


**OFFICIAL RECORD
CITY SECRETARY
FT. WORTH, TX**

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

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

<p>The C/OH Instruction Guide explains how to complete this form.</p>		<p>1 Filer ID (Ethics Commission Filers)</p>	<p>2 Total pages filed: 17</p>
<p>3 CANDIDATE / OFFICEHOLDER NAME</p>	<p>MS / MRS / MR Mr. FIRST Daryl MI R</p> <p>NICKNAME LAST Davis SUFFIX II</p>	<p style="text-align: center;">OFFICE USE ONLY</p> <p>Date Received</p> <div style="text-align: center;">  </div> <p>Date Hand-delivered or Date Postmarked</p>	
<p>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</p> <p><input type="checkbox"/> Change of Address</p>	<p>ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE</p> <p>9216 Vineyard Lane Fort Worth TX 76123</p>		
<p>5 CANDIDATE / OFFICEHOLDER PHONE</p>	<p>AREA CODE PHONE NUMBER EXTENSION</p> <p>(817) 692-2020</p>		<p>Receipt #</p> <p>Amount \$</p>
<p>6 CAMPAIGN TREASURER NAME</p>	<p>MS / MRS / MR Mr. FIRST Kenneth MI B</p> <p>NICKNAME LAST Spears SUFFIX</p>	<p>Date Processed</p> <p>Date Imaged</p>	
<p>7 CAMPAIGN TREASURER ADDRESS</p> <p>(Residence or Business)</p>	<p>STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE</p> <p>2401 E. Berry Fort Worth TX 76105</p>		
<p>8 CAMPAIGN TREASURER PHONE</p>	<p>AREA CODE PHONE NUMBER EXTENSION</p> <p>(817) 534-0581</p>		
<p>9 REPORT TYPE</p>	<p><input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)</p> <p><input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH - FR)</p>		
<p>10 PERIOD COVERED</p>	<p>Month Day Year Month Day Year</p> <p>February / 6 / 2019 THROUGH March / 25 / 2019</p>		
<p>11 ELECTION</p>	<p>ELECTION DATE</p> <p>Month Day Year</p> <p>May / 4 / 2019</p>	<p>ELECTION TYPE</p> <p><input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description</p> <p><input checked="" type="checkbox"/> General <input type="checkbox"/> Special</p>	
<p>12 OFFICE</p>	<p>OFFICE HELD (if any)</p>	<p>13 OFFICE SOUGHT (if known)</p> <p>Fort Worth City Council District 6</p>	

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME

Daryl R. Davis II

15 Filer ID (Ethics Commission Filers)

16 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. 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

GENERAL

SPECIFIC

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

Additional Pages

17 CONTRIBUTION
TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ 2481.00

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 4800.00

EXPENDITURE
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED

\$ 589.40

4. TOTAL POLITICAL EXPENDITURES

\$ 5537.47

CONTRIBUTION
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

\$ 1869.13

OUTSTANDING
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ 0

18 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.

Daryl R. Davis II
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said CANDIDATE, this the 4th day of April, 2019, to certify which, witness my hand and seal of office.

[Signature]

Signature of officer administering oath

Matthew L. Patterson

Printed name of officer administering oath

Notary Public

Title of officer administering oath

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME

Daryl R. Davis II

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE

SUBTOTAL
AMOUNT

1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 7281.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 1500.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 6126.87
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE 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: <u>8</u>
2 FILER NAME Daryl R Davis II		3 Filer ID (Ethics Commission Filers)
4 Date 02/6/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reginald Jordan 6 Contributor address; City; State; Zip Code 2405 Pine Hollow Ct Arlington, TX 76006	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Pastor		9 Employer (See Instructions) Inspiring Temple of Praise Church
Date 02/18/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beth Llewellyn McLaughlin Contributor address; City; State; Zip Code 6156 Waco Way Fort Worth, TX 76133	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not employed
Date 02/18/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sabrina Conner Contributor address; City; State; Zip Code 8901 Preakness Cir, Fort Worth, TX 76123	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Behavioral Health		Employer (See Instructions) North Texas Behavioral Health Authority
Date 02/18/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charles Williams Contributor address; City; State; Zip Code 2223 Newbury Dr. Arlington, TX 76014	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Daryl R Davis II		3 Filer ID (Ethics Commission Filers)
4 Date 02/19/19	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Craig <hr/> 6 Contributor address; City; State; Zip Code 4801 Countryside Ct E Fort Worth, TX 76132	7 Amount of contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Computer Programmer		9 Employer (See Instructions) Wells Fargo
Date 02/23/19	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nicole Gatlin <hr/> Contributor address; City; State; Zip Code 7308 Cresswell Dr. Arlington, TX 76001	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Customer Service		Employer (See Instructions) Wells Fargo
Date 02/22/19	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anil Desai <hr/> Contributor address; City; State; Zip Code 2407 Huntersridge Dr. Irving, TX 75063	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) DFW Medical
Date 02/26/19	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Blackshear <hr/> Contributor address; City; State; Zip Code 6256 Horton Cr. Apt B Fort Worth, TX 76133	Amount of contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Code Enforcement Officer		Employer (See Instructions) City of Fort Worth
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Daryl R Davis II		3 Filer ID (Ethics Commission Filers)
4 Date 02/26/19	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chester McGowan <hr/> 6 Contributor address; City; State; Zip Code 529 Roundrock lane Fort Worth, TX 76140	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) General Contractor		9 Employer (See Instructions) CMB&R
Date 02/26/19	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benjamin Mcpherson <hr/> Contributor address; City; State; Zip Code 6505 Cliffside Dr. Fort Worth, TX 76134	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) QuadCo Management Solutions
Date 02/26/19	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Natherral Washington <hr/> Contributor address; City; State; Zip Code 5117 Pato Ct Benbrook, TX 76126	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 02/26/19	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yokona Bell <hr/> Contributor address; City; State; Zip Code 10020 Quail Glen Dr. Fort Worth, TX 76140	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) PSE Sale Associate		Employer (See Instructions) United States Postal Service
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME **Daryl R Davis II**

3 Filer ID (Ethics Commission Filers)

4 Date
02/28/19

5 Full name of contributor out-of-state PAC (ID#: _____)
Pat Wallace

7 Amount of contribution (\$)
\$200.00

6 Contributor address; City; State; Zip Code
4220 Edgewood Ter. Fort Worth, TX 76119

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
02/28/19

Full name of contributor out-of-state PAC (ID#: _____)
Kenneth B. Spears

Amount of contribution (\$)
\$200.00

Contributor address; City; State; Zip Code
6400 Briercliff Ct. Fort Worth, TX 76132

Principal occupation / Job title (See Instructions)
Pastor

Employer (See Instructions)
First St. John Baptist Church

Date

3/23/19

Full name of contributor out-of-state PAC (ID#: _____)
Michael Bell

Amount of contribution (\$)
\$100.00

Contributor address; City; State; Zip Code
3728 E. Berry St. Fort Worth, TX 76105

Principal occupation / Job title (See Instructions)
Pastor

Employer (See Instructions)
Greater St. Stephen First Baptist Church

Date

3/23/19

Full name of contributor out-of-state PAC (ID#: _____)
Ed Justice

Amount of contribution (\$)
\$300.00

Contributor address; City; State; Zip Code
5200 avid Strickland Rd. Fort Worth, TX 76119

Principal occupation / Job title (See Instructions)
Pastor

Employer (See Instructions)
Christ Centered Missionary Baptist Church

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Daryl R Davis II		3 Filer ID (Ethics Commission Filers)
4 Date 02/28/19	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eric Igwe <hr/> 6 Contributor address; City; State; Zip Code 5929 Siltstone Ln, 437 Fort Worth, TX 76137	7 Amount of contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) F-35 FoM Block 4 Project Manager		9 Employer (See Instructions) Lockheed Martin
Date 03/01/19	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenitra Scott <hr/> Contributor address; City; State; Zip Code PO Box 60341 Fort Worth, TX 76115	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/01/19	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Theodora Andrews <hr/> Contributor address; City; State; Zip Code 2409 Lena St. Fort Worth, TX 76105	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Daycare		Employer (See Instructions) ITOPCA
Date 03/11/19	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tawanna Tran <hr/> Contributor address; City; State; Zip Code 8119 Guadalupe Rd. Arlington, TX 76002	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Compensation Manager		Employer (See Instructions) Hunt Oil and Gas
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME **Daryl R Davis II**

3 Filer ID (Ethics Commission Filers)

4 Date
03/13/19

5 Full name of contributor out-of-state PAC (ID#: _____)
Huyen Pham

7 Amount of contribution (\$)
\$100.00

6 Contributor address; City; State; Zip Code
2013 Windsor Place Fort Worth, TX 76110

8 Principal occupation / Job title (See Instructions)
Professor

9 Employer (See Instructions)
Texas A&M University

Date
03/14/19

Full name of contributor out-of-state PAC (ID#: _____)
Bruce Miller

Amount of contribution (\$)
\$100.00

Contributor address; City; State; Zip Code
3932 Weyburn Dr. Fort Worth, TX 76109

Principal occupation / Job title (See Instructions)
Not Employed

Employer (See Instructions)
Not Employed

Date
03/14/19

Full name of contributor out-of-state PAC (ID#: _____)
Antje Crawford

Amount of contribution (\$)
\$100.00

Contributor address; City; State; Zip Code
2904 Early Fawn Ct. Fort Worth, TX 76108

Principal occupation / Job title (See Instructions)
Sr Business Analyst

Employer (See Instructions)
First Command Financial Services

Date
03/16/19

Full name of contributor out-of-state PAC (ID#: _____)
David Blackshear

Amount of contribution (\$)
\$200.00

Contributor address; City; State; Zip Code
6256 Horton Circle Apt B Fort Worth, TX 76133

Principal occupation / Job title (See Instructions)
Not Employed

Employer (See Instructions)
Not Employed

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Daryl R Davis II		3 Filer ID (Ethics Commission Filers)
4 Date 03/16/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edy Lou Mayfield <hr/> 6 Contributor address; City; State; Zip Code 6140 Avery Dr., Apt 6103 Fort, TX 76132	7 Amount of contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) None		9 Employer (See Instructions) None
Date 03/18/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montreal Dukes <hr/> Contributor address; City; State; Zip Code 6509 Willow Oak Court Fort Worth, TX 76112	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Pastor		Employer (See Instructions) CLCF
Date 03/21/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VonDerrick Hughes <hr/> Contributor address; City; State; Zip Code 3916 Irish Setter Dr. Fort Worth, TX 76123	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Train Dispatcher		Employer (See Instructions) Rio Grande Pacific
Date 03/22/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alisha Parker <hr/> Contributor address; City; State; Zip Code 2504 Sandy Trail Keller, TX 76248	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) SCP
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Daryl R. Davis II

3 Filer ID (Ethics Commission Filers)

4 Date

3/4/19

5 Full name of contributor

out-of-state PAC (ID#: _____)

Gary and Martha Hunt

7 Amount of contribution (\$)

\$100.00

6 Contributor address;

City; State; Zip Code

13212 Stari Most Lane Crowley, TX 76036

8 Principal occupation / Job title (See Instructions)

None Stated

9 Employer (See Instructions)

None Stated

Date

2/20/19

Full name of contributor

out-of-state PAC (ID#: _____)

Adrian Howard

Amount of contribution (\$)

\$250.00

Contributor address;

City; State; Zip Code

4070 N. Bellline Rd. #116 Irving, TX 75038

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID#: _____)

Contributor address;

City; State; Zip Code

Amount of contribution (\$)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID#: _____)

Contributor address;

City; State; Zip Code

Amount of contribution (\$)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:

1

2 FILER NAME

Daryl R. Davis II

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS

\$

5 Date of loan

2/7/19

7 Name of lender

Daryl R. Davis II

out-of-state PAC (ID#: _____)

9 Loan Amount (\$)

\$1400.00

6 Is lender a financial institution?

Y N

8 Lender address;

City; State; Zip Code

9216 Vineyard Lane Fort Worth, TX 76123

10 Interest rate

11 Maturity date

12 Principal occupation / Job title (See Instructions)

Educator

13 Employer (See Instructions)

ITOP Academy

14 Description of Collateral

none

15 Check if personal funds were deposited into political account (See Instructions)

16 GUARANTOR INFORMATION

not applicable

17 Name of guarantor

18 Guarantor address;

City; State; Zip Code

19 Amount Guaranteed (\$)

20 Principal Occupation (See Instructions)

21 Employer (See Instructions)

Date of loan

2/6/19

Name of lender

Daryl R. Davis II

out-of-state PAC (ID#: _____)

Loan Amount (\$)

\$100

Is lender a financial institution?

Y N

Lender address;

City; State; Zip Code

9216 Vineyard Lane Fort Worth, TX 76123

Interest rate

Maturity date

Principal occupation / Job title (See Instructions)

Educator

Employer (See Instructions)

ITOP Academy

Description of Collateral

none

Check if personal funds were deposited into political account (See Instructions)

GUARANTOR INFORMATION

not applicable

Name of guarantor

Guarantor address;

City; State; Zip Code

Amount Guaranteed (\$)

Principal Occupation (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL EXPENDITURES MADE 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.

1 Total pages Schedule F1: 5	2 FILER NAME Daryl R. Davis II	3 Filer ID (Ethics Commission Filers)
--	--	---------------------------------------

4 Date 03/08/19	5 Payee name Prima Pasta & Pizza
---------------------------	--

6 Amount (\$) \$155.88	7 Payee address; City; State; Zip Code 6108 S. Hulen St Fort Worth, TX 76133
----------------------------------	--

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food and Beverage Expense Neighborhood Meeting Food	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
------------------------------------	--	---

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Daryl R. Davis II	Office sought Fort Worth City Council District 6	Office held
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Date 03/11/19	Payee name No Name AD
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Amount (\$) \$382.12	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other T-Shirt Campaign	Description <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 Daryl R. Davis II	Office sought Fort Worth City Council District 6	Office held
---	---	--	-------------

Date 03/11/19	Payee name Bankem Printing
-------------------------	--------------------------------------

Amount (\$) \$259.80	Payee address; City; State; Zip Code 2357 S. Collins St. Arlington, TX 76014
--------------------------------	--

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense Marketing Material	Description <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 Daryl R. Davis II	Office sought Fort Worth City Council District 6	Office held
---	---	--	-------------

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE 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 | 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) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Daryl R. Davis II	3 Filer ID (Ethics Commission Filers)
-----------------------------------	---	--

4 Date 03/21/19	5 Payee name Ed Gray Associates
----------------------------------	--

6 Amount (\$) \$175.00	7 Payee address; City; State; Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i> <i>Run Campaign Ads</i>	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
---	--	--

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Daryl R. Davis II	Office sought Fort Worth City Council District 6	Office held
---	--	---	--------------------

Date 03/22/19	Payee name Texas Democratic Party
--------------------------------	--

Amount (\$) \$243.34	Payee address; City; State; Zip Code
---------------------------------------	---

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Van Access</i> <i>Event Expense</i>	Description <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 Daryl R. Davis II	Office sought Fort Worth City Council District 6	Office held
--	--	---	--------------------

Date 03/25/19	Payee name Wilson Awards
--------------------------------	---

Amount (\$) \$1407.25	Payee address; City; State; Zip Code <i>3000 E. Loop 820 S. Fort Worth, TX 76119</i>
--	--

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i> <i>Yard Signs</i>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Daryl R. Davis II	Office sought Fort Worth City Council District 6	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE 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	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)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME <i>Daryl R. Davis II</i>	3 Filer ID (Ethics Commission Filers)
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4 Date 02/08/19	5 Payee name The Social Robin
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6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Advertising Expense Campaign Logo</i>	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Daryl R. Davis II	Office sought Fort Worth City Council District 6	Office held
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Date 02/13/19	Payee name Vision Push
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Amount (\$) \$450.00	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising Expense Website Design</i>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Daryl R. Davis II	Office sought Fort Worth City Council District 6	Office held
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Date 02/19/19	Payee name SQC Tim White
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Amount (\$) \$300.00	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising Expense Photographer</i>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Daryl R. Davis II	Office sought Fort Worth City Council District 6	Office held
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POLITICAL EXPENDITURES MADE 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	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)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME <i>Daryl R. Davis II</i>	3 Filer ID (Ethics Commission Filers)
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4 Date 02/27/19	5 Payee name SQC Eric Catering
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6 Amount (\$) \$350.00	7 Payee address; City; State; Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Event Expense</i> <i>Catered Food for Campaign Kickoff</i>	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Daryl R. Davis II	Office sought Fort Worth City Council District 6	Office held
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Date 02/28/19	Payee name The Guitar Center
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Amount (\$) \$440.00	Payee address; City; State; Zip Code <i>5250 S. Hulen St. Fort Worth, TX 76132</i>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Event Expense</i> <i>Rent Sound System</i>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Daryl R. Davis II	Office sought Fort Worth City Council District 6	Office held
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Date 03/01/19	Payee name Bankem Printing
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Amount (\$) \$174.08	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i> <i>Marketing Materials</i>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Daryl R. Davis II	Office sought Fort Worth City Council District 6	Office held
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POLITICAL EXPENDITURES MADE 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.

1 Total pages Schedule F1:	2 FILER NAME Daryl R. Davis II	3 Filer ID (Ethics Commission Filers)
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4 Date 3/10/19	5 Payee name Agape Filmworks
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6 Amount (\$) \$ 200.00	7 Payee address; City; State; Zip Code 2252 Old Leonard St Fort Worth TX 76119
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense Video for Campaign	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Daryl R. Davis II	Office sought Fort Worth City Council District 6	Office held
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Date 2/28/19	Payee name Aguilar Events & Performance Center
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Amount (\$) \$ 500.00	Payee address; City; State; Zip Code 6901 McCart Ave # 150 Fort Worth, TX 76133
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense, Campaign Venue Rental Kickoff	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Daryl R. Davis II	Office sought Fort Worth City Council District 6	Office held
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Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Daryl R. Davis II	Office sought Fort Worth City Council District 6	Office held
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