

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: 11
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST Darrel MI	OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/14/2025	
	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
			Receipt # Amount
			Date Processed
			Date Imaged
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST John MI	OFFICE USE ONLY Date Hand-delivered or Date Postmarked	
	NICKNAME LAST Kusterbeck SUFFIX		
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	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 (469)	PHONE NUMBER 734-1146	EXTENSION
8 REPORT TYPE	<input checked="" 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 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 10/27/2024	THROUGH	Month Day Year 12/31/2024
10 ELECTION	ELECTION DATE Month Day Year 11/04/2025		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special
11 OFFICE	OFFICE HELD (if any) None	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

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13 C / OH NAME Evans, Darrel	14 Filer ID (Ethics Commission Filers) 00088422
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15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.									
<table border="1" style="width:100%"> <tr> <td style="width:25%">COMMITTEE TYPE</td> <td>COMMITTEE NAME</td> </tr> <tr> <td><input type="checkbox"/> GENERAL</td> <td>COMMITTEE ADDRESS</td> </tr> <tr> <td><input type="checkbox"/> SPECIFIC</td> <td>COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td></td> <td>COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table>	COMMITTEE TYPE	COMMITTEE NAME	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME		COMMITTEE CAMPAIGN TREASURER ADDRESS		
	COMMITTEE TYPE	COMMITTEE NAME								
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS								
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME								
	COMMITTEE CAMPAIGN TREASURER ADDRESS									

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)	\$	1,395.50
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	3,382.95
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	401.28
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**FORM C/OH
COVER SHEET PG 3**

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18 FILER NAME Evans, Darrel		19 Filer ID (Ethics Commission Filers) 00088422
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 1,395.50
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
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	\$ 3,382.95
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: 1/2 Rpt: 4/11
2 FILER NAME Evans, Darrel		3 Filer ID (Ethics Commission Filers) 00088422
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bhat, Joyce <hr/> 6 Contributor address; City; State; Zip Code Chicago, IL 60607	7 Amount of Contribution (\$) \$25.50
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Camarillo, Desirhea <hr/> Contributor address; City; State; Zip Code Lucas, TX 75002	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/18/2024	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 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) George King Campaign <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hendricks, John <hr/> Contributor address; City; State; Zip Code Plano, TX 75074	Amount of Contribution (\$) \$25.00
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: 2/2 Rpt: 5/11
2 FILER NAME Evans, Darrel		3 Filer ID (Ethics Commission Filers) 00088422
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hussain, Syed <hr/> 6 Contributor address; City; State; Zip Code Murphy, TX 75094	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Self		9 Employer (See Instructions) Devloper
Date 11/13/2024	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 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mello, Rachel <hr/> Contributor address; City; State; Zip Code Plano, TX 75023	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Richardson ISD		Employer (See Instructions) Teacher
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neville, Daniel <hr/> Contributor address; City; State; Zip Code WYLIE, TX 75098	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PepsiCo		Employer (See Instructions) Software Engineer
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Omalley, Kathleen <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Whole Foods Market		Employer (See Instructions) Sales

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: 1/6 Rpt: 6/11	2 FILER NAME Evans, Darrel	3 Filer ID (Ethics Commission Filers) 00088422
4 Date 10/27/2024	5 Payee name ActBlue	
6 Amount (\$) \$27.66	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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2024	Payee name ActBlue	
Amount (\$) \$15.08	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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/10/2024	Payee name ActBlue	
Amount (\$) \$0.40	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 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: 2/6 Rpt: 7/11	2	FILER NAME Evans, Darrel	3	Filer ID (Ethics Commission Filers) 00088422
4	Date 11/17/2024	5	Payee name ActBlue		
6	Amount (\$) \$3.95	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 11/24/2024		Payee name ActBlue		
	Amount (\$) \$0.16		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 11/25/2024		Payee name Canva		
	Amount (\$) \$40.00		Payee address; City; State; Zip Code 2140 S Dupont Highway Camden, DE 19934		
	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		
		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: 3/6 Rpt: 8/11	2 FILER NAME Evans, Darrel	3 Filer ID (Ethics Commission Filers) 00088422
4 Date 12/26/2024	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 10/30/2024	Payee name Facebook	
Amount (\$) \$127.00	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
Date 11/03/2024	Payee name Facebook	
Amount (\$) \$127.00	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: 4/6 Rpt: 9/11	2 FILER NAME Evans, Darrel	3 Filer ID (Ethics Commission Filers) 00088422
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4 Date 11/25/2024	5 Payee name Facebook
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6 Amount (\$) \$76.43	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 10/28/2024	Payee name Mailchimp
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Amount (\$) \$28.25	Payee address; City; State; Zip Code 405 N Angier Ave NE Atlanta, GA 30308
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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 Email
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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 10/28/2024	Payee name Scale to Win
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Amount (\$) \$673.15	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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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: 5/6 Rpt: 10/11	2 FILER NAME Evans, Darrel	3 Filer ID (Ethics Commission Filers) 00088422
4 Date 11/07/2024	5 Payee name Scale to Win	
6 Amount (\$) \$1,284.61	7 Payee address; City; State; Zip Code 13742 Harper St Santa Ana, CA 92703	
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 Texting Platform
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/07/2024	Payee name Scale to Win	
Amount (\$) \$554.09	Payee address; City; State; Zip Code 13742 Harper St Santa Ana, CA 92703	
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
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/28/2024	Payee name USPS	
Amount (\$) \$112.00	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 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: 6/6 Rpt: 11/11	2 FILER NAME Evans, Darrel	3 Filer ID (Ethics Commission Filers) 00088422
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4 Date 11/01/2024	5 Payee name ngpvan
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6 Amount (\$) \$133.25	7 Payee address; City; State; Zip Code 655 15th St Suite 650 Washington, DC 20005
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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 Mobilize
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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 12/30/2024	Payee name ngpvan
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Amount (\$) \$139.92	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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