.

  I understand that this affidavit is required to be filed with each campaign finance report for which I am claiming an exemption from electronic filing.

#### Please complete either option below:

(1) Affidavit			
		Kyle Leve	ell
NOTARY STAMP/SEAL		Signature of Filer	
Sworn to and subscribed before me by	this t	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 off	icer administering oat
	OR		
(2) Unsworn Declaration  My name isKyle LeVell	, and my date of birtl	h is	
My address is (street)	Kyle (city)	Tx (state), 78640 (zip code)	, USA (country)
Executed in Hays County, State of Texas		Oct , 20 25 (yea	
	Kyle	Levell	
	Signa	ature of Filer (Declara	nt)

FILERS WHO ARE EXEMPT FROM THE ELECTRONIC FILING REQUIREMENT ARE STILL REQUIRED TO FILE CAMPAIGN FINANCE REPORTS ON PAPER

Schedule A1 - itemized Contributions (Anedot Report)								
Description	Donation Date	Donation Amount	Address Line 1	City	State	Zip		
Donation from DaQuawn Bruce	10/17/2025	\$52.40		South Holland	IL	60473		
Donation from Dr Linda Lee Tarver	10/12/2025	\$21.15		Lansing	MI	48911		
Donation from Greg Tzevelekos	10/11/2025	\$52.40		Atlanta	GA	30341		
Donation from Khoa DO	10/10/2025	\$208.65		Snellville	GA	30078		
Donation from Gregory Bell	10/10/2025	\$104.48		New York	NY	10010		
Donation from Pamela Dovie Pereira	10/2/2025	\$26.35		Coarsegold	CA	93614		

Continued Co

le A1 Anedote Report Attached (Digital transactions)