JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 1

The JC/OH Instruction	Guide explains how to	complete this form.	1 Filer ID (Ethics Commi 00041364	,	2 Total pages	s filed:
3 CANDIDATE /	MS / MRS / MR	FIRST		MI		
OFFICEHOLDER NAME	The Honorable	Darlene			Date Received	EUSE ONLY
					ELECTRONI	CALLY FILED
				CULTIV	01/16/2024	
	NICKNAME	LAST Byrne		SUFFIX	0111012024	
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX;	APT / SUITE #; CI	TY;	ZIP CODE	Date Hand-delivere	d or Date Postmarked
MAILING ADDRESS	REDACTED DEP	254.0313, GOV'T			Receipt #	Amount
Change of Address	REDACTED PER	254.0313, 607 1	CODE			
					Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST			MI	
TREASURER NAME	Ms.	Diane				
	NICKNAME	LAST			SUFFIX	
		Land				
6 CAMPAICN			۷.۵۰			
6 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (N	U PU BUX PLEASE);	AP	T / SUITE #; CITY;	5	STATE; ZIP CODE
(Residence or Business)	REDACTED PER	254.0313, GOV'T	CODE			
() Dudineda)			_			
7 CAMPAIGN	AREA CODE	PHONE NUMBER	EXTENSION			
TREASURER PHONE	(512) 476-2020					
8 REPORT TYPE	X January 15	30th day befor	re election	Runoff	15th dav after	campaign treasurer
					appointment (officeholder only)
	July 15	8th day before	election	Exceeded modified reporting limit	Final Report (A	Attach C/OH-FR)
9 PERIOD	Month Day Y	'ear		Month Day	Year	
COVERED	07/01/2023	Т	HROUGH	12/31/202	3	
10 ELECTION	ELECTION DAT			ELECTION TYPE		
	Month Day Y	'ear	Primary	Runoff	Other	
			General	Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT	(if known)	
	Court of Appeals,Chi	ef Justice District 3				
				L		
		GO	TO PAGE 2			
Forms provided by Te	xas Ethics Commission	n www.e	thics.state.tx.u	S	Ve	ersion V3.5.1.0bfcfb6

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2 2 of 12

I

13 C / OH NAME	Byrne, Darlene (The	Honorable)	14 Filer ID 00041364	(Ethics Con	nmission Filers)		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	These expenditures may have been	litical expenditures made by political c made without the candidate's or office this information only if they receive no	eholder's kn	owledge or		
Additional Pages		COMMITTEE NAME					
	GENERAL	COMMITTEE ADDRESS					
	SPECIFIC						
		COMMITTEE CAMPAIGN TREASU	JRER NAME				
		COMMITTEE CAMPAIGN TREASU	JRER ADDRESS				
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS ES OF LOANS, OR CONTRIBUTION	(OTHER THAN PLEDGES, LOANS, NS MADE ELECTRONICALLY)	\$	0.00		
				\$	0.00		
EXPENDITURE	EXPENDITURE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES 4. TOTAL POLITICAL EXPENDITURES						
TOTALS							
		CAL EXPENDITORES		\$	3,882.55		
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED	AS OF THE LAST DAY OF THE	\$	110,645.81		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDIN TING PERIOD	NG LOANS AS OF THE LAST DAY	\$	0.00		
17 AFFIDAVIT							
		l swear, or affirm true and correct under Title 15, E	n, under penalty of perjury, that the acc and includes all information required t Election Code.	companying o be report	g report is ed by me		
			The Honorable Darlene Byrn	Э			
			Signature of Candidate or Officehol	der			
AFFIX NO	TARY STAMP / SEAL AB	DVE					
			, this the		day		
of	, 20, to c	rtify which, witness my hand and se	al of office.				
Signature of offic	cer administering oath	Printed name of officer adminis	stering oath Title of office	r administer	ing oath		
Forms provided by Te	xas Ethics Commissior	www.ethics.state.tx.	us	Version	/3.5.1.0bfcfb67		

FORM JC/OH COVER SHEET PG 3

3 of 12

18 FILER NAI	18 FILER NAME 19 Filer ID						
Byrne, Da	arlene (The Honorable)	00041364					
	E SUBTOTALS SCHEDULE		SUBTOTAL AMOUNT				
1.	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$				
2.	2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS						
3.	SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$				
4.	SCHEDULE E(J): LOANS (JUDICIAL)		\$				
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	5	\$ 3,882.55				
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$				
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$				
8.	8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD						
9. X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$ 3,124.02				
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$				
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$				
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$				

SUBTOTALS - JC/OH

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Con Credit Card Payment			Fees Office Overhead/Rental Expense Transportation Food/Beverage Expense Polling Expense Travel in Distric Gitf/Awards/Memorials Expense Printing Expense Travel Out of D				Travel in District Travel Out of Dis	quipment & Related Exp				
1	Total pages Schedule F1:	2	FILER NAM	E					3	Filer ID	(Ethics Commissio	n Filers)
	Sch: 1/4 Rpt: 4/12		Byrne, Dar	lene (The Honora	able)					00041364		
4	Date	5	Payee name	2								
	10/25/2023		Avance - A									
6	Amount (\$)	7	Payee addre	ess; City;	State	; Zip Co	de					
	\$250.00		PO Box 19	105								
			Austin, TX	78760								
8	PURPOSE	(a)	Category (s	See Categories listed at th	ne ton of this sch	adula)	(b) Descrip	otion				
				ns/Donations Ma		ieuuic)			outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE		Candidate/	Officeholder/Poli	tical Comm	nittee	· · · ·		, TX,	officeholder living	expense	
							Donati	on				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Off	ïceholder name	(Office sou	jht			Office he	eld	
	Date		Payee name)								
	09/28/2023		Byrne, Dar	lene								
	Amount (\$)		Payee addre	ess; City;	State	; Zip Co	de					
	\$1,200.00		221 W. 6th	St., Ste. 960								
			Austin, TX	78701								
	PURPOSE	(a)	Category @	See Categories listed at th	an top of this coh	odulo)	(b) Descrip	ntion				
	OF	ľ		yment/Reimburs		ieuuie)			outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE			,						officeholder living		
							Reimb	urseme	ent	for officehol	der expenses	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Off	iceholder name	(Office sou	jht			Office he	eld	
_		-										
	Date		Payee name									
	08/18/2023		Byrne, Dar									
	Amount (\$)		Payee addre		State	; Zip Co	de					
	\$150.00		221 W. 6th	St., Ste. 960								
			Austin, TX	78701								
	PURPOSE	(a)	Category (S	See Categories listed at th	ne top of this sch	nedule)	(b) Descrip					
	OF EXPENDITURE		Loan Repa	yment/Reimburs	ement						plete Schedule T.	
										officeholder living	der expenses	
							Reimb	UISCIII	GIIL		aci enheiises	
-	Complete ONLY if direct	Ľ	Candidate/Off	iceholder name		Office sou	nht			Office he	лЧ	
	expenditure to benefit C/OI				(51100 30U	jiit					
-												

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains	Office Ove Polling Exp Printing Ex Salaries/W	pense ages/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 (Ethics Commission Filers)
	Sch: 2/4 Rpt: 5/12		Byrne, Darlene (The Honorable)				00041364
4	Date 08/18/2023	5	Payee name Byrne, Darlene				
_			-	. 710 00			
6	Amount (\$) \$92.96	7	Payee address; City; State 221 W. 6th St., Ste. 960 Austin, TX 78701	; Zip Co	ΊG		
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sch Loan Repayment/Reimbursement	nedule)	Check if Austir	n, TX	de of Texas. Complete Schedule T. officeholder living expense for officeholder expenses
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	Jht		Office held
	Date		Payee name				
	09/28/2023		Byrne, Darlene				
	Amount (\$) \$154.35		Payee address; City; State 221 W. 6th St., Ste. 960 Austin, TX 78701	; Zip Co	de		
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sch Loan Repayment/Reimbursement	nedule)	Check if Austir	n, TX,	de of Texas. Complete Schedule T. officeholder living expense for officeholder expenses
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name (Office sou	jht		Office held
	Date		Payee name				
	09/28/2023		Byrne, Darlene				
	Amount (\$) \$100.00		Payee address; City; State 221 W. 6th St., Ste. 960	; Zip Co	de		
			Austin, TX 78701				
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sch Loan Repayment/Reimbursement	nedule)	Check if Austir	n, TX	de of Texas. Complete Schedule T. officeholder living expense for officeholder expenses
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name (Office sou	yht		Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explai	Office O Polling E Printing E Salaries/	verhea xpense Expense Wages	se s/Contract Labor		Travel in District Travel Out of Distric	ipment & Related Expense
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 3/4 Rpt: 6/12		Byrne, Darlene (The Honorable)					00041364	
4	Date 09/28/2023		Payee name Byrne, Darlene						
6	Amount (\$)	7	Payee address; City; Sta	ate; Zip C	ode				
	\$282.61		221 W. 6th St., Ste. 960 Austin, TX 78701						
8	PURPOSE	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description			
	OF EXPENDITURE		Loan Repayment/Reimbursement			Check if Austin	, TX,	de of Texas. Comple officeholder living ex for officeholde	kpense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	Office so	ught			Office held	1
	Date		Payee name						
	10/12/2023		Byrne, Darlene						
	Amount (\$)		Payee address; City; Sta	ate; Zip C	ode				
	\$200.00		221 W. 6th St., Ste. 960 Austin, TX 78701						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this Loan Repayment/Reimbursement	schedule)	(b)	Check if Austin	, TX,	de of Texas. Comple officeholder living ex for officeholde	kpense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office so	ught			Office held	I
	Date		Payee name						
	10/19/2023		Byrne, Darlene						
	Amount (\$) \$715.00		Payee address; City; Sta 221 W. 6th St., Ste. 960	ate; Zip C	ode				
			Austin, TX 78701		-				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this Loan Repayment/Reimbursement	schedule)	(b)	Check if Austin	, TX,	de of Texas. Comple officeholder living ex for officeholde	kpense
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	Office so	ught			Office held	1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donati Candidate/Officeh Credit Card Payment	tions Made By holder/Political		EXPENDITUR Event Expense Fees Food/Beverage Expens Gift/Awards/Memorials Legal Services The Instruction Gu	e Expense	Loan Repa Office Over Polling Exp Printing Ex Salaries/W	yment/Reimbursement head/Rental Expense ense pense ages/Contract Labor		Transportation E Travel in District Travel Out of Dis		
1 Total pages Sche	edule F1:	2 FILER NAM	E				3	Filer ID	(Ethics Commiss	sion Filers)
Sch: 4/4 Rpt:			lene (The Honora	able)				00041364	,	,
4 Date		5 Payee nam	٩							
12/15/2023		Byrne, Da								
6 Amount (\$) \$	\$230.00	 Payee addr 221 W. 6th Austin, TX 	n St., Ste. 960	State;	Zip Coo	le				
8 PURPOSE OF EXPENDITURE			See Categories listed at tr ayment/Reimburs		edule)	Check if Austin	n, TX,	officeholder living	plete Schedule T. 9 expense Ider expenses	
9 Complete <u>ONLY</u> expenditure to be	if direct enefit C/OF		ficeholder name	0	ffice souç	ht		Office he	eld	
Date		Payee nam	e							
08/23/2023		-	airtable Foundatio	n						
Amount (\$)	\$250.00	Payee addr c/o 7921 A Austin, TX	delaide Dr.	State;	Zip Coo					
PURPOSE OF EXPENDITURE		Contributio	See Categories listed at th ons/Donations Ma /Officeholder/Poli	de By	ŕ			de of Texas. Com officeholder living	plete Schedule T. J expense	
Complete <u>ONLY</u> expenditure to be			ficeholder name	0	ffice sou	lht		Office he	eld	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office C Food/Beverage Expense Polling y - Gift/Awards/Memorials Expense Printing	epayment/Reimbursement Overhead/Rental Expense Expense Expense s/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1 Total pages Schedule G: Sch: 1/5 Rpt: 8/12	2 FILER NAME Byrne, Darlene (The Honorable)		3 Filer ID (Ethics Commission Filers) 00041364		
4 Date 09/13/2023	5 Payee name Aloft Dallas				
6 Amount (\$) \$256.11 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1033 Young Street Dallas, TX 75202				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date 10/17/2023	Payee name Amazon				
Amount (\$) \$155.88 X Reimbursement from political contributions intended	Payee address; City; State; Zip C 440 Terry Ave N SEattle, WA 98109	Code			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Olleagues		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date 10/17/2023	Payee name Amazon				
Amount (\$) \$124.41	Payee address; City; State; Zip 0 440 Terry Ave N	Code			
Reimbursement from political contributions intended	SEattle, WA 98109				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense mployee party		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing F	bayment/Reimbursement erhead/Rental Expense kpense xpense Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1 Total pages Schedule G: Sch: 2/5 Rpt: 9/12	2 FILER NAME Byrne, Darlene (The Honorable)	3	Filer ID (Ethics Commission Filers) 00041364		
4 Date 09/28/2023	5 Payee name Austin Bar Association				
6 Amount (\$) \$100.00 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 816 Congress Ave Ste 700 Austin, TX 78701				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		neck if travel outside of Texas. Complete Schedule T. neck if Austin, TX, officeholder living expense donation		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date 10/03/2023	Payee name Austin Bar Foundation				
Amount (\$) \$200.00 X Reimbursement from political contributions intended	Payee address; City; State; Zip C 816 Congress Ave Ste 700 Austin, TX 78701	ode			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		neck if travel outside of Texas. Complete Schedule T. neck if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date 07/12/2023	Payee name Austin Convention and Visitors Center				
Amount (\$) \$92.96	Payee address; City; State; Zip C 602 E 4th St.	ode			
X Reimbursement from political contributions intended	Austin, TX 78701				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense		neck if travel outside of Texas. Complete Schedule T. Neck if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		

POLITICA	POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G					
		EXPENDITURE CATEGORIES FO	R BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donati Candidate/Officeh Credit Card Payment	ions Made By iolder/Politica	Event Expense Loan Re Fees Office Ov Food/Beverage Expense Polling E Gift/Awards/Memorials Expense Printing f	payment/Reimbursement verhead/Rental Expense xpense Expense Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1 Total pages Sche Sch: 3/5 Rpt: 10		2 FILER NAME Byrne, Darlene (The Honorable)		3 Filer ID (Ethics Commission Filers) 00041364		
4 Date 08/18/2023		5 Payee name Caldwell County Democratic Party				
6 Amount (\$) Reimbursement political contribut intended		7 Payee address; City; State; Zip Code PO Box 1011 Lockhart, TX 78644				
8 PURPOSE			(b) Description	Check if travel outside of Texas. Complete Schedule T.		
OF EXPENDITURE	i.	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Donation	Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> expenditure to be C/OH		Candidate/Officeholder name	Office sought	Office held		
Date		Payee name				
12/06/2023		Central Market				
Reimbursement		Payee address; City; State; Zip C 4477 S Lamar Blvd	ode			
X political contribut intended	tions	Austin, TX 78745				
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description [[catering for office	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense choliday party		
Complete <u>ONLY</u> expenditure to be C/OH		Candidate/Officeholder name	Office sought	Office held		
Date		Payee name				
10/17/2023		Etsy				
Amount (\$)	\$259.54	Payee address; City; State; Zip C 117 Adams Street	ode			
X Reimbursement political contribut intended		Brooklyn, NY 11201				
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> expenditure to be C/OH		Candidate/Officeholder name	Office sought	Office held		

POLITICAL EX	POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office O Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing I	bayment/Reimbursement Solicitation/Fundraising Expense verhead/Rental Expense Transportation Equipment & Related Expense xpense Travel in District xpense Travel Out of District Wages/Contract Labor OTHER (enter a category not listed above)				
1 Total pages Schedule G: Sch: 4/5 Rpt: 11/12	2 FILER NAME Byrne, Darlene (The Honorable)	3 Filer ID (Ethics Commission Filers) 00041364				
4 Date 09/29/2023	5 Payee name Foster Angels of Central Texas					
6 Amount (\$) \$154.35 X Reimbursement from political contributions intended	from					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held				
Date 10/06/2023	Payee name Fresas					
Amount (\$) \$175.17 X Reimbursement from political contributions intended	Payee address; City; State; Zip C 3600 N. Capital of Texas Hwy., Ste. A-110 Austin, TX 78746	ode				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Staff luncheon				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held				
Date 09/13/2023	Payee name Southwest Airlines					
Amount (\$) \$25.60	Payee address; City; State; Zip C 2702 Love Field Drive	ode				
X Reimbursement from political contributions intended	Dallas, TX 75235	·				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel Out of District	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held				

	POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ovr Food/Beverage Expense Polling Ex y - Gift/Awards/Memorials Expense Printing E	payment/Reimbursement verhead/Rental Expense xpense Expense Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule G: Sch: 5/5 Rpt: 12/12	2 FILER NAME Byrne, Darlene (The Honorable)		3 Filer ID (Ethics Commission Filers) 00041364			
4	Date 09/28/2023	5 Payee name Texas Center for the Judiciary					
6	Amount (\$) \$1,200.00	 Payee address; City; State; Zip Co 1210 San Antonio, Ste. 800 	ode				
	X political contributions intended	Austin, TX 78701					
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description [Donation	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held			