

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00088422	2 Total pages filed: 21
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST Darrel MI	OFFICE USE ONLY <hr/> Date Received ELECTRONICALLY FILED 10/27/2024	
	NICKNAME LAST Evans SUFFIX		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 1400 Traildust Dr. McKinney, TX 75069		Date Hand-delivered or Date Postmarked <hr/> Receipt # Amount <hr/> Date Processed <hr/> Date Imaged
	MS / MRS / MR FIRST Mr. John MI		
	NICKNAME LAST Kusterbeck SUFFIX		
	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 3400 Craig Dr. Apt. 1911 McKinney, TX 75407		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (469) 734-1146		
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)		
9 PERIOD COVERED	Month Day Year THROUGH Month Day Year 09/27/2024 10/26/2024		
10 ELECTION	ELECTION DATE ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other 11/05/2024 <input checked="" type="checkbox"/> General <input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known) State Representative District 89

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

2 of 21

13 C / OH NAME Evans, Darrel **14 Filer ID** (Ethics Commission Filers)
00088422

15 NOTICE FROM POLITICAL COMMITTEE(S)
 Additional Pages

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.

<input checked="" type="checkbox"/> GENERAL	COMMITTEE TYPE	COMMITTEE NAME
<input type="checkbox"/> SPECIFIC		Blue Horizon Texas PAC
		COMMITTEE ADDRESS
		PO Box 780162
		San Antonio, TX 78278
		COMMITTEE CAMPAIGN TREASURER NAME
		Barnett, Claire
		COMMITTEE CAMPAIGN TREASURER ADDRESS
		TX

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	3,488.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	2,045.14
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	2,388.73
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

17 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Darrel Evans

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering

Printed name of officer administering

Title of officer administering oath

SUBTOTALS - C/OH

18 FILER NAME Evans, Darrel		19 Filer ID 00088422	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	2,738.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	750.00
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$	
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	2,045.14
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/9 Rpt: 4/21
2 FILER NAME Evans, Darrel		3 Filer ID (Ethics Commission Filers) 00088422
4 Date 10/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ahmad, Ishfaq <hr/> 6 Contributor address; City; State; Zip Code Sachse, TX 75048	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Ardan		9 Employer (See Instructions) Business Analyst
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bolt, John <hr/> Contributor address; City; State; Zip Code Fairview, TX 75069	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bolt, John <hr/> Contributor address; City; State; Zip Code Fairview, TX 75069	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buchanan, Lisa <hr/> Contributor address; City; State; Zip Code BELOIT, WI 53511	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Self-employed		Employer (See Instructions) Caregiver
Date 10/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burns, Macey <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/9 Rpt: 5/21
2 FILER NAME Evans, Darrel		3 Filer ID (Ethics Commission Filers) 00088422
4 Date 10/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Eugenia <hr/> 6 Contributor address; City; State; Zip Code Blairsville, GA 30512	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) IRS		9 Employer (See Instructions) Print Specialist
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DACOSTA, JUNE <hr/> Contributor address; City; State; Zip Code BRIDGEPORT, CT 06605	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PRICELINE.COM		Employer (See Instructions) TAX DIRECTOR
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Echols, Vickie <hr/> Contributor address; City; State; Zip Code Longview, TX 75604	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friedman, Debra <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Pella Corporation		Employer (See Instructions) Sales representative
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garland, Leslie <hr/> Contributor address; City; State; Zip Code Westborough, MA 01581	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/9 Rpt: 6/21
2 FILER NAME Evans, Darrel		3 Filer ID (Ethics Commission Filers) 00088422
4 Date 10/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gauthreaux, Patrica <hr/> 6 Contributor address; City; State; Zip Code Hereford, TX 79048	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grace, Cody <hr/> Contributor address; City; State; Zip Code Tyler, TX 75702	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Candidate
Date 10/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hameed, Mohammed <hr/> Contributor address; City; State; Zip Code Parker, TX 75094	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Etheline <hr/> Contributor address; City; State; Zip Code Woodbridge, VA 22193	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houk, Robin <hr/> Contributor address; City; State; Zip Code Austin, TX 78726	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Stylist

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/9 Rpt: 7/21
2 FILER NAME Evans, Darrel		3 Filer ID (Ethics Commission Filers) 00088422
4 Date 09/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeffries, Gordon <hr/> 6 Contributor address; City; State; Zip Code Plano, TX 75231	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KIRBY, GLENN <hr/> Contributor address; City; State; Zip Code Los Alamitos, CA 90720	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) MATRIX DOOR INC		Employer (See Instructions) BUSINESS OWNER
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinnee, Natalie <hr/> Contributor address; City; State; Zip Code Ft Worth, TX 76177	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Cook childrens		Employer (See Instructions) Risk Mgmt
Date 10/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klamen, Ryan <hr/> Contributor address; City; State; Zip Code St Louis, MO 63109	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Real Estate
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kusterbeck, John <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070	Amount of Contribution (\$) \$240.00
Principal occupation / Job title (See Instructions) Raytheon		Employer (See Instructions) Infrastructure Engineer

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/9 Rpt: 8/21
2 FILER NAME Evans, Darrel		3 Filer ID (Ethics Commission Filers) 00088422
4 Date 10/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawson, Shirley <hr/> 6 Contributor address; City; State; Zip Code Princeton, TX 75407	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lepine, Andre <hr/> Contributor address; City; State; Zip Code Plano, TX 75023	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Kimberley <hr/> Contributor address; City; State; Zip Code Reno, NV 89506	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) JCPenney		Employer (See Instructions) Warehouse lead
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maher, Antina <hr/> Contributor address; City; State; Zip Code Fairview, TX 75069	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merrill, Walter <hr/> Contributor address; City; State; Zip Code Allen, TX 75002	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) KBR		Employer (See Instructions) Engineer

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/9 Rpt: 9/21
2 FILER NAME Evans, Darrel		3 Filer ID (Ethics Commission Filers) 00088422
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moehlenkamp, Justin	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Dallas, TX 75212		
8 Principal occupation / Job title (See Instructions) Truist		9 Employer (See Instructions) Underwriter
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mucha, Gary	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code Lake Forest, CA 92630		
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Contractor
Date 10/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) National Association of Social Workers	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neville, Daniel	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code WYLIE, TX 75098		
Principal occupation / Job title (See Instructions) PepsiCo		Employer (See Instructions) Software Engineer
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nguyen, Jeanette	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Westminster, CA 92683		
Principal occupation / Job title (See Instructions) Jeanette Nguyen		Employer (See Instructions) Realtor

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/9 Rpt: 10/21
2 FILER NAME Evans, Darrel		3 Filer ID (Ethics Commission Filers) 00088422
4 Date 09/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OMalley, Kathleen <hr/> 6 Contributor address; City; State; Zip Code McKinney, TX 75070	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) Whole Foods Market		9 Employer (See Instructions) sales
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Owen, Bryann <hr/> Contributor address; City; State; Zip Code North Richland Hills, TX 76182	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Realtor
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Owen, Bryann <hr/> Contributor address; City; State; Zip Code North Richland Hills, TX 76182	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Realtor
Date 10/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rider, Rachel <hr/> Contributor address; City; State; Zip Code Dallas, TX 75243	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self employed
Date 10/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sellers, Sandra <hr/> Contributor address; City; State; Zip Code Brea, CA 92823	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/9 Rpt: 11/21
2 FILER NAME Evans, Darrel		3 Filer ID (Ethics Commission Filers) 00088422
4 Date 10/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaw, Beverly <hr/> 6 Contributor address; City; State; Zip Code DeSoto, TX 75115	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Leaderstat		9 Employer (See Instructions) Registered Nurse
Date 10/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siddiqui, Obaid <hr/> Contributor address; City; State; Zip Code Plano, TX 75074	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Cisco		Employer (See Instructions) Engineer
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snyder, Dawn <hr/> Contributor address; City; State; Zip Code Phoenix, AZ 85032	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Simplicity laser		Employer (See Instructions) Laser tech
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spiegel, Yaitova <hr/> Contributor address; City; State; Zip Code Allen, TX 75002	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Sandeep Srivastava for Congress		Employer (See Instructions) Field organizer
Date 10/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sutaria, Chintan <hr/> Contributor address; City; State; Zip Code Parker, TX 75002	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/9 Rpt: 12/21
2 FILER NAME Evans, Darrel		3 Filer ID (Ethics Commission Filers) 00088422
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Cindy	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Waukesha, WI 53186		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walsh, Suzanne	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Allen, TX 75002		
Principal occupation / Job title (See Instructions) GPP		Employer (See Instructions) CPA
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Welch, Juley	Amount of Contribution (\$) \$80.00
Contributor address; City; State; Zip Code Fairview, TX 75069		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 13/21	
2 FILER NAME Evans, Darrel		3 Filer ID (Ethics Commission Filers) 00088422	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 10/10/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pucciarella, Joseph <hr/> 7 Contributor address; City; State; Zip Code Pittsburgh, PA 15232	8 Amount of contribution (\$) \$750.00	9 In-kind contribution description Campaign Video
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Independent Film Maker		11 Employer (FOR NON-JUDICIAL) (See instructions) Self	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
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)			

Check if travel outside of Texas. Complete Schedule T.

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
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/8 Rpt: 14/21	2 FILER NAME Evans, Darrel	3 Filer ID (Ethics Commission Filers) 00088422
4 Date 09/29/2024	5 Payee name ActBlue	
6 Amount (\$) \$17.25	7 Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 20144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/30/2024	Payee name ActBlue	
Amount (\$) \$5.95	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 20144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/06/2024	Payee name ActBlue	
Amount (\$) \$10.61	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 20144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/8 Rpt: 15/21	2 FILER NAME Evans, Darrel	3 Filer ID (Ethics Commission Filers) 00088422
4 Date 10/13/2024	5 Payee name ActBlue	
6 Amount (\$) \$28.66	7 Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 20144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/20/2024	Payee name ActBlue	
Amount (\$) \$6.29	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 20144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/09/2024	Payee name Blue Horizon Texas PAC	
Amount (\$) \$250.00	Payee address; City; State; Zip Code PO Box 780162 San Antonio, TX 78278	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Texting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/8 Rpt: 16/21	2 FILER NAME Evans, Darrel	3 Filer ID (Ethics Commission Filers) 00088422
4 Date 10/24/2024	5 Payee name Canva	
6 Amount (\$) \$40.00	7 Payee address; City; State; Zip Code 2140 S Dupont Highway Camden, DE 19934	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Design software
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/08/2024	Payee name Facebook	
Amount (\$) \$4.64	Payee address; City; State; Zip Code 1601 Willow Rd Menlo Park, CA 94025	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ads
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/11/2024	Payee name Facebook	
Amount (\$) \$70.00	Payee address; City; State; Zip Code 1601 Willow Rd Menlo Park, CA 94025	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ads
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/8 Rpt: 17/21	2 FILER NAME Evans, Darrel	3 Filer ID (Ethics Commission Filers) 00088422
4 Date 10/15/2024	5 Payee name Facebook	
6 Amount (\$) \$77.00	7 Payee address; City; State; Zip Code 1601 Willow Rd Menlo Park, CA 94025	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ads
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/15/2024	Payee name Facebook	
Amount (\$) \$85.00	Payee address; City; State; Zip Code 1601 Willow Rd Menlo Park, CA 94025	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ads
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/16/2024	Payee name Facebook	
Amount (\$) \$94.00	Payee address; City; State; Zip Code 1601 Willow Rd Menlo Park, CA 94025	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ads
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/8 Rpt: 18/21	2 FILER NAME Evans, Darrel	3 Filer ID (Ethics Commission Filers) 00088422
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4 Date 10/18/2024	5 Payee name Facebook
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6 Amount (\$) \$104.00	7 Payee address; City; State; Zip Code 1601 Willow Rd Menlo Park, CA 94025
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ads
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/21/2024	Payee name Facebook
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Amount (\$) \$115.00	Payee address; City; State; Zip Code 1601 Willow Rd Menlo Park, CA 94025
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ads
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/25/2024	Payee name Facebook
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Amount (\$) \$99.27	Payee address; City; State; Zip Code 1601 Willow Rd Menlo Park, CA 94025
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ads
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	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
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/8 Rpt: 19/21	2 FILER NAME Evans, Darrel	3 Filer ID (Ethics Commission Filers) 00088422
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4 Date 09/28/2024	5 Payee name Mailchimp
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6 Amount (\$) \$28.25	7 Payee address; City; State; Zip Code 405 N Angier Ave NE Atlanta, GA 30308
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/05/2024	Payee name Scale to Win
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Amount (\$) \$23.33	Payee address; City; State; Zip Code 13742 Harper St Santa Ana, CA 92703
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Texting Platform
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/22/2024	Payee name Signarama
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Amount (\$) \$109.33	Payee address; City; State; Zip Code 1502 W University Dr Suite 108 McKinney, TX 75069
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Signs
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	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
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/8 Rpt: 20/21	2 FILER NAME Evans, Darrel	3 Filer ID (Ethics Commission Filers) 00088422
4 Date 10/08/2024	5 Payee name The UPS Store	
6 Amount (\$) \$378.88	7 Payee address; City; State; Zip Code 190 E Stacy Rd Suite 306 Allen, TX 75002	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/01/2024	Payee name USPS	
Amount (\$) \$24.73	Payee address; City; State; Zip Code 550 N Central Expy McKinney, TX 75070	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/23/2024	Payee name USPS	
Amount (\$) \$280.00	Payee address; City; State; Zip Code 550 N Central Expy McKinney, TX 75070	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/8 Rpt: 21/21	2 FILER NAME Evans, Darrel	3 Filer ID (Ethics Commission Filers) 00088422
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4 Date 10/15/2024	5 Payee name Walmart
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6 Amount (\$) \$29.70	7 Payee address; City; State; Zip Code 701 W Princeton Dr Princeton, TX 75407
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/15/2024	Payee name Wylie Chamber of Commerce
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Amount (\$) \$30.00	Payee address; City; State; Zip Code 307 N Ballard Ave Wylie, TX 75098
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Event
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/05/2024	Payee name ngpvan
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Amount (\$) \$133.25	Payee address; City; State; Zip Code 655 15th St Suite 650 Washington, DC 20005
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mobilize
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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