CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

	Filer ID (Eth	ics Commission Filers)	2 Total pages filed:		OFFICE II	SE ON! V
-	00082094	00 0011111110010111 111010)	12		OFFICE U	SE UNLY
3	CANDIDATE /	MS / MRS / MR	FIRST	MI		I V EII ED
•	OFFICEHOLDER	The Honorable	Aicha	1911	ELECTRONICAI 02/26/2024	LT FILED
	NAME	NICKNAME	LAST	SUFFIX		
		IN ON WINE	Davis	301-FIX		
4	ORIGINAL	January 15	Runoff	Other (specify)	Date Hand-delivered or [Date Postmarked
	REPORT TYPE	July 15	Exceeded modified repor	Ш "	Receipt #	Amount
		30th day before election	15th day after campaign t			
		X 8th day before election	appointment (officeholder Final Report (Attach C/O	only)	Date Processed	•
F	ODICINAL DEDICE			•		
5	ORIGINAL PERIOD COVERED	Month Day Yea 01/26/2024	ır Moi THROUGH	nth Day Year 02/24/2024	Date Imaged	
6	EXPLANATION OF C			UZIZ4IZUZ4		
J	Ending balance was i					
7	AFFIDAVIT		l swear, c	or affirm, under penalty of pe	erjury, that this corrected	report is true
			and corre	ct.		
			Check the	e box next to any and all ap	plicable statements:	
			was	niannual reports: I sweat made in good faith and wit represent the information co	hout an intent to mislead	
			repo that swe	er reports: I swear, or at ort not later than the 14th bu the report as originally filed ar, or affirm, that any error I was made in good faith.	usiness day after the date I is inaccurate or incomple	I learned ete. I
				ŭ		as originally
				· ·	ole Aicha Davis	as originally
				The Honoral	ole Aicha Davis lidate or Officeholder	as originally
	AFFIX NOTARY ST	AMP / SEAL ABOVE		The Honoral		as originally
				The Honoral Signature of Cand	idate or Officeholder	
	Sworn to and subsc	ribed before me, by the sai	difv which, witness my hand	The Honoral Signature of Cand _, t	idate or Officeholder	
	Sworn to and subsc	ribed before me, by the sai	d ify which, witness my hand	The Honoral Signature of Cand _, t	idate or Officeholder	
	Sworn to and subsc	ribed before me, by the sai	dify which, witness my hand Printed name of officer	The Honoral Signature of Cand	idate or Officeholder	day

Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to compl	ete this form.	1 Filer ID (Ethics Commi 00082094		2 Total pages filed: 12	
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE USI	E ONLY
OFFICEHOLDER NAME	The Honorable	Aicha			Date Received	
10 101					ELECTRONICALL	Y EII ED
					02/26/2024	. I FILLD
	NICKNAME	LAST		SUFFIX	02/26/2024	
		Davis				
4 CANDIDATE /	ADDRESS / PO BOX; APT	/ SUITE #; CIT	Y;	ZIP CODE	Date Hand-delivered or Date	e Postmarked
OFFICEHOLDER MAILING	PO Box 71					
ADDRESS					Receipt # A	mount
Change of Address	DeSoto, TX 75123-0071					
	DC3010, 17. 73123 0071				Date Processed	
					Date Imaged	
F. CAMBAICNI	MC / MDC / MD	FIDCT		MI	<u> </u>	
5 CAMPAIGN TREASURER	MS / MRS / MR	FIRST		MI		
NAME		Marcus				
	NICKNAME	LAST		SUFFIX		
		King				
6 CAMPAIGN	STREET ADDRESS (NO PO	BOX PLEASE);	AP ⁻	T / SUITE #; CITY;	STATE	; ZIP CODE
TREASURER ADDRESS	PO Box 71					
(Residence or Business)	DeSoto, TX 75123					
7 CAMPAIGN TREASURER		IE NUMBER E	EXTENSION			
PHONE	(469) 767-9920					
8 REPORT TYPE		-			7	
ITE	January 15	30th day before	election	Runoff	15th day after campai appointment (officeho	
	July 15	8th day before	election	Exceeded modified	Final Report (Attach (
		<u> </u>		reporting limit	_ · ·	•
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	01/26/2024	TH	IROUGH	02/24/202		
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	XP	rimary	Runoff	Other	
	03/05/2024					
			eneral	Special		
				1		
11 OFFICE	OFFICE HELD (if any)	_		12 OFFICE SOUGHT		
	State Board Of Education	District 13		State Representa	ative District 109	
				•		
		GO T	O PAGE 2			
		• • • • • • • • • • • • • • • • • • • •	 -			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

3 of 12

13 C / OH NAME	Davis, Aicha (The Ho	norable)	14 Filer ID (E 00082094	Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without d officeholders are required to report this information	the candidate's or officeh	nolder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
	_	COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
16 CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	\$ 19,805.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	IZED POLITICAL EXPENDITURES		\$ 482.00
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 9,404.00
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 3,800.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT				
		I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.		
		71		
			norable Aicha Davis Candidate or Officehold	er er
		Signature of	Canadate of Officeriola	Ci
AFFIX NO	TARY STAMP / SEAL AB	OVE		
Sworn to and subs	cribed before me, by the s	aid	, this the	day
		ertify which, witness my hand and seal of office.		
Signature of offi	cer administering	Printed name of officer administering	Title of officer a	administering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

				JVL I	4 of 12
	_ER NAN	ME cha (The Honorable)	19 Filer ID 00082094	(Ethics	s Commission Filers)
		т—			
		E SUBTOTALS SCHEDULE		S	SUBTOTAL AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	12,205.00
2.	X	\$	7,600.00		
3.		\$			
4.		\$			
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	9,404.00	
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$		
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
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 F TO FILER	RETURNED	\$	

	MONEI	ARY POLITICAL (CONTRIBUTION	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how	1	Total pages Schedule A1: Sch: 1/5 Rpt: 5/12			
2	FILER NAME Davis, Aicha	(The Honorable)			3	Filer ID (Ethics Commission 00082094	n Filers)
4	Date 02/21/2024	5 Full name of contributor out-of-state PAC (ID#:) Bowman, Randy (Mr.) 6 Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$250.00
		Dallas, TX 75230					
8	Principal occu CEO	pation / Job title (See Instructions	9	Employer (See Instructions AT LAST!, Inc.	5)		
	Date 02/12/2024	Full name of contributor Chism, Crystal (Mrs.) Contributor address; City; S	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$100.00
		DeSoto, TX 75115					
	Principal occupation / Job title (See Instructions) Public Servant			Employer (See Instructions City of DeSoto	s)		
	Date Full name of contributor out-of-state PAC (ID#:_02/01/2024 Davis, Gaytha (Mr.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$250.00
		Dallas, TX 75227					
	Principal occu Not Employe	pation / Job title (See Instructions	3)	Employer (See Instructions Not Employed	5)		
	Date Full name of contributor out-of-state PAC (ID#:					Amount of Contribution (\$)	\$5.00
	•	pation / Job title (See Instructions tions Specialist	s)	Employer (See Instructions University of North Texa			
	Date O2/14/2024 Full name of contributor out-of-state PAC (ID#:					Amount of Contribution (\$)	\$300.00
	Principal occu Treasurer	pation / Job title (See Instructions	5)	Employer (See Instructions Stonewall Democrats of		allas	

	MONET	ARY POLITICAL C	CONTRIBUTION	IS 		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 2/5 Rpt: 6/12	
2	FILER NAME Davis, Aicha	(The Honorable)			3	Filer ID (Ethics Commission 00082094	n Filers)
4	Date 02/18/2024	5 Full name of contributor Kirk, Ronald (Mr.)6 Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code)	7	Amount of Contribution (\$)	\$500.00
		Dallas, TX 75214					
8	Principal occu Attorney	pation / Job title (See Instructions	9	Employer (See Instructions Gibson Dunn & Crutche			
	Date 02/15/2024	Full name of contributor Manjee, Abbas (Mr.) Contributor address; City; St)	•	Amount of Contribution (\$)	\$25.00
	New York, NY 11233 Principal occupation / Job title (See Instructions) Founder Employer (See Instruction Kiddom			Employer (See Instructions Kiddom	<u> </u> S)		
	Date 02/15/2024	Full name of contributor out-of-state PAC (ID#:) Nealy, Kathy (Ms.) Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$250.00
		Dallas, TX 75206 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> S)		
	Date 02/23/2024	Full name of contributor Oquendo, Gwendolyn (Ms Contributor address; City; St San Antonio, TX 78247	·······	Self	•	Amount of Contribution (\$)	\$100.00
	Principal occu Not Employe	pation / Job title (See Instructions)	Employer (See Instructions Not Employed	5)		
	Date O2/15/2024 Parham, Vana (Ms.) Contributor address; City; State; Zip Code Dallas, TX 75236)		Amount of Contribution (\$)	\$50.00	
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONETARY POLITICAL CONTRIBUTIONS						SCHEDULE A			
	The Instruction Guide explains how to complete this form.				m.	1	Total pages Schedule A1: Sch: 3/5 Rpt: 7/12			
2	FILER NAME Davis, Aicha (The Honorable)					3	Filer ID (Ethics Commission 00082094	on Filers)		
4	Date 02/23/2024				7	Amount of Contribution (\$)	\$100.00			
_	5	Forney, TX 75126	, I	_						
8	Director	pation / Job title (See Instructions	5)	9	Employer (See Instructions Katz	5)				
	Date 01/29/2024	Full name of contributor Proctor, John Contributor address; City; S					Amount of Contribution (\$)	\$1,000.00		
	Dallas, TX 75022 Principal occupation / Job title (See Instructions)			Employer (See Instructions	 - s)					
	Director				RBCA					
	Date Full name of contributor out-of-state PAC (ID#:_02/16/2024 Ramirez, Rene (Mr.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$500.00			
		Edinburg, TX 78539								
	Principal occu Lobbyist	pation / Job title (See Instructions	5)		Employer (See Instructions	<u>(</u>				
	Date Full name of contributor out-of-state PAC (ID#:_02/19/2024 Reeves, Eddie (Mr.) Contributor address; City; State; Zip Code DALLAS, TX 75208 Principal occupation / Job title (See Instructions) Consultant)		Amount of Contribution (\$)	\$250.00		
					Employer (See Instructions Vianovo	5)				
	Date Full name of contributor out-of-state PAC (ID#:_ 02/15/2024 Stanford, Denice (Mrs.) Contributor address; City; State; Zip Code Irving, TX 75038)		Amount of Contribution (\$)	\$50.00		
	Principal occu Not Employe	pation / Job title (See Instructions	5)		Employer (See Instructions Not Employed	s)				

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A			
	The Instruc	ction Guide explains how to complete th	is form.	1	Total pages Schedule A1: Sch: 4/5 Rpt: 8/12			
2	FILER NAME	(The Honorable)		3	Filer ID (Ethics Commission 00082094	on Filers)		
4	Date 02/02/2024	Full name of contributor	ID#:	7	Amount of Contribution (\$)	\$200.00		
		Keller, TX 76248						
8	Principal occu Campaign C	pation / Job title (See Instructions) ommittee	9 Employer (See Inst Haley Taylor Sch	•	chool Board			
	Date 02/08/2024	Full name of contributor out-of-state PAC (I Texas AFT COPE Fund Contributor address; City; State; Zip Code	D#:		Amount of Contribution (\$)	\$1,000.00		
	Principal occur	Austin, TX 78704 pation / Job title (See Instructions)	Employer (See Ins	tructions)				
	Principal occu	pation / Job title (See Instructions)	Employer (See ins	iruciioris)				
	Date 01/31/2024	Full name of contributor out-of-state PAC (I Texas State Teachers Association PAC Contributor address; City; State; Zip Code	D#:		Amount of Contribution (\$)	\$2,000.00		
		Austin, TX 78759						
	Principal occu	pation / Job title (See Instructions)	Employer (See Inst	tructions)				
	Date 01/26/2024	Full name of contributor out-of-state PAC (In Texas Trial Lawyers Association PAC Contributor address; City; State; Zip Code	ID#:		Amount of Contribution (\$)	\$5,000.00		
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Inst	tructions)				
_	Date 02/02/2024	Full name of contributor	I ID#:		Amount of Contribution (\$)	\$250.00		
		D.O. I. T. 75115						
	Principal occu	DeSoto, TX 75115 pation / Job title (See Instructions)	Employer (See Inst	tructions)				

	MONET	ARY POLITICAL CONTRIBUTION	ΝO	IS		SCHEDULE A1
	The Instru	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 5/5 Rpt: 9/12
2	FILER NAME Davis, Aicha	a (The Honorable)			3	Filer ID (Ethics Commission Filers) 00082094
4	Date 02/20/2024 5 Full name of contributor out-of-state PAC (ID#:) Whiteman, David (Mr.) 6 Contributor address; City; State; Zip Code			7	Amount of Contribution (\$) \$25.00	
8	Principal occu	Frisco, TX 75033 upation / Job title (See Instructions)	9	Employer (See Instructions	 s)	
	Not Employe	ed		Not Employed		

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 10/12 3 Filer ID (Ethics Commission Filers) FILER NAME Davis, Aicha (The Honorable) 00082094 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Full name of contributor In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 02/16/2024 Rimal, Karrol \$4,200.00 General consulting 7 Contributor address; City; State; Zip Code Euless, TX 76040 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) (See instructions) Owner Self 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) Date Full name of contributor Amount of In-kind contribution out-of-state PAC (ID#: contribution (\$) description 02/22/2024 Schlitz, William \$3,400.00 Graphic design, general Contributor address; City; State; Zip Code consulting Southlake, TX 76092 Check if travel outside of Texas. Complete Schedule T. (See instructions) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See instructions) Contributor's employer/law firm (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarice Magnet/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

1 Total pages Schedule F1: Sch. 12 Rpt. 11/12 Davis, Aicha (The Honorable) 00082094 4 Date Sch. 12 Rpt. 11/12 Davis, Aicha (The Honorable) 00082094 5 Davis, Aicha (The Honorable) 00082094 6 Amount (\$) 5 Payee address; City; State; Zip Code PO Box 2106 6 Amount (\$) 6 Amount (\$) 6 Category (see Categories lated at the top of this schedule) 0 Description		Credit Card Payment	The Instruction Guide explains how to	-	ete this form.
Date Payee name S Payee name Bison Strategies Strategies	1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
SA Amount (S) 7 Payce address; City; State; Zip Code		Sch: 1/2 Rpt: 11/12	Davis, Aicha (The Honorable)		00082094
Amount (\$) \$4,726.00 7 Payee address; City; State; Zip Code PO Box 2106 Oklahoma City. OK 73118	4	Date	5 Payee name		•
S4,726.00 PO Box 2106 Oklahoma City, OK 73118 8 PURPOSE OF EXPENDITURE (a) Cafegory (see Categories issed at the top of his schedule) Printing Expense Candidate/Officeholder name Office sought Date O2/23/2024 CLT Consulting Amount (\$) Payee name CLT Consulting PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Consulting Expense (b) Description Check I travel outside of Treas. Complete Schedule T. Check I dualit. TX, officeholder iving expense (b) Description Check I travel outside of Troas. Complete Schedule T. Check I travel outside of Troas. Complete Schedule T. Check I favalit. TX, confidence of Treas. Complete Schedule T. Check I favalit. TX, confidence of Treas. Complete Schedule T. Check I favalit. TX, confidence of Treas. Complete Schedule T. Check I favalit. TX, confidence of Treas. Complete Schedule T. Complete QNLY if direct observed to benefit C/OH Date Candidate/Officeholder name O2/22/2024 Payee name C3/22/2024 Payee name Eilte News Payee address; City; State; Zip Code Po Box 380071 Dallas TX 75183 PURPOSE EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Check I travel outside of Troas. Complete Schedule T. Check I favalit. TX, officeholder Indig expense Advertising (b) Description Check I travel outside of Troas. Complete Schedule T. Check I favalit. TX, officeholder Indig expense Advertising Complete QNLY if direct Candidate/Officeholder name Office sought Office held Complete QNLY if direct Candidate/Officeholder name Office sought Office held Complete QNLY if direct Complete CONLY if direct Candidate/Officeholder name Office sought Office held Complete CONLY if direct Candidate/Officeholder name Office sought Office held		02/14/2024	Bison Strategies		
Oklahoma City, OK 73118	6	Amount (\$)	7 Payee address; City; State; Zip	Code	
Complete ONLY if direct confidence to benefit C/OH		\$4,726.00	PO Box 2106		
Complete ONLY if direct confidence to benefit C/OH					
Check if travel outside of Texas. Complete Schedule T.			Oklahoma City, OK 73118		
Printing Expense	8		(a) Category (See Categories listed at the top of this schedule)	(b)	Description
Complete ONLY if direct expenditure to benefit C/OH					
9 Complete ONLY if direct expenditure to benefit C/OH Date					
Date 02/23/2024 Date 02/23/2024 CLT Consulting Amount (\$) \$2,600.00 Payee address; City; State; Zip Code PO Box 763026 Dallas, TX 75376 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Consulting Expense Complete ONLY if direct expenditure to benefit C/OH Date 02/22/2024 Payee name Elite News Amount (\$) Payee address; City; State; Zip Code Po Box 380071 Dallas , TX 75183 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Complete ONLY if direct expenditure to benefit C/OH Complete ONLY if direct expenditure to benefit C/OH Date 02/22/2024 Amount (\$) Payee name Elite News Amount (\$) Payee address; City; State; Zip Code PO Box 380071 Dallas , TX 75183 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if Tarvel outside of Texas. Complete Schedule T. Check if Tarvel outside of Texas. Complete Schedule T. Check if Tarvel outside of Texas. Complete Schedule T. Check if Tarvel outside of Texas. Complete Schedule T. Check if Tarvel outside of Texas. Complete Schedule T. Check if Tarvel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Advertising Complete ONLY if direct Candidate/Officeholder name Office sought Office held					Maliers
Date 02/23/2024 Date 02/23/2024 CLT Consulting Amount (\$) \$2,600.00 Payee address; City; State; Zip Code PO Box 763026 Dallas, TX 75376 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Consulting Expense Complete ONLY if direct expenditure to benefit C/OH Date 02/22/2024 Payee name Elite News Amount (\$) Payee address; City; State; Zip Code Po Box 380071 Dallas , TX 75183 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Complete ONLY if direct expenditure to benefit C/OH Complete ONLY if direct expenditure to benefit C/OH Date 02/22/2024 Amount (\$) Payee name Elite News Amount (\$) Payee address; City; State; Zip Code PO Box 380071 Dallas , TX 75183 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if Tarvel outside of Texas. Complete Schedule T. Check if Tarvel outside of Texas. Complete Schedule T. Check if Tarvel outside of Texas. Complete Schedule T. Check if Tarvel outside of Texas. Complete Schedule T. Check if Tarvel outside of Texas. Complete Schedule T. Check if Tarvel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Advertising Complete ONLY if direct Candidate/Officeholder name Office sought Office held	Ļ	Complete ONLY if direct	Candidate/Officeholder name Office	ought	Office held
O2/23/2024 CLT Consulting Amount (\$)	ľ			ougni	Office field
O2/23/2024 CLT Consulting Amount (\$)	⊨	Data	Davis and the second		
Amount (\$)					
\$2,600.00 PO Box 763026 Dallas, TX 75376 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Consulting Expense Consulting Expense (b) Description	L		•	<u> </u>	
Dallas, TX 75376 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if Travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Polling work, blockwalk coordination, ordering items, fundraising, event coordination, etc Complete ONLY if direct expenditure to benefit C/OH Date 02/22/2024 Amount (\$) Payee name Elite News Payee address; City; State; Zip Code PO Box 380071 Dallas , TX 75183 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if Travel outside of Texas. Complete Schedule T. Check if Justin, TX, officeholder living expense Advertising Office held		` '	· · · · · · · · · · · · · · · · · · ·	Code	
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Consulting Expense (c) Check if vaustin, TX, officeholder living expense Polling work, blockwalk coordination, ordering items, fundraising, event coordination, etc Complete ONLY if direct expenditure to benefit C/OH Date 02/22/2024 Payee name Elite News Amount (\$) Payee address; City; State; Zip Code PO Box 380071 Dallas , TX 75183 (a) Category (See Categories listed at the top of this schedule) OF EXPENDITURE Complete ONLY if direct Candidate/Officeholder name Office sought Office held		\$2,600.00	PO Box 763026		
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Consulting Expense (c) Check if vaustin, TX, officeholder living expense Polling work, blockwalk coordination, ordering items, fundraising, event coordination, etc Complete ONLY if direct expenditure to benefit C/OH Date 02/22/2024 Payee name Elite News Amount (\$) Payee address; City; State; Zip Code PO Box 380071 Dallas , TX 75183 (a) Category (See Categories listed at the top of this schedule) OF EXPENDITURE Complete ONLY if direct Candidate/Officeholder name Office sought Office held					
OF EXPENDITURE Consulting Expense Complete ONLY if direct expenditure to benefit C/OH Date O2/22/2024 Elite News Amount (\$) Payee name Elite News Payee address; City; State; Zip Code PO Box 380071 Dallas , TX 75183 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Advertising Complete ONLY if direct Candidate/Officeholder name Office sought Office held	L		Dallas, TX 75376		
EXPENDITURE Consulting Expense Consulting Expense Check if Austin, TX, officeholder living expense Polling work, blockwalk coordination, ordering items, fundraising, event coordination, etc Complete ONLY if direct expenditure to benefit C/OH Date O2/22/2024 Amount (\$) Payee name Elite News Payee address; City; State; Zip Code PO Box 380071 Dallas , TX 75183 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Advertising Complete ONLY if direct Candidate/Officeholder name Office sought Office held			(a) Category (See Categories listed at the top of this schedule)	(b)	
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Complete ONLY if direct expenditure to benefit C/OH Date O2/22/2024 Payee name Elite News Amount (\$) Payee address; City; State; Zip Code PO Box 380071 Dallas , TX 75183 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Advertising Expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held					
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PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Advertising Complete ONLY if direct Candidate/Officeholder name Office sought Office held					
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Complete ONLY if direct Candidate/Officeholder name Office sought Office held		EXPENDITURE	5 1		
					Advertising
	L	0 1. 0	0 51 40 55	Т.	0"
				ought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:		_
1	Sch: 2/2 Rpt: 12/12	2 FILER NAME Davis, Aicha (The Honorable) 3 Filer ID (Ethics Commission Filers) 00082094	
4	Date	5 Payee name	_
	02/22/2024	Monarch Dallas	
6	Amount (\$) \$312.00	7 Payee address; City; State; Zip Code 1401 Elm St Dallas, TX 75202	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Event Expense Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense Campaign meeting and debrief	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	02/14/2024	Saviana Winery	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$884.00	116 Historic Town Square	
		Lancaster, TX 75146	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Fundraiser	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	_
	01/29/2024	Texas AFL-CIO COPE	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$200.00	1106 Lavaca St.	
		#200	
		Austin, TX 78701	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Event Expense Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		COPE dinner tickets	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	Complete ONLY if direct expenditure to benefit C/OI		
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