CANDIDATE / OFFICEHOLDER CITY SECRETARY CAMPAIGN FINANCE REPORT FT. WORTH, TX

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

The C/OH Instruction Guide explains how to complete this form. 1 Filer ID 2 Total pages filed: 222 3 CANDIDATE / OFFICEHOLDER NAME Mr. Daryl MS / MRS / MR FIRST MI Daryl R. Date Received CSO REC'D APR 25 '25 AM 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE APR 25 '25 AM PO Box 531 Fort Worth, TX 76101 5 CAMPAIGN TREASURER NAME MS / MRS / MR FIRST MI NICKNAME LAST SUFFIX MI NEASURER NAME MS / MRS / MR FIRST MI NICKNAME LAST SUFFIX Spears 6 CAMPAIGN TREASURER ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; APT / SUITE #; CITY; STATE; APT / SUITE #; CITY; STATE; TOTAL POPULATION APP / SUITE #; CITY; S							
OFFICEHOLDER NAME Mr. Daryl R. Date Received CSO REC'D AFR 25 '25 AM 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE ADDRESS Change of Address Change of Address Fort Worth, TX 76101 TREASURER NAME MS / MRS / MR FIRST Mr. Kenneth B MICKNAME LAST SUFFIX Spears 6 CAMPAIGN TREASURER ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; TREASURER ADDRESS (Residence or Business) 2401 E Berry St. Fort Worth TX 7 CAMPAIGN TREASURER AREA CODE PHONE NUMBER EXTENSION TREASURER AREA CODE PHONE NUMBER EXTENSION							
NICKNAME LAST Davis 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS ADDRESS PO Box 531 Fort Worth, TX 76101 Fort Worth, TX 76101 Date Imaged MS / MRS / MR Mr. Kenneth B NICKNAME LAST SUFFIX Receipt # Amo Date Processed Date Imaged MS / MRS / MR Mr. Kenneth B NICKNAME LAST Suffix Spears 6 CAMPAIGN TREASURER ADDRESS (Residence or Business) Z401 E Berry St. APT / SUITE #; CITY; STATE; Fort Worth TX Fort Worth TX TX TABLES ADDRESS TREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; TOTH Worth TX TOTH Worth TX TABLES ADDRESS	ONLY						
Davis Davis II AFR 25 '25 AM AFR							
OFFICEHOLDER MAILING ADDRESS Change of Address	11:32						
Fort Worth, TX 76101 Date Processed							
5 CAMPAIGN TREASURER NAME Mr. Kenneth B NICKNAME LAST SUFFIX Spears 6 CAMPAIGN TREASURER ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; TREASURER ADDRESS (Residence or Business) 2401 E Berry St. Fort Worth TX 7 CAMPAIGN TREASURER							
TREASURER NAME Mr. Kenneth B NICKNAME LAST Spears 6 CAMPAIGN TREASURER ADDRESS (Residence or Business) STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; TOTT TOTT TOTT AREA CODE PHONE NUMBER EXTENSION							
NAME Mr. Kenneth B NICKNAME LAST SUFFIX Spears 6 CAMPAIGN TREASURER ADDRESS (Residence or Business) 2401 E Berry St. APT / SUITE #; CITY; STATE; Fort Worth TX 7 CAMPAIGN TREASURER AREA CODE PHONE NUMBER EXTENSION							
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6 CAMPAIGN TREASURER ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; TREASURESS (Residence or Business) 2401 E Berry St. Fort Worth TX 7 CAMPAIGN TREASURER AREA CODE PHONE NUMBER EXTENSION							
TREASURER ADDRESS (Residence or Business) 2401 E Berry St. Fort Worth TX 7 CAMPAIGN TREASURER AREA CODE PHONE NUMBER EXTENSION							
7 CAMPAIGN AREA CODE PHONE NUMBER EXTENSION TREASURER	ZIP CODE						
TREASURER	76105						
8 REPORT TYPE January 15 July 15 X 8th day before election Exceeded modified reporting limit Final Report (Attach C/O reporting limit	r only)						
9 PERIOD Month Day Year Month Day Year COVERED 03/25/2025 THROUGH 04/23/2025							
10 ELECTION BLECTION DATE Month Day Year 05/03/2025 X General ELECTION TYPE Runoff Special							
11 OFFICE OFFICE HELD (if any) Crowley ISD Trustee Place 5 12 OFFICE SOUGHT (if known) Fort Worth City Council District 6							
GO TO PAGE 2							

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTAL S

FORM C/OH COVER SHEET PG 2

SUPPORT	& TOTALS	COVE	R SHEE	2 of 22				
13 C / OH NAME	Davis, Daryl		14 Filer ID					
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.								
Additional Pages								
	SPECIFIC							
		COMMITTEE CAMPAIGN TREASURER NAME						
16 CONTRIBUTION TOTALS		I IIZED POLITICAL CONTRIBUTIONS (OTHER THA EES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$	0.00			
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	S)	\$	4,295.00			
EXPENDITURE TOTALS	3. TOTAL UNITEM	IIZED POLITICAL EXPENDITURES		\$	0.00			
		CAL EXPENDITURES		\$	4,654.34			
CONTRIBUTION BALANCE	REPORTING PE			\$	9,925.35			
OUTSTANDING LOAN TOTALS		PAL AMOUNT OF ALL OUTSTANDING LOANS AS RTING PERIOD	OF THE LAST DAY	\$	0.00			
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. JANNETTE GOODALL Notary ID #129046183 My Commission Expires July 2, 2028 AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said								
Signature of office		Printed name of officer administering	Title of officer a	administerin	ig oath			

FORM C/OH **SUBTOTALS - C/OH COVER SHEET PG 3** 3 of 22 **18 FILER NAME** 19 Filer ID Davis, Daryl **20 SCHEDULE SUBTOTALS** SUBTOTAL AMOUNT NAME OF SCHEDULE X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 4,295.00 SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ SCHEDULE B: PLEDGED CONTRIBUTIONS SCHEDULE E: LOANS SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS X \$ 4,300.69 SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 6. \$ SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD 8. \$ SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS X 353.65 \$ 10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH \$ 11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 12. \$ TO FILER

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 1/6 Rpt: 4/22 2 FILER NAME 3 Filer ID Davis, Daryl 4 Date 5 Full name of contributor 7 Amount of Contribution (\$) out-of-state PAC (ID#: 04/23/2025 Allen, Trista \$50.00 6 Contributor address; City; State; Zip Code 4701 Foxfire Way Fort Worth, TX 76133-6120 Principal occupation / Job title (See Instructions) Employer (See Instructions) Associate director **TTLA** Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 04/02/2025 \$100.00 Bell, Michael Contributor address; City; State; Zip Code P. O. Box 51240 Fort Worth, TX 76105 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Self-employed Michael Bell Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 04/23/2025 \$250.00 Birabil, Lorraine Contributor address; City; State; Zip Code 5052 Hollow Ridge Rd Dallas, TX 75227 Principal occupation / Job title (See Instructions) Employer (See Instructions) Elaine Law Group Attorney Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 04/23/2025 Brooks, Roy C \$500.00 Contributor address; City; State; Zip Code 5032 Highland Meadow Dr Fort Worth, TX 76132 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Retired N/A Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 04/12/2025 \$50.00 Campbell, Davin Contributor address; City; State; Zip Code 990 Singleton Blvd Dallas, TX 75212 Principal occupation / Job title (See Instructions) Employer (See Instructions) Engineer Lockheed Martin

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 2/6 Rpt: 5/22	
2	FILER NAME Davis, Daryl			3	Filer ID	
4	Date 04/23/2025	 Full name of contributor out-of-state PAC (ID#:_Collins, Jolynda Contributor address; City; State; Zip Code 2001 Broadleaf Dr Arlington, TX 76001 	7	Amount of Contribution (\$)	\$100.00	
8	Principal occu Teacher	pation / Job title (See Instructions)	9 Employer (See Instructions Grace Prep)		
	Date 04/11/2025	Full name of contributor out-of-state PAC (ID#:_ Corzine, Jay Contributor address; City; State; Zip Code 11521 Cactus Springs Dr Keller, TX 76244		Amount of Contribution (\$)	\$50.00	
	Principal occu Accountant	pation / Job title (See Instructions)	Employer (See Instructions BNSF Railway)		
	Date O4/18/2025 Full name of contributor out-of-state PAC (ID#:) DAVIS, JEFF Contributor address; City; State; Zip Code 2325 Mistletoe Drive Fort Worth, TX 76110				Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions Republic Title of Texas)		
	Date O4/17/2025 Full name of contributor out-of-state PAC (ID#:				Amount of Contribution (\$)	\$100.00
	Principal occu Not Employe	pation / Job title (See Instructions)	Employer (See Instructions Not Employed)		
	Date 03/27/2025	Full name of contributor out-of-state PAC (ID#:_ Davis, June Contributor address; City; State; Zip Code 6106 Tuscan Ln Fort Worth, TX 76123		Amount of Contribution (\$)	\$100.00	
	Principal occu Retired	pation / Job title (See Instructions))			

	MONET	FARY POLITICAL CONTRIBUTIO)NS		SCHEDUL	.е А1		
	The Instru	uction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 3/6 Rpt: 6/22			
2	FILER NAME Davis, Daryl			3	Filer ID			
	Date 04/01/2025	6 Contributor address; City; State; Zip Code 8908 Puerto Vista Dr. Fort Worth, TX 76179)	7	Amount of Contribution (\$)	\$100.00		
8	Principal occu Educator	upation / Job title (See Instructions)	Employer (See Instructions BISD)				
	Date 04/23/2025	Full name of contributor out-of-state PAC (ID#:_ Henderson, Marquis Contributor address; City; State; Zip Code 880 W Euless Blvd Euless, TX 76040		Amount of Contribution (\$)	\$100.00			
	Principal occu Not Employe		Employer (See Instructions) Not Employed)				
	Date 04/23/2025 Full name of contributor out-of-state PAC (ID#:) Holmes, Camille Contributor address; City; State; Zip Code 8200 Clarksprings Drive 5303 Dallas, TX 75236				Amount of Contribution (\$)	\$80.00		
	Principal occu Education	upation / Job title (See Instructions)	Employer (See Instructions) Sirius Education Solution			Annual		
	Date Full name of contributor out-of-state PAC (ID#:) 04/11/2025 Hornsby, Leonard Contributor address; City; State; Zip Code 1006 Wedgewood Drive				Amount of Contribution (\$)	\$100.00		
	Principal occu Executive Pa	Mansfield, TX 76063 upation / Job title (See Instructions) astor	Employer (See Instructions) BBC)				
	Date 04/23/2025	Full name of contributor out-of-state PAC (ID#:_ Jones, Debra Contributor address; City; State; Zip Code 712 Brody Trl Aledo, TX 76008		Amount of Contribution (\$)	\$100.00			
	Principal occup Not Employe							

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 4/6 Rpt: 7/22 2 FILER NAME 3 Filer ID Davis, Daryl Date 7 Amount of Contribution (\$) 5 Full name of contributor out-of-state PAC (ID#: 04/04/2025 Jones, Tai \$1,000.00 Contributor address; City; State; Zip Code 3540 E. Broad Ste120-295 Mansfield, TX 76063 Principal occupation / Job title (See Instructions) Employer (See Instructions) Consultant The Tillis Group Date Full name of contributor out-of-state PAC (ID#:_ Amount of Contribution (\$) 03/26/2025 Kepner, Marilyn \$20.00 Contributor address; City; State; Zip Code 8500 Tangleridge Drive Fort Worth, TX 76123 Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Not Employed Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date 04/23/2025 Knight, Leittia \$100.00 Contributor address; City; State; Zip Code 4913 Cedar River Trail Fort Worth, TX 76137 Principal occupation / Job title (See Instructions) Employer (See Instructions) **Application Analyst Texas Health Resources** Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 04/14/2025 Miller, Amber \$500.00 Contributor address; City; State; Zip Code 4804 Spicewood Lane Arlington, TX 76017 Principal occupation / Job title (See Instructions) Employer (See Instructions) Educator **RES** Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#:_ 04/23/2025 \$50.00 Miller, Bruce Contributor address; City; State; Zip Code 3932 Weyburn Dr. Fort Worth, TX 76109 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 5/6 Rpt: 8/22 2 FILER NAME 3 Filer ID Davis, Daryl 7 Amount of Contribution (\$) 4 Date 5 Full name of contributor out-of-state PAC (ID#: 04/23/2025 Parker, Adrian \$250.00 Contributor address; City; State; Zip Code 2504 SANDY TRAIL Keller, TX 76248 Principal occupation / Job title (See Instructions) Employer (See Instructions) Executive Adrian Parker Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#:_ \$20.00 04/01/2025 Robinzine, Kevin Contributor address; City; State; Zip Code 939 Scenic Hill Drive #620 Bedford, TX 76022 Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Not Employed Date Amount of Contribution (\$) out-of-state PAC (ID#: Full name of contributor \$10.00 04/23/2025 Robinzine, Kevin Contributor address; City; State; Zip Code 939 Scenic Hill Drive #620 Bedford, TX 76022 Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Not Employed Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) \$15.00 04/23/2025 Sims, Andre Contributor address; City; State; Zip Code 3005 Sarah Jane Lane Fort Worth, TX 76119 Principal occupation / Job title (See Instructions) Employer (See Instructions) Tree of Life Funeral Directors **Funeral Director** Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$100.00 03/25/2025 Smith, Jason Contributor address; City; State; Zip Code 600 8th Ave Fort Worth, TX 76104 Principal occupation / Job title (See Instructions) Employer (See Instructions) Law Offices of Jason Smith Attorney

	MONETARY POLITICAL CONTRIBUTIONS		SCHEDUL	E A1
77	The Instruction Guide explains how to complete this form.	1	Total pages Schedule A1: Sch: 6/6 Rpt: 9/22	
2	FILER NAME Davis, Daryl	3	Filer ID	
4	Date 03/25/2025 5 Full name of contributor out-of-state PAC (ID#:) Starling, Christy D. 6 Contributor address; City; State; Zip Code 2909 E Arkansas Ln #C444 Arlington, TX 76010	7	Amount of Contribution (\$)	\$100.00
8	Principal occupation / Job title (See Instructions) Insurance Sales 9 Employer (See Instructions Allstate	s)		
	Date O4/01/2025 Stevenson, Kelicia Contributor address; City; State; Zip Code 10609 Moss Cove Dr Crowley, TX 76036		Amount of Contribution (\$)	\$100.00
	Principal occupation / Job title (See Instructions) Not Employed Not Employed	5)		

SCHEDULE F1

Advertising Expense

Loan Repayment/Reimbursement
Office Overhead/Rental Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Food/Beverage Expense Gift/Awards/Memorials Ex Legal Services		Polling E Printing Salaries	Expense Expense (Wages	se s/Contract Labor		Travel in District Travel Out of District OTHER (enter a category not listed		
L			Market and the second	The Instruction Guid	le explains h	now to c	omple	ete this form.			
1	Total pages Schedule F1:	2							3	Filer ID	
L	Sch: 1/12 Rpt: 10/22	L	Davis, Dary	1					L	A SHIP OF THE SHIP	
4	Date 04/01/2025	5	Payee name Act Blue								
6	Amount (\$)	7	Payee addre	ss; City;	State:	Zip C	ode		annella francisco		
	\$90.08		PO Box 442	1146							
Ļ		Ļ	Somerville,				Las				
8	PURPOSE OF	(a)		ee Categories listed at the	top of this sche	edule)	(b)	Description	outoi	de of Texas. Complete Schedule T.	
	EXPENDITURE		Fees							officeholder living expense	
								Service fees			
9	Complete ONLY if direct expenditure to benefit C/Oh		Candidate/Offi	ceholder name	0	ffice so	ught			Office held	The second secon
MIT PERSON	Date		Payee name		211 - 4 7				and the same	Mary Park, September 1994, September 1994, Mary 1994, September 1994, Septembe	
	03/28/2025		Bankem Pri								
	Amount (\$)	_	Pavee addre	ss; City;	State;	Zip C	ode				ACCRECATION OF THE PARTY OF THE
	\$281.45		2357 S. Co		,	-,-					
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			Arlington, T	X 76014							
	PURPOSE	(a)	Category (S	ee Categories listed at the	top of this sche	dule)	(b)	Description			
	OF EXPENDITURE		Printing Exp	oense						de of Texas. Complete Schedule T.	
	AMARON AND STREET, STR							document pri		officeholder living expense	
								document pri		19	
_	Complete ONII V if direct	L.,	Candidate/Off	ceholder name		Higg on	l ught		A46.5	Office held	
	Complete ONLY if direct expenditure to benefit C/OH		zanuluale/Om	centituer name	O	ffice so	ugnt			Office field	
											THE TAX TO SEE THE TA
	Date		Payee name								
	04/03/2025		Black Coffe	е							
	Amount (\$)		Payee addre	ss; City;	State;	Zip C	ode				
	\$16.66		1417 Vaugh	nn Blvd							
			Fort Worth,	TX 76105							
	PURPOSE	(a)	Category (S	ee Categories listed at the	top of this sche	dule)	(b)	Description			7.00
	OF EXPENDITURE			age Expense		,		Check if travel		de of Texas. Complete Schedule T.	
	EXPENDITURE									officeholder living expense	
								candidate me	eeti	ng	
										A	0.1
	Complete ONLY if direct		Candidate/Offi	ceholder name	0	ffice so	ught			Office held	
	expenditure to benefit C/O	'									

SCHEDULE F1

Advertising Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			mmittee	Gift/Awards/ Legal Servic			Polling E Printing Salaries	Expense Expense Wages			Travel in District Travel Out of Distric	pment & Related Expense
1	Total pages Schedule F1:	2	EII ED NAME							3	Filer ID	
ľ	Sch: 2/12 Rpt: 11/22	_	Davis, Dary							3	FIIEL ID	
4	Date	5	Payee name	!								
	04/01/2025		Canva									
6	Amount (\$)	7	Payee addre	ss; Ci	ty;	State;	Zip C	Code				
	\$120.00		200 E 6th S	Street								
			Austin, TX	78701								
_	DUDDOCE	(0)						T(b)	D			
8	PURPOSE OF	(a)	Category (Se				edule)	(0)	Description Check if travel	outsi	ide of Texas. Comple	te Schedule T.
	EXPENDITURE		Office Over	neau/Rei	пап Ехреп	se			<u></u>		, officeholder living ex	
									subscription			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Offi	iceholder r	name	0	ffice so	ught			Office held	
	Date		Payee name									AND THE PERSON NAMED OF STREET OF STREET, STRE
	04/03/2025		Cava									
-	Amount (\$)		Payee addre	ss; Ci	ty;	State;	Zip C	ode	THE RESERVE ASSESSMENT			
	\$12.07		5500 McPh	erson Blv	/d							
			Fort Worth,	TX 7612	3							
	PURPOSE	(a)	Category (Se	ee Categories	s listed at the tor	n of this sche	edule)	(b)	Description	-		
	OF EXPENDITURE		Food/Bever				/		Check if travel	outsi	ide of Texas. Comple	te Schedule T.
	EXPENDITORE									, TX,	, officeholder living ex	pense
									staff meal			
		Ļ						<u></u>		-		
	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Offi	iceholder r	name	O	ffice so	ught			Office held	
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	Date		Payee name									
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			Fort Worth,	TX 7612	3							
	PURPOSE	(a)	Category (Se	ee Categories	listed at the top	o of this sche	dule)	(b)	Description			
	OF EXPENDITURE		Food/Bever	age Expe	ense						de of Texas. Comple	
									volunteer bev		, officeholder living ex	pense
									Jointeer Dev		~900	
	Complete ONLY if direct		Candidate/Offi	iceholder n	name		ffice so	uaht			Office held	
	expenditure to benefit C/O		Janaraate/OIII	John Dide I	.amo	J	30	agiit			Since neiu	
		_										

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	al Committee Legal Services	Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
	The Instruction Guide explains h	ow to complete this form.	
Total pages Schedule F1: Sch: 3/12 Rpt: 12/22	2 FILER NAME Davis, Daryl	3	Filer ID
4 Date 04/02/2025	5 Payee name EDSI		
6 Amount (\$) \$348.43	7 Payee address; City; State; 203 S. Beltline Rd Irving, TX 75060	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sche Advertising Expense	Check if travel out	side of Texas. Complete Schedule T. K, officeholder living expense
Complete ONLY if direct expenditure to benefit C/O		ffice sought	Office held
Date 03/31/2025	Payee name FedEx Office		
Amount (\$) \$3.41.	Payee address; City; State; 6020 Camp Bowie Blvd Fort Worth, TX 76116	Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sche Printing Expense	Check if travel outs	side of Texas. Complete Schedule T. ζ, officeholder living expense PS
Complete <u>ONLY</u> if direct expenditure to benefit C/O		ffice sought	Office held
Date 04/21/2025	Payee name Gloria's		
Amount (\$) \$97.00	2600 W 7th	Zip Code	
	Fort Worth, TX 76107		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sche Food/Beverage Expense	Check if travel outs	side of Texas. Complete Schedule T. K, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/O		fice sought	Office held
Forms provided by Toyos F	thics Commission was athics st		Varsion V4.1.0 a02d6221

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		Fees O Food/Beverage Expense Pi Gift/Awards/Memorials Expense Pi	Office Overhea Polling Expens Printing Expen Salaries/Wage	se s/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:	2	FILER NAME			3	Filer ID
	Sch: 4/12 Rpt: 13/22		Davis, Daryl				
4	Date	5	Payee name				
	03/30/2025		Great Commission Baptist Church				
6	Amount (\$) \$100.00	7	Payee address; City; State; Z 7700 McCart Ave Fort Worth, TX 76133	Zip Code			
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedul Contributions/Donations Made By Candidate/Officeholder/Political Committee				de of Texas. Complete Schedule T. officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh		Candidate/Officeholder name Office	ice sought			Office held
	Date		Payee name			,,,,,,,,,,	*
	04/02/2025		Home Depot				
	Amount (\$)		E N EN D	Zip Code			
	\$181.41		7950 South Fwy Fort Worth, TX 76134				
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedul Advertising Expense	ule) (b)		TX,	de of Texas, Complete Schedule T. officeholder living expense PS
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Offic	ce sought			Office held
	Date 03/30/2025		Payee name Hudson House				
	Amount (\$) \$137.99		4600 Dexter Ave	Zip Code			
_		L	Fort Worth, TX 76107				
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedul Food/Beverage Expense	_{lle)} (b)			de of Texas. Complete Schedule T. officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Offic	ce sought			Office held

SCHEDULE F1

Advertising Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement
Office Overhead/Rental Expanse

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment	Food/Beverage Expense P Glft/Awards/Memorials Expense P Committee Legal Services S	Food/Beverage Expense Polling Expense Trav Gift/Awards/Memorials Expense Printing Expense Trav Legal Services Salaries/Wages/Contract Labor OTH		
ordan dara r aymon	The Instruction Guide explains ho	v to complete this form.		
1 Total pages Schedule F1:	2 FILER NAME	3	Filer ID	
Sch: 5/12 Rpt: 14/22	Davis, Daryl			
4 Date	5 Payee name			
04/07/2025	Little Red Wasp			
	·	Zin Codo		
		Zip Code		
\$19.82	808 Main St.			
	Fort Worth, TX 76102			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedu	(b) Description		
OF EXPENDITURE	Food/Beverage Expense		side of Texas. Complete Schedule T.	
EXPENDITORE			X, officeholder living expense	
		staff meal		
		NAMES OF THE PROPERTY OF THE P		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		ce sought	Office held	
SAPETIGITATE TO DETICITE C/OT				
Date	Payee name			
04/15/2025	Malai Kitchen			
Amount (\$)	Payee address; City; State; 2	Zip Code		
\$142.00	5289 Monahans Ave			
	Fort Worth TV 76100			
	Fort Worth, TX 76109			
PURPOSE OF	(a) Category (See Categories listed at the top of this schedu			
EXPENDITURE	Food/Beverage Expense	to the same of the	side of Texas. Complete Schedule T. X, officeholder living expense	
		staff meal	X, officerolaer living expense	
Complete ONLY if direct	Candidate/Officeholder name Offi	ce sought	Office held	
expenditure to benefit C/OH		ce sought	Office field	
Date	Payee name			
04/17/2025	Malai Kitchen			
Amount (\$)	Payee address; City; State; 2	Lip Code		
\$176.00	5289 Monahans Ave			
	Fort Worth, TX 76109			
PURPOSE		(h) Donadation		
OF	(a) Category (See Categories listed at the top of this schedule Food/Beverage Expense		side of Texas. Complete Schedule T.	
EXPENDITURE	Food/Beverage Expense		X, officeholder living expense	
		staff meal		
Complete ONLY if direct	Candidate/Officeholder name Offi	L ce sought	Office held	
expenditure to benefit C/OH		ene vertrat V ertr		

SCHEDULE F1

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 The Instruction Guide explains how to complete this form.	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:		3 Filer ID
ľ	Sch: 6/12 Rpt: 15/22	Davis, Daryl	3 File ID
4	Date	Payee name	
	04/06/2025	Maria's	
	Amount (\$) \$84.00	Payee address; City; State; Zip Code 1712 S University Dr Fort Worth, TX 76107	
8	PURPOSE OF EXPENDITURE	1 Ood/Develage Expense	utside of Texas. Complete Schedule T. TX, officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/O	andidate/Officeholder name Office sought	Office held
Г	Date	Payee name	
_	04/19/2025	McDonalds	
	Amount (\$) \$14.99	Payee address; City; State; Zip Code 4375 Risinger Rd	
L		Fort Worth, TX 76123	
	PURPOSE OF EXPENDITURE	Odd/Develage Expense	utside of Texas. Complete Schedule T. TX, officeholder living expense erages
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	andidate/Officeholder name Office sought	Office held
	Date 03/31/2025	Payee name Office Depot	
	Amount (\$) \$51.48	Payee address; City; State; Zip Code 4613 S Hulen St, Unit B Fort Worth, TX 76132	
	PURPOSE	Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense	utside of Texas. Complete Schedule T. TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/Oh	andidate/Officeholder name Office sought	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Gift/Awards/Memorial ommittee Legal Services	ood/Beverage Expense Polling Expense ift/Awards/Memorials Expense Printing Expense egal Services Salaries/Wages/Contract Labor		Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
L		And the second s	Guide explains how to con		
1	Total pages Schedule F1: Sch: 7/12 Rpt: 16/22	FILER NAME Davis, Daryl		ľ	B Filer ID
4	Date 04/04/2025	Payee name Office Depot		•	
6	Amount (\$) \$91.87	Payee address; City; 401 CARROLL STREET	State; Zip Coo	le	
8	PURPOSE OF EXPENDITURE	Fort Worth, TX 76107 Category (See Categories listed at Office Overhead/Rental Ex			tside of Texas. Complete Schedule T. TX, officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name	Office soug	ht	Office held
	Date	Payee name			
	04/14/2025	Office Depot			
	Amount (\$) \$9.73	Payee address; City; 401 CARROLL STREET	State; Zip Cod	е	
		Fort Worth, TX 76107			
	PURPOSE OF EXPENDITURE) Category (See Categories listed at Office Overhead/Rental Ex			tside of Texas. Complete Schedule T. X, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name	Office soug	ht	Office held
	Date 03/28/2025	Payee name Reilly Echols		444	
	Amount (\$) \$767.10	Payee address; City; 1710 S Harwood St	State; Zip Cod	е	
		Dallas, TX 75215			
	PURPOSE OF EXPENDITURE) Category (See Categories listed at Advertising Expense	the top of this schedule)		tside of Texas. Complete Schedule T. X, officeholder living expense d lapel stickers
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name	Office soug	ht	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Reymont			Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor					Travel in District Travel Out of District OTHER (enter a category not listed above)		
	Credit Card Payment		The Instruction Guide	explains how	to compl	ete this form.				
1	1 Total pages Schedule F1: 2 FILER NAI		IE				3	Filer ID		
	Sch: 8/12 Rpt: 17/22	Davis, Dar	yl							
4	Date	5 Payee nam	е		-1.31					
	04/21/2025	Reilly Ech	ols							
6	Amount (\$)	7 Payee addr	ess; City;	State; Zi	p Code			The second section of the sect		
	\$357.46	1710 S Ha	rwood St							
		Dallas, TX	75215							
8	PURPOSE OF	(a) Category (See Categories listed at the top	of this schedule	(b)	Description				
	EXPENDITURE	Advertising	g Expense			and the same of th		de of Texas. Complete Schedule T. officeholder living expense		
						push cards	, 17,	unicential inving expense		
						The second second second				
9	Complete ONLY if direct expenditure to benefit C/OI		ficeholder name	Office	sought			Office held		
	experiulture to benefit C/O						-	The American and the State of the Assessment Company of the State of t	***********	
	Date	Payee name	9					The second secon		
	04/14/2025	Slice City I	Pizza							
	Amount (\$)	Payee addr	ess; City;	State; Zi	Code					
	\$9.94	7445 Oakr	nont Blvd							
		Fort Worth	, TX 76132							
	PURPOSE	(a) Category (See Categories listed at the top	of this schedule	(b)	Description				
	OF EXPENDITURE	Food/Beve	rage Expense					de of Texas. Complete Schedule T. officeholder living expense		
						staff meal	, 17,	Unicertailer living expense		
erranen.	Complete ONLY if direct	Candidate/Of	ficeholder name	Office	sought		-	Office held	· ·	
	expenditure to benefit C/OI	4								
-	Date	Payee name						enter de profesion de la companya de la proprieta de la proprieta de la proprieta de la companya de la companya Non a del Livra la companya de la companya del la companya del la companya del la companya de la companya de la companya del la	41-11	
	04/14/2025	Slice City I								
	Amount (\$)	Payee addre	ess; City;	State; Zij	Code	The state of the s				
	\$16.65	7445 Oakr	nont Blvd							
		Fort Worth	, TX 76132							
	PURPOSE OF	900 70 000	See Categories listed at the top	of this schedule)	(b)	Description				
	EXPENDITURE	Food/Beve	rage Expense					de of Texas. Complete Schedule T. officeholder living expense		
						staff meal	, 174,	omounded living expense		
	Complete ONLY if direct		ficeholder name	Office	sought			Office held		
	expenditure to benefit C/OH									
						1.				

SCHEDULE F1

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Committee 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)					
L	O-badula E4.	The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F1: Sch: 9/12 Rpt: 18/22	2 FILER NAME Davis, Daryl	Filer ID					
4	Date	5 Payee name						
	04/14/2025	Snooze						
6	Amount (\$) \$83.28	Payee address; City; State; Zip Code 2150 West 7th Street, Suite 108 Fort Worth, TX 76107						
8	PURPOSE OF EXPENDITURE	1 obar beverage Expense	side of Texas. Complete Schedule T. K, officeholder living expense eting					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	04/05/2025							
	Amount (\$) \$54.11	Payee address; City; State; Zip Code 1650 University Dr Fort Worth, TX 76107						
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	side of Texas. Cornplete Schedule T. K, officeholder living expense					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name	THE REAL PROPERTY OF THE PROPE					
	04/12/2025	Starbucks						
	Amount (\$) \$61.29	Payee address; City; State; Zip Code 6077 McPherson Blvd						
		Crowley, TX 76036						
	PURPOSE OF EXPENDITURE	1 dod/ Develage Experise	ide of Texas. Complete Schedule T. r, officeholder living expense ages					
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

	Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		Fees Office Overhead/Rental Expense Food/Beverage Expense Piniting Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.			Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
_				s how to com	plete this form.			
1	Total pages Schedule F1: Sch: 10/12 Rpt: 19/22	2 FILER NAME Davis, Dary				3 Filer ID		
4	Date 03/30/2025	5 Payee name Strangers R	est Baptist Church	45,0				
6	Amount (\$) \$250.00	7 Payee addres 5705 Donne Fort Worth,	elly Ave	e; Zip Cod	9			
8	PURPOSE OF EXPENDITURE	(a) Category (Se	ee Categories listed at the top of this s is/Donations Made By Officeholder/Political Com			outside of Texas. Complete Sci n, TX, officeholder living expensi nation		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Offic	ceholder name	Office sough	nt	Office held		
	Date	Payee name		THE PROPERTY OF THE PROPERTY O	IS NOT THE PROPERTY OF THE PRO			
	04/18/2025	Terra Medite	erranean					
_	Amount (\$)	Payee addres	ss; City; Stat	e; Zip Code	9		CONTRACTOR CONTRACTOR PER CANADA CAMBERTY AND PROPERTY AND PROPERTY AND PROPERTY OF THE PROPER	
	\$51.96	2932 Crocke	ett St					
		Fort Worth,	TX 76107					
	PURPOSE OF EXPENDITURE		e Categories listed at the top of this s age Expense	chedule) (I		outside of Texas. Complete Sch n, TX, officeholder living experiso		
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Offic	ceholder name	Office sough	nt	Office held		
	Date 04/12/2025	Payee name USPS			The state of the s			
	Amount (\$) \$365.00	Payee addres	esa Blvd	e; Zip Code				
		Fort Worth,	TX 76133					
	PURPOSE OF EXPENDITURE		e Categories listed at the top of this sonead/Rental Expense	chedule) (i		outside of Texas. Complete Sch n, TX, officeholder living expense nailing		
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Offic	ceholder name	Office sough	nt	Office held		
	•							

SCHEDULE F1

Advertising Expense

Event Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement

Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Legal Services Salaries/Wages/Contract Labor The Instruction Cuido explains hour to complete this form					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: Sch: 11/12 Rpt: 20/22	2	FILER NAME Davis, Dary					3	Filer ID		
4	Date	5	Payee name					L_			
	04/15/2025		USPS								
6	Amount (\$)	7	Payee addre	ss; City; Sta	ate; Zip C	ode					
	\$117.00		251 W Land	caster							
			Fort Worth,								
8	PURPOSE OF	(a)		ee Categories listed at the top of this	schedule)	(b)	Description				
	EXPENDITURE		Office Over	head/Rental Expense					ide of Texas. Complete Schedule T. , officeholder living expense		
							campaign po				
							pgp				
9	Complete ONLY if direct	Ц,	Candidate/Offi	ceholder name	Office so	light		-	Office held	March Street, Co. Street, St.	
5	expenditure to benefit C/Ol		zanuluale/OIII	cenoider name	Office 50	ugnt			Office field		
	Date		Payee name	Miss							
	04/05/2025		Warner, Sh	ae							
	Amount (\$)	-	Payee addre	ss; City; Sta	ate; Zip C	ode					
\$35.00 6100 Browning Dr, #7203											
			North Richla	and Hills, TX 76180							
	PURPOSE	(a)	Category (Se	ee Categories listed at the top of this	schedule)	(b)	Description				
	OF EXPENDITURE			ion Equipment And Rela	ted				ide of Texas. Complete Schedule T.		
			Expense				l		, officeholder living expense		
volunteer gas											
	Consulate ONUX if disease	L,			000				Office Leads		
	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Offi	ceholder name	Office so	ugnt			Office held		
_								-			
	Date		Payee name								
	04/10/2025		Weenig Pho	otography							
	Amount (\$)		Payee addre	ss; City; Sta	ate; Zip C	ode					
	\$100.00		7800 Rose	Creek Court							
			Burleson, T	X 76028							
	PURPOSE	(a)	Category (Se	ee Categories listed at the top of this	schedule)	(b)	Description				
	OF EXPENDITURE		Salaries/Wa	ages/Contract Labor					ide of Texas. Complete Schedule T.		
								, TX	, officeholder living expense		
							photography				
_	Olate ONII V II II II	L_		and a later and a second	O#:				Office held		
Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH											
_											

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Fees Food/Beverage Expen Gift/Awards/Memorials Legal Services	Expense	Polling Ex Printing Ex Salaries/W	pense xpense /ages/0	Contract Labor		Transportation Equipment & Related Ex Travel in District Travel Out of District OTHER (enter a category not listed abo		
			The Instruction G	uide explains l	how to co	mplet	te this form.				
1	Total pages Schedule F1:	2							3	Filer ID	
	Sch: 12/12 Rpt: 21/22	L	Davis, Dary	/l							
4	Date	5	Payee name								
	04/14/2025		Whole Foo	ds							
6	Amount (\$) \$7.99	7	Payee addre		State;	Zip Co	de			1	
	Ψ1.55		3720 VISIOI	101							
			Fort Worth,	TX 76109							
8	PURPOSE	(a)	Category (S	ee Categories listed at t	ne top of this sche	edule)	(b)	Description	-		
	OF EXPENDITURE			rage Expense			Ī			ide of Texas. Complete Schedule T.	
							Ļ	Check if Austin, bottled water		, officeholder living expense	
						1	,	bottleti water			
9	Complete ONLY if direct	L_	Candidate/O#	iceholder name		Office sou	aht			Office held	
ľ	expenditure to benefit C/O		Januluale/On	icendider name		nnce sou	Jiii			Onice neid	
		-			N. Martines & Account of Contract of Contr	A THE RESERVE OF THE PERSON NAMED IN			-		

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense **Event Expense** Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Office Overhead/Rental Expense Polling Expense Transportation Equipment & Related Expense Travel in District Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 3 Filer ID Total pages Schedule G: 2 FILER NAME Sch: 1/1 Rpt: 22/22 Davis, Daryl Date Payee name 04/03/2025 Evans, Cederic Payee address: 6 Amount (\$) City: State: Zip Code \$250.00 532 Nuffield Ln Reimbursement from X political contributions intended Crowley, TX 76036 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. 8 OF Check if Austin, TX, officeholder living expense Salaries/Wages/Contract Labor **EXPENDITURE** road signs install Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/11/2025 Park Mobile State; Zip Code Amount (\$) Payee address: City: \$3.65 1100 Spring Street, NW, Suite 200 Reimbursement from political contributions intended X Atlanta, GA 30309 **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Transportation Equipment And Related **EXPENDITURE** Expense parking for meeting Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/13/2025 The Church of Fort Worth Amount (\$) Payee address; City; State; Zip Code \$1.00.00 6851 Wichita St Reimbursement from political contributions intended Forest Hill, TX 76140 **PURPOSE** Description Check if travel outside of Texas. Complete Schedule T. Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee donation Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH