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 Comm 00051651		2 Total pages filed: 45	
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE USE ONL	Υ.
OFFICEHOLDER NAME	The Honorable	Drew			Date Received	
10 000					ELECTRONICALLY FILE	:D
					07/10/2025	.0
	NICKNAME	LAST		SUFFIX	07/10/2025	
		Darby				
4 CANDIDATE /	ADDRESS / PO BOX; APT	/ SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered or Date Postmar	ked
OFFICEHOLDER MAILING	P.O. Box 3284					
ADDRESS					Receipt # Amount	
Change of Address	San Angelo, TX 76902					
	Jan 7 rigelo, 17 70302				Date Processed	
					Date Imaged	
F CAMBAICN	MC (MDC (MD	FIDCT		NAI.		
5 CAMPAIGN TREASURER	MS / MRS / MR	FIRST		MI		
NAME	Ms.	Starla				
	NICKNAME	LAST		SUFFIX		
		Solomon				
6 CAMPAIGN	STREET ADDRESS (NO PO	BOX PLEASE);	AP	T / SUITE #; CITY;	STATE; ZIF	P CODE
TREASURER ADDRESS	136 W. Twohig Avenue					
	Ste. A					
(Residence or Business)	San Angelo, TX 76903					
	3 1, 1111					
7 CAMPAIGN	AREA CODE PHON	NE NUMBER E	EXTENSION			
TREASURER PHONE	(325) 658-7588					
8 REPORT				_	_	
TYPE	January 15	30th day before	election	Runoff	15th day after campaign treasurappointment (officeholder only	
	X July 15	8th day before 6	election \square	Exceeded modified	Final Report (Attach C/OH-FR)	
		_ our day belore t		reporting limit	I man report (rataon or on my	,
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	01/01/2025	TH	IROUGH	06/30/202		
	01/01/2025			00/30/202	.5	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
LEECTION	Month Day Year	XPI	rimary	Runoff	Other	
	03/03/2026			브		
		∐ ^G	eneral	Special		
				_		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT	(if known)	
	State Representative Distr	rict 72		State Represent	ative District 72	
		COT	O PAGE 2			
		GO I	O PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 45

13 C / OH NAME	C / OH NAME Darby, Drew (The Honorable) 14 Filer ID 00051651							
15 NOTICE FROM POLITICAL COMMITTEE(S)	FROM candidate / officeholder. These expenditures may have been made without the candidate's or office consent. Candidates and officeholders are required to report this information only if they receive no							
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME						
	GENERAL							
		COMMITTEE ADDRES	S					
	SPECIFIC							
		COMMITTEE CAMPAIG	GN TREASURER NAME					
		COMMITTEE CAMPAIG	GN TREASURER ADDRES	SS				
16 CONTRIBUTION TOTALS	1. TOTAL UNITEM OR GUARANTE	\$	0.00					
	2. TOTAL POLITIC (OTHER THAN I	\$	47,815.24					
EXPENDITURE TOTALS	3. TOTAL UNITEM	IZED POLITICAL EXPE	NDITURES		\$	2,473.50		
	4. TOTAL POLITIC	AL EXPENDITURES			\$	67,023.19		
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE		AINTAINED AS OF THE LA	AST DAY OF THE	\$	361,502.02		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR		UTSTANDING LOANS AS	OF THE LAST DAY	\$	0.00		
17 AFFIDAVIT								
		true	ear, or affirm, under penalty and correct and includes al er Title 15, Election Code.					
			The Hor	norable Drew Darby	,			
			Signature of	Candidate or Officeho	older			
AFFIX NC	TARY STAMP / SEAL AB	OVE						
Sworn to and subs	cribed before me, by the s	aid		, this the		day		
	, 20, to co							
Signature of offi	cer administering	Printed name of of	ficer administering	Title of office	er administe	ring oath		

SUBTOTALS - C/OH

FORM COH **COVER SHEET PG 3**

			3 of 4	45
18 FILER NAME Darby, Drew (The Honorable)	(Ethics Commission Filers	3)		
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUN	1T		
1. X SCHEDULE A1: MON	ETARY POLITICAL CONTRIBUTIONS		\$ 47,50	00.00
2. X SCHEDULE A2: NON-	MONETARY (IN-KIND) POLITICAL CONTRIB	BUTIONS	\$ 31	15.24
3. SCHEDULE B: PLEDO	SED CONTRIBUTIONS		\$	
4. SCHEDULE E: LOANS	;		\$	
5. X SCHEDULE F1: POLI	\$ 60,20)7.51		
6. SCHEDULE F2: UNPA	ID INCURRED OBLIGATIONS		\$	
7. SCHEDULE F3: PURC	CHASE OF INVESTMENTS FROM POLITICAL	_ CONTRIBUTIONS	\$	
8. X SCHEDULE F4: EXPE	NDITURES MADE BY CREDIT CARD		\$ 6,81	15.68
9. SCHEDULE G: POLIT	\$			
10. SCHEDULE H: PAYM	ENT FROM POLITICAL CONTRIBUTIONS TO) A BUSINESS OF C/OH	\$	
11. SCHEDULE I: NON-PO	DLITICAL EXPENDITURES FROM POLITICAL	. CONTRIBUTIONS	\$	
12. X SCHEDULE K: INTERF	EST, CREDITS, GAINS, REFUNDS, AND CON	NTRIBUTIONS RETURNED	\$ 1,93	30.25
			·	

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SC	HEDU	ILE A1
	The Instru	ction Guide explains how to complete this fo	1	Total pages Schedu Sch: 1/1 Rpt: 4/45			
2	FILER NAME Darby, Drew	v (The Honorable)		3	Filer ID (Ethics Co		sion Filers)
4	Date 06/24/2025	7	Amount of Contribu	ion (\$)	\$2,500.00		
8	Principal occu Real Estate	San Angelo, TX 76902 upation / Job title (See Instructions)	9 Employer (See Instructions Steve Eustis Realtors	<u> </u> ;)			
	Date 06/30/2025	Full name of contributor out-of-state PAC (ID#:_ Powell, Gideon (Mr.) Contributor address; City; State; Zip Code Dallas, TX 75251		Amount of Contribu	ion (\$)	\$20,000.00	
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions Cholla Inc	<u>(</u>			
	Date 06/25/2025		Amount of Contribu	ion (\$)	\$25,000.00		
	Principal occu	Austin, TX 78701 upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ;)			

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: 5/45 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Darby, Drew (The Honorable) 00051651 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS **6** Full name of contributor 9 In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 06/23/2025 MoakCasey, LLC \$315.24 Food, Drinks and Venue 7 Contributor address; City; State; Zip Code for Campaign Fundraiser Austin, TX 78701 Check if travel outside of Texas. Complete Schedule T. (See instructions) 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) 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)

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee
Credit Card Payment

EXPENDITURE CATEGORIES FOR BOX 8(a) 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

			The Instruction Guide explains how to complete this form.			
1	Total pages Schedule F1:	2	FILER NAME	3	Filer ID	(Ethics Commission Filers)
	Sch: 1/29 Rpt: 6/45		Darby, Drew (The Honorable)		00051651	
4	Date	5	Payee name			
	0E/10/202E	l	Arnold Flains			

4	Date 05/19/2025	5 Payee name Arnold, Elaine
6	Amount (\$) \$250.00	7 Payee address; City; State; Zip Code 7809 Valburn Drive Austin, TX 78731
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Staff gifts
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 01/31/2025	Payee name Camacho, Santino
	Amount (\$) \$500.00	Payee address; City; State; Zip Code 828 Bebee Road Apt. 825 Kyle, TX 78640
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign contract labor
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 02/28/2025	Payee name Camacho, Santino
	Amount (\$) \$250.00	Payee address; City; State; Zip Code 828 Bebee Road Apt. 825 Kyle, TX 78640
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign contract labor
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
g Expense Event Expense Loan Repayment/Reimbu

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1: Sch: 2/29 Rpt: 7/45	2 FILER NAME Darby, Drew (The Honorable) 3 Filer ID (Ethics Commission Filers) 00051651
4	Date 03/31/2025	5 Payee name Camacho, Santino
6	Amount (\$) \$250.00	7 Payee address; City; State; Zip Code 828 Bebee Road Apt. 825 Kyle, TX 78640
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign contract labor
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 04/30/2025	Payee name Camacho, Santino
	Amount (\$) \$250.00	Payee address; City; State; Zip Code 828 Bebee Road Apt. 825 Kyle, TX 78640
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign contract labor
	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 05/31/2025	Payee name Camacho, Santino
	Amount (\$) \$250.00	Payee address; City; State; Zip Code 828 Bebee Road Apt. 825 Kyle, TX 78640
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign contract labor
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Event E:
Accounting/Banking Fees
Consulting Expense Food/Be
Contributions/ Donations Made By - Gift/Awa

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	d Comm	nittee	-ood/Beverage Expens Gift/Awards/Memorials I Legal Services The Instruction Gu	Expense		xpens Vages	e /Contract Labor		Travel in District Travel Out of Dis OTHER (enter a	strict category not listed above)	
1	Total pages Schedule F1:	l							3	Filer ID	(Ethics Commission Fi	ilers)
L	Sch: 3/29 Rpt: 8/45		arby, Drew	(The Honorable	e)					00051651		
4	Date	5 P	ayee name									
	06/30/2025	c	Camacho, S	antino								
6	Amount (\$)	7 P	ayee addres	s; City;	State;	Zip Co	ode					
	\$250.00	8	28 Bebee F	Road								
		A	pt. 825									
		k	yle, TX 786	640								
8	PURPOSE	(a) C	ategory (co	e Categories listed at th	a tan af this sah	adula)	(b)	Description				
ľ	OF			ges/Contract La		edule)	(~)	_ ·	outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE			900,00				Check if Austin,	, TX,	officeholder living	g expense	
								Campaign co	ntra	act labor		
L		L										
9	Complete ONLY if direct expenditure to benefit C/O		ndidate/Offic	eholder name	(Office sou	ight			Office he	eld	
	Date	Р	ayee name									
	01/12/2025	ı	•	eporting Solution	ns LLC							
	Amount (\$)	P	ayee addres	s; City;	State:	Zip Co	ode					
	\$1,883.00		10 Carriage			1						
	, _, 555.50	-	2 2	-								
		_	ufkin, TX 7									
	PURPOSE OF			e Categories listed at th	e top of this sch	edule)	(b)	Description				
	EXPENDITURE	A	ccounting/l	Banking				<u></u>		de of Texas. Com officeholder living	plete Schedule T.	
								Campaign bo				
	Complete ONLY if direct expenditure to benefit C/O		ndidate/Offic	eholder name	C	Office sou	<u>I</u> ight			Office he	eld	
H	Date	Р	ayee name									
	01/29/2025	ı	•	eporting Solution	ns LLC							
-	Amount (\$)		ayee addres			Zip Co	nde					
	\$392.30	l	10 Carriage	•	Siale,	Zip CC	Jue					
	Φ392.30	1	TO Carriage	PIIVE								
		L	ufkin, TX 7	5904								
	PURPOSE			e Categories listed at th	e top of this sch	edule)	(b)	Description				
	OF EXPENDITURE	A	ccounting/l	Banking							plete Schedule T.	
								_		officeholder living	rocessing and	
											yroll tax returns	
\vdash	Complete ONLY if direct		ndidate/Offic	eholder name		Office sou	labt			Office he	ald	
	expenditure to benefit C/O		. iuiuale/UIII(cholder Hallle		71110E 30U	igiil			Onice H	Jiu	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Political Committee Credit Card Payment			Legal Services The Instruction Guide	Salaries	/Wages	s/Contract Labor		OTHER (enter a	category not listed above)
1	Total pages Schedule F1:	2 FILER NAME					3	Filer ID	(Ethics Commission Filers)
	Sch: 4/29 Rpt: 9/45	Darby, Dre	w (The Honorable)					00051651	
4	Date	5 Payee name							
	04/19/2025	Campaign	Reporting Solutions	s LLC					
6	Amount (\$)	7 Payee addre	ss; City;	State; Zip C	ode				
	\$228.80	110 Carria(ge Drive						
		Lufkin, TX	75904						
8	PURPOSE	(a) Category (S	ee Categories listed at the to	op of this schedule)	(b)	Description			
	OF EXPENDITURE	Accounting	/Banking					de of Texas. Com	
						\Box		officeholder living	rocessing and
									roll tax returns
9	Complete ONLY if direct expenditure to benefit C/Ol		iceholder name	Office so	ught			Office he	eld
	Date	Payee name							
	04/19/2025	Campaign l	Reporting Solutions	s LLC					
	Amount (\$)	Payee addre	ss; City;	State; Zip C	ode				
	\$500.00	110 Carria	ne Drive	·					
		`	,						
		Lufkin, TX	75904		_				
	PURPOSE OF		ee Categories listed at the to	op of this schedule)	(b)	Description			
	EXPENDITURE	Accounting	/Banking					de of Texas. Com officeholder living	
						Campaign bo			
						- and panger as		g	
	Complete ONLY if direct expenditure to benefit C/OI		iceholder name	Office so	ught			Office he	eld
	Date	Dayoo nama							
	02/23/2025	Payee name	Reporting Solutions	s I I C					
				State; Zip C	·				
	Amount (\$)	Payee addre		State, Zip C	oue				
	\$430.00	110 Carriaç	je Drive						
		Lufkin, TX	75904		_				
	PURPOSE	(a) Category (S	ee Categories listed at the to	op of this schedule)	(b)	Description			
	OF EXPENDITURE	Accounting	/Banking					de of Texas. Com	
						ш		officeholder living	gn contract laborers and
						1120-POL ca			
-	Complete ONLY if direct	Candidate/Off	iceholder name	Office so	uaht			Office he	eld
	expenditure to benefit C/OI		.cc.roidor ridirio	Office 30	agin			Cinice III	····
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
ising Expense Event Expense Loan Repayment/Reimbu

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 5/29 Rpt: 10/45	Darby, Drew (The Honorable) 00051651
4	Date	5 Payee name
	04/10/2025	Clayton Spangler Photographic Design
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$549.00	235 Point Lick Drive
		Charleston, WV 25306
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Photo of the 89th Legislature for capitol office decor
		Photo of the oath Legislature for capitor office decor
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Data	David and the second se
	Date	Payee name
	01/02/2025	Concho Valley Republican Women
	Amount (\$)	Payee address; City; State; Zip Code
	\$235.00	P.O. Box 60583
		San Angelo, TX 76906
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Tickets to attend monthly luncheons
		rickets to attend monthly functions
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·
_	Data	
	Date	Payee name
	01/02/2025	Concho Valley Republican Women
	Amount (\$)	Payee address; City; State; Zip Code
	\$200.00	P.O. Box 60583
		San Angelo, TX 76906
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		Folitical dollation
L	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committe Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	
1	Sch: 6/29 Rpt: 11/45	Darby, Drew (The Honorable) 00051651
4	Date	5 Payee name
	01/21/2025	Concho Valley Republican Women
6	Amount (\$) \$250.00	7 Payee address; City; State; Zip Code P.O. Box 60583 San Angelo, TX 76906
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Political donation
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/18/2025	Costco
	Amount (\$)	Payee address; City; State; Zip Code
	\$123.21	4301 W William Cannon Drive
		Bldg A, Ste. 100
		Austin, TX 78749
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Supplies for capitol office
		Cappines is: suprise since
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/24/2025	Costco
	Amount (\$)	Payee address; City; State; Zip Code
	\$190.48	4301 W William Cannon Drive
		Bldg A, Ste. 100
		Austin, TX 78749
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Supplies for capitol office
		Supplies for expirer office
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held

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 Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:		_
_	Sch: 7/29 Rpt: 12/45	Darby, Drew (The Honorable) 3 Filer ID (Ethics Confinission Filers) 00051651	
4	Date	5 Payee name	
	05/05/2025	Costco	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$325.64	4301 W William Cannon Drive	
		Bldg A, Ste. 100	
		Austin, TX 78749	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense	
		Check if Austin, TX, officeholder living expense	
		Supplies for capitol office	
_	Complete ONLY if divert	Candidate/Officeholder name Office sought Office held	
9	Complete ONLY if direct expenditure to benefit C/OI		
	Date	Payee name	
	06/25/2025	Downtown San Angelo, Inc.	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$600.00	24 W Concho Avenue	
		San Angelo, TX 76903	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Charitable donation	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	01/06/2025	Elan Financial Services	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$847.73	PO Box 790408	
		St Louis, MO 63179	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Credit card payment for items properly recorded or	,
		Sch F4 of prior report	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		
			_

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services	norials Expense on Guide expl		/Wage	s/Contract Labor		Travel Out of DOTHER (enter	District a category not listed above)
<u>_</u>	Tatalanana C.I. III Ti	_	EU ED MAN		on Guide expi	HOW LO	-S.mpi		l.	E1 15	(Fabina Camanalania Elian)
_	Total pages Schedule F1:				1.1				1	Filer ID	(Ethics Commission Filers)
	Sch: 8/29 Rpt: 13/45		Darby, Drev	v (The Hon	orabie)					00051651	-
4	Date	5	Payee name								
	02/05/2025		Elan Financ	ial Service	6						
6	Amount (\$)	7	Payee addre	ss; City;	5	State; Zip C	ode				
	\$1,172.87		PO Box 790			•					
	,										
			Chlavia M	2 02170							
L		L	St Louis, M				1				
8	PURPOSE OF	(a)	Category (Se		ted at the top of th	nis schedule)	(b)	Description			
	EXPENDITURE		Credit Card	Payment						de of Texas. Co officeholder livi	omplete Schedule T.
								—			ms properly recorded on
								Sch F4 of pri	-		
<u>_</u>	Complete ONLY if direct	<u> </u>	Condidate /Off	oobold = = = =		Off:		•			·
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offi	cenoider nar	ne	Office so	ugnt			Office I	neiu
	Date		Payee name								
	03/05/2025		Elan Financ	ial Service	5						
	Amount (\$)		Payee addre	ss; City;	5	State; Zip C	ode				
	\$325.71		PO Box 790)408							
			St Louis, M	O 63179							
_	DLIDDOCE	/s`					(h)	Descripti			
	PURPOSE OF	^(a)	Category (Se		ted at the top of th	nis schedule)	(n)	Description Check if travel	Outsid	de of Texas Co	omplete Schedule T.
	EXPENDITURE		Credit Card	rayment						officeholder livi	
								—			ms properly recorded on
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H	Complete ONLY if direct		Candidate/Offi	ceholder nar	ne	Office so	ught			Office I	held
	expenditure to benefit C/OI						J				
⊨	Data	_	Deurs - ::								
	Date		Payee name	اما دمیناه -	_						
	04/07/2025		Elan Financ								
	Amount (\$)		Payee addre		\$	State; Zip C	ode				
	\$722.37		PO Box 790)408							
			St Louis, M	O 63179							
	PURPOSE	(a)	Category (Se	ee Categories lis	ted at the top of th	nis schedule)	(b)	Description			
	OF EXPENDITURE		Credit Card		2.2 ISP 01 U				outsio	de of Texas. Co	omplete Schedule T.
	EXPENDITURE			-				Check if Austin			
											ms properly recorded on
								Sch F4 of cui	ıren	п героп	
	Complete ONLY if direct		Candidate/Offi	ceholder nar	ne	Office so	ught			Office I	held
	expenditure to benefit C/OI	Н									

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comm Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 9/29 Rpt: 14/45	Darby, Drew (The Honorable)
4	Date	5 Payee name
	05/05/2025	Elan Financial Services
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$66.45	PO Box 790408
		St Louis, MO 63179
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
		Credit pard no mount for items properly recorded on
		Credit card payment for items properly recorded on Sch F4 of current report
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
_	Data	
	Date	Payee name
	06/05/2025	Elan Financial Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$3,522.82	PO Box 790408
		St Louis, MO 63179
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
		Credit pard no mount for items properly recorded on
		Credit card payment for items properly recorded on Sch F4 of current report
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Data	
	Date 04/19/2025	Payee name Erben & Yarbrough
	Amount (\$)	Payee address; City; State; Zip Code
	\$625.00	807 Brazos Street
		Ste. 402
L		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Legal Services Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Q1 2025 legal review of TEC filings
		Q1 2023 legal review of TEC fillings
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	y

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 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)

Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 10/29 Rpt: 15/45 Darby, Drew (The Honorable) 00051651 4 Date Payee name 03/24/2025 H-E-B #428 6 Amount (\$) Payee address; State; Zip Code \$17.41 6900 Brodie Lane Austin, TX 78745 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Supplies for capitol office Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/03/2025 Hill Country Springs Amount (\$) Payee address; City; State; Zip Code \$8.66 P.O. Box 2220 Manchaca, TX 78652-2220 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Water - capitol office Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/06/2025 Hill Country Springs Amount (\$) Payee address: City; State; Zip Code \$14.64 P.O. Box 2220 Manchaca, TX 78652-2220 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Water - capitol office Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expen Legal Services	Office Ov Polling Ex se Printing Ex Salaries/N	erhea kpense xpens Wages	se s/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense
_			The Instruction Guide e	xpiains now to co	mpie	ete this form.	_		
1	Total pages Schedule F1: Sch: 11/29 Rpt: 16/45		≣ w (The Honorable)				3	Filer ID 00051651	(Ethics Commission Filers)
4	Date	5 Payee name					_		
	03/04/2025	Hill Country							
6	Amount (\$) \$58.65	Payee addre		State; Zip Co	ode				
8	PURPOSE OF EXPENDITURE		ee Categories listed at the top head/Rental Expens		(b)	므	, TX,	de of Texas. Composition officeholder living	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		iceholder name	Office sou	ıght			Office he	eld
	Date	Payee name							
	04/02/2025	Hill Country	/ Springs						
	Amount (\$) \$73.65	Payee addre		State; Zip Co	ode				
		Manchaca,	TX 78652-2220						
	PURPOSE OF EXPENDITURE		ee Categories listed at the top head/Rental Expens		(b)	=	, TX,	de of Texas. Composition officeholder living	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		iceholder name	Office sou	ight			Office he	eld
	Date 05/02/2025	Payee name Hill Country							
	Amount (\$) \$58.65	Payee addre	220	State; Zip Co	ode				
		Manchaca,	TX 78652-2220						
	PURPOSE OF EXPENDITURE	i i	ee Categories listed at the top rhead/Rental Expens		(b)		, TX,	de of Texas. Com _l officeholder living	
	Complete ONLY if direct expenditure to benefit C/O		iceholder name	Office sou	ight			Office he	eld

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comm Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mittee L	ift/Awards/Memorials egal Services The Instruction G	•		ages	/Contract Labor		Travel Out of Dis OTHER (enter a	strict category not listed above)	
1	Total pages Schedule F1:	2 [EII ED NIAME						3	Filer ID	(Ethics Commission File	rs)
•	Sch: 12/29 Rpt: 17/45	l		(The Honorab	le)				,	00051651	(Ethics Commission File)	13)
4	Date	5 F	Payee name									
	06/03/2025		Hill Country S									
6	Amount (\$) \$79.65	l	Payee address P.O. Box 222		State;	; Zip Co	de					
		 	Manchaca, T	X 78652-2220)							
8	PURPOSE	(a) (Category (See	Categories listed at t	he top of this sch	edule)	(b)	Description				
	OF			ead/Rental Ex					outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE				•			Check if Austin,	, TX,	officeholder living	g expense	
								Water - capito	ol o	ffice		
9	Complete ONLY if direct expenditure to benefit C/OI		andidate/Office	eholder name	C	Office sou	ght			Office he	eld	
	Date	F	Payee name									
	02/06/2025	l i	Innovation ar	d Technology	Caucus of	the Texa	s H	ouse				
	Amount (\$)	F	Payee address	; City;	State;	Zip Co	de					
	\$250.00	8	815-A Brazos	Street								
		9	Ste. 714									
		1	Austin, TX 78	3701								
	PURPOSE	(a) (Category _{(See}	Categories listed at t	he top of this sch	edule)	(b)	Description				
	OF EXPENDITURE		Fees					=			plete Schedule T.	
	LAI LINDITORE							ш		officeholder living	g expense	
								Annual memb	oer:	ship dues		
	Complete ONLY if direct expenditure to benefit C/Ol		andidate/Offic	eholder name	C	Office sou	ght			Office he	eld	
	Date	F	Payee name									
	06/25/2025	F	Raconteur M	edia Company	/							
	Amount (\$)	F	Payee address	; City;	State;	Zip Co	de					
	\$250.00] 1	1717 W 6th S	Street								
		9	Ste. 215									
		/	Austin, TX 78	3703								
	PURPOSE	(a) (Category (See	Categories listed at t	he ton of this sch	edule)	(b)	Description				
	OF		Advertising E		10 10 01 1110 0011				outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE		J	•				Check if Austin,	, TX,	officeholder living	g expense	
								Campaign we	ebs	ite maintena	ance	
	Complete ONLY if direct		andidate/Office	sholder name		Office sou	tdr			Office ho	2ld	
	expenditure to benefit C/OI		andidate/Offici	moider name		vilice sou(giil			Office III	Jiu	

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	d Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 13/29 Rpt: 18/45	Darby, Drew (The Honorable) 00051651
4	Date	5 Payee name
	06/29/2025	Raconteur Media Company
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	1717 W 6th Street
		Ste. 215
		Austin, TX 78703
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
		Check if Austin, TX, officeholder living expense
		Annual campaign website hosting
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
F	Date	Payee name
	01/12/2025	Runnels County Junior Livestock Show Assn
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,250.00	PO Box 644
		Ballinger, TX 76821
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
Г	Date	Payee name
	05/19/2025	San Angelo Rotary Club
	Amount (\$)	Payee address; City; State; Zip Code
	\$259.00	PO Box 249
		San Angelo, TX 76902
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign membership dues
		Campaign membership dues
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
T		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Consuling Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 14/29 Rpt: 19/45	Darby, Drew (The Honorable) 00051651
4	Date	5 Payee name
	06/25/2025	San Angelo Rotary Club
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$259.00	PO Box 249
		San Angelo, TX 76902
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	LXI LINDITORL	Check if Austin, TX, officeholder living expense
		Campaign membership dues
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/03/2025	San Angelo Stock Show & Rodeo Association
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	200 West 43rd Street
	Ψ1,000.00	200 West 4514 Street
		San Angelo, TX 76903
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		Charitable donation - animal sponsorship
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experialitate to betterit eyes	
	Date	Payee name
	01/06/2025	Stroud, Laramie
	Amount (\$)	Payee address; City; State; Zip Code
	\$10,000.00	P.O. Box 1846
		Austin, TX 78767
	DUDDOCE	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Lahor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign contract labor
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 15/29 Rpt: 20/45	Darby, Drew (The Honorable) 00051651
4	Date	5 Payee name
	01/31/2025	Stroud, Laramie
6	Amount (\$) \$2,500.00	7 Payee address; City; State; Zip Code P.O. Box 1846
		Austin, TX 78767
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign contract labor
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/28/2025	Stroud, Laramie
	Amount (\$) \$2,500.00	Payee address; City; State; Zip Code P.O. Box 1846
		Austin, TX 78767
	PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign contract labor
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/31/2025	Stroud, Laramie
	Amount (\$) \$2,500.00	Payee address; City; State; Zip Code P.O. Box 1846
		Austin, TX 78767
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign contract labor
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Frinting Expense Legal Services Salaries/Mages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 16/29 Rpt: 21/45	Darby, Drew (The Honorable)	00051651
4	Date	5 Payee name	
	04/30/2025	Stroud, Laramie	
6	Amount (\$) \$2,500.00		
		Austin, TX 78767	
8	PURPOSE OF EXPENDITURE	Check if Aust	el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense Contract labor
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought OH	Office held
	Date	Payee name	
	05/31/2025	Stroud, Laramie	
	Amount (\$) \$2,500.00	Payee address; City; State; Zip Code P.O. Box 1846	
		Austin, TX 78767	
	PURPOSE OF EXPENDITURE	Check if Aust	el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense Contract labor
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought OH	Office held
	Date	Payee name	
	06/30/2025	Stroud, Laramie	
	Amount (\$) \$2,500.00	Payee address; City; State; Zip Code P.O. Box 1846	
		Austin, TX 78767	
	PURPOSE OF EXPENDITURE	Check if Aust	el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense Contract labor
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought OH	Office held

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 Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officenoider/Politica	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 17/29 Rpt: 22/45	Darby, Drew (The Honorable) 00051651
4	Date	5 Payee name
	05/05/2025	Target
6	Amount (\$) \$58.36	7 Payee address; City; State; Zip Code 5621 N IH 35
_	DUDDOCE	Austin, TX 78723
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Supplies for capitol office
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/19/2025	Texas Correctional Industries
	Amount (\$) \$294.44	Payee address; City; State; Zip Code 8801 South 1st Street Ste. 100 Austin, TX 78748
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Staff gifts
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/24/2025	Texas House Republican Caucus
	Amount (\$) \$1,000.00	Payee address; City; State; Zip Code P.O. Box 13305
		Austin, TX 78711
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Annual membership dues
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:		,
	Sch: 18/29 Rpt: 23/45	Darby, Drew (The Honorable) 00051651	
4	Date	5 Payee name	
L	01/29/2025	Texas House of Representatives	
6	Amount (\$) \$346.83	7 Payee address; City; State; Zip Code P.O. Box 2910 Austin, TX 78768	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Flags for constituents	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
L	03/21/2025	Texas House of Representatives	
	Amount (\$) \$231.22	Payee address; City; State; Zip Code P.O. Box 2910	
		Austin, TX 78768	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Flags for constituents	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	_
	03/03/2025	Texas House of Representatives	
	Amount (\$) \$200.00	Payee address; City; State; Zip Code P.O. Box 2910	
		Austin, TX 78768	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Energy Resources Committee expenses	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	

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 Lenal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solarios (Contract Labor,

	Credit Card Payment	The Instruction Guide explains how to co	-	ete this form.
1	Total pages Schedule F1:	·		3 Filer ID (Ethics Commission Filers)
	Sch: 19/29 Rpt: 24/45	Darby, Drew (The Honorable)		00051651
4	Date	5 Payee name		•
	05/06/2025	The Energy Council		
6	Amount (\$)	7 Payee address; City; State; Zip Co	de	
	\$395.00	13760 Noel Road		
		Ste. 1160		
		Dallas, TX 75240		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Fees		Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE			Check if Austin, TX, officeholder living expense
				The Energy Council Conference registration fee
_				
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ght	Office held
	Date	Payee name		
	05/08/2025	United Airlines		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$102.11	233 S Wacker Drive		
		Chicago, IL 60606		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Fees		Check if travel outside of Texas. Complete Schedule T.
	LA LABITORE			Check if Austin, TX, officeholder living expense
				Airline fees to attend The Energy Council Conference
	Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held
	expenditure to benefit C/O		grit	Office field
	<u> </u>			
	Date	Payee name		
	05/08/2025	United Airlines		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$102.11	233 S Wacker Drive		
		Chicago, IL 60606		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Fees		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				Airline fees to attend The Energy Council
				Conference
	Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held
	expenditure to benefit C/O		Aur	Office field

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 Salaries (Contract Labor,

	Credit Card Payment	The Instruction Guide explains how to con	•	lete this form.
1	Total pages Schedule F1:		•	3 Filer ID (Ethics Commission Filers)
	Sch: 20/29 Rpt: 25/45	Darby, Drew (The Honorable)		00051651
4	Date	5 Payee name		·
	05/08/2025	United Airlines		
6	Amount (\$)	7 Payee address; City; State; Zip Coo	de	
	\$248.96	233 S Wacker Drive		
		Chicago, IL 60606		
8	PURPOSE OF	, , ,	(b)	Description
	EXPENDITURE	Travel Out of District		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				Airfare to attend The Energy Council Conference
				<i>5</i> ,
9	Complete ONLY if direct	Candidate/Officeholder name Office soug	ght	Office held
	expenditure to benefit C/O	н		
_	Date	Payee name		
	05/19/2025	United States Postal Service		
	Amount (\$)	Payee address; City; State; Zip Coc	de	
	\$360.00	1 N. Abe	uc	
	φοσο.σσ	111.7.00		
		San Angelo, TX 76903		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				Annual campaign post office box renewal
				, amual campaign pool office box fortonal
	Complete ONLY if direct	Candidate/Officeholder name Office soug	aht	Office held
	expenditure to benefit C/OI	<u> </u>	,	
-	Date	Payee name		
	01/17/2025	United States Treasury		
	Amount (\$)	Payee address; City; State; Zip Coo	de.	
	\$42.00	IRS	ue	
	Ψ-12.00	P.O. Box 105078		
		Atlanta, GA 30348-5078		
	PURPOSE OF	, , , , , , , , , , , , , , , , , , , ,	(b)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Taxes		Check if Austin, TX, officeholder living expense
				Campaign payroll taxes
	Complete ONLY if direct	Candidate/Officeholder name Office soug	ght	Office held
	expenditure to benefit C/OI	-1		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	al Co	mmittee Legal Services The Instruction Guide e.		-		OTHER (enter a	category not listed above)
1	Total pages Schedule F1:	2	FILER NAME			3 F	iler ID	(Ethics Commission Filers)
	Sch: 21/29 Rpt: 26/45		Darby, Drew (The Honorable)			C	00051651	
4	Date	5	Payee name					
	01/17/2025		United States Treasury					
6	Amount (\$)	7	Payee address; City;	State; Zip Co	ode			
	\$3,163.96		IRS					
			P.O. Box 105078					
			Atlanta, GA 30348-5078					
8	PURPOSE	(a)	Category (See Categories listed at the top of	of this schedule)	(b)	Description		
	OF EXPENDITURE		Taxes	ŕ		Check if travel outside		
	EXI ENDITORE					Check if Austin, TX, of		j expense
						Campaign payroll	taxes	
_					<u>. </u>			
9	Complete ONLY if direct expenditure to benefit C/Ol		Candidate/Officeholder name	Office sou	ıght		Office he	eld
_	Data	_						
	Date		Payee name					
	02/13/2025	L	United States Treasury					
Amount (\$)			Payee address; City;	State; Zip Co	ode			
	\$6.50		IRS					
			P.O. Box 105078					
			Atlanta, GA 30348-5078					
	PURPOSE	(a)	Category (See Categories listed at the top of	of this schedule)	(b)	Description		
	OF EXPENDITURE		Taxes			Check if travel outside		
	2/11 2/13/13/12					Check if Austin, TX, of		g expense
						Campaign payroll	taxes	
	Commists ONII V if direct	<u>L</u>	Candidate/Officeholder name	Office			Office le	- Lal
	Complete ONLY if direct expenditure to benefit C/O		Sandidate/Officeriolder flame	Office sou	igni		Office he	eiu
	Date		Payee name					
	02/13/2025		United States Treasury					
	Amount (\$)		Payee address; City;	State; Zip Co	ode			
	\$606.68		IRS					
			P.O. Box 105078					
			Atlanta, GA 30348-5078					
	PURPOSE	(a)	Category (See Categories listed at the top of	of this schedule)	(b)	Description		
	OF EXPENDITURE		Taxes			Check if travel outside		•
	LAFENDITORE					Check if Austin, TX, of		g expense
						Campaign payroll	taxes	
	0 1, 2, 2, 2, 2, 2				Ļ			
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Officeholder name	Office sou	ıght		Office he	eld

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comn Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	
_	Sch: 22/29 Rpt: 27/45	Darby, Drew (The Honorable) 00051651
4	Date	5 Payee name
	03/13/2025	United States Treasury
6	Amount (\$) \$3.24	7 Payee address; City; State; Zip Code IRS
	Ψ0.24	P.O. Box 105078
		Atlanta, GA 30348-5078
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Taxes Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign payroll taxes
		Campaign payren tares
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experialitate to beliefit C/OI	<u>'</u>
	Date	Payee name
	03/13/2025	United States Treasury
	Amount (\$)	Payee address; City; State; Zip Code
	\$523.82	IRS
		P.O. Box 105078
		Atlanta, GA 30348-5078
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Taxes Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign payroll taxes
		Campaign payron axos
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/11/2025	United States Treasury
	Amount (\$)	Payee address; City; State; Zip Code
	\$3.26	IRS
		P.O. Box 105078
		Atlanta, GA 30348-5078
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Taxes Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Campaign payroll taxes
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Com Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Lenal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 23/29 Rpt: 28/45	Darby, Drew (The Honorable) 00051651
4	Date	5 Payee name
	04/11/2025	United States Treasury
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$523.84	IRS
		P.O. Box 105078
		Atlanta, GA 30348-5078
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Taxes Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign payroll taxes
		Campaign payron taxes
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
L	experialiture to beliefit C/O	
	Date	Payee name
	05/13/2025	United States Treasury
	Amount (\$)	Payee address; City; State; Zip Code
	\$3.24	IRS
		P.O. Box 105078
		Atlanta, GA 30348-5078
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Taxes Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign payroll taxes
		Campaign payron taxes
r	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	H
	Date	Payee name
	05/13/2025	United States Treasury
	Amount (\$)	Payee address; City; State; Zip Code
	\$523.84	IRS
		P.O. Box 105078
		Atlanta, GA 30348-5078
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Taxes Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign payroll taxes
		Campaign payron taxes
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	H

SCHEDULE F1

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

Food/Beverage Expense Contributions/ Donations Made By -Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)						
	Sch: 24/29 Rpt: 29/45	Darby, Drew (The Honorable) 00051651						
4	Date	5 Payee name						
	06/13/2025	United States Treasury						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$3.26	IRS						
		P.O. Box 105078						
		Atlanta, GA 30348-5078						
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Taxes Check if travel outside of Texas. Complete Schedule T.						
		Check if Austin, TX, officeholder living expense Campaign payroll taxes						
		Campaign payron taxes						
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/OI	1						
	Date	Payee name						
	06/13/2025	United States Treasury						
Г	Amount (\$)	Payee address; City; State; Zip Code						
	\$523.80	IRS						
		P.O. Box 105078						
		Atlanta, GA 30348-5078						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Taxes Check if travel outside of Texas. Complete Schedule T.						
		Check if Austin, TX, officeholder living expense						
		Campaign payroll taxes						
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/OI							
	Date	Payee name						
	06/30/2025	United States Treasury						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$3.24	IRS						
		P.O. Box 105078						
		Atlanta, GA 30348-5078						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Taxes Check if travel outside of Texas. Complete Schedule T.						
		Check if Austin, TX, officeholder living expense						
		Campaign payroll taxes						
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/OI							

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees Contributions/ Donations Made By -

Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 25/29 Rpt: 30/45	Darby, Drew (The Honorable) 00051651
4	Date	5 Payee name
	06/30/2025	United States Treasury
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$523.88	IRS
		P.O. Box 105078
		Atlanta, GA 30348-5078
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Taxes Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign payroll taxes
		Campaign payron taxes
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	02/28/2025	United States Treasury
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$932.00	IRS
		P.O. Box 105078
		Atlanta, GA 30348-5078
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Taxes Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Balance due on campaign 1120-POL tax return
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	02/25/2025	Wilson, Lori
	Amount (\$)	Payee address; City; State; Zip Code
	\$884.10	PO Box 94
		Knickerbocker, TX 76939
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Political mileage. Log maintained in the campaign
		office (1263m*.70). Not reimbursed by the state.
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
Г		
ı		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		bove)
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·	sion Filers)
*	Sch: 26/29 Rpt: 31/45		51011 1 11613 <i>)</i>
4	Date	5 Payee name	
	04/19/2025	Wilson, Lori	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$469.70	PO Box 94	
		Knickerbocker, TX 76939	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Political mileage. Log maintained in the ca	mnaign
		office (664m*.70). Not reimbursed by the	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	JIT	
	Date	Payee name	
	05/19/2025	Wilson, Lori	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$267.40	PO Box 94	
		Knickerbocker, TX 76939	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Political mileage. Log maintained in the ca	ampaian
		office (382m*.70). Not reimbursed by the	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held OH	
	Date	Payee name	
	06/03/2025	Wilson, Lori	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$263.90		
	Ψ200.30		
		Knickerbocker, TX 76939	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Political mileage. Log maintained in the ca	mnaign
		office (377m*.70). Not reimbursed by the s	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		

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 Salaries/Wages/Contract Labor

l	Credit Card Payment	The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
l	Sch: 27/29 Rpt: 32/45	Darby, Drew (The Honorable) 00051651					
4	Date	5 Payee name					
	06/29/2025	Wilson, Lori					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
l	\$284.20	PO Box 94					
		Knickerbocker, TX 76939					
8	PURPOSE						
ľ	OF	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T.					
	EXPENDITURE	Check if Austin, TX, officeholder living expense					
		Political mileage. Log maintained in the campaign					
		office (406m*.70). Not reimbursed by the state.					
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held					
L	experialiture to beriefit C/Oi						
	Date	Payee name					
	01/31/2025	Wilson, Lori					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$500.00	PO Box 94					
		Knickerbocker, TX 76939					
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Salaries/Wages/Contract Labor					
	LXI LINDITORE	Check if Austin, TX, officeholder living expense					
		Campaign contract labor					
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
l	expenditure to benefit C/OI						
┝	D-1-						
l	Date 02/28/2025	Payee name					
		Wilson, Lori					
l	Amount (\$)	Payee address; City; State; Zip Code					
l	\$250.00	PO Box 94					
l		W : L L T TV 7000					
		Knickerbocker, TX 76939					
l	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description					
l	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
l		Campaign contract labor					
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/OI						
一							
I							

SCHEDULE F1

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 Salaries/Wages/Contract Labor

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Credit Card Payment	The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
	Sch: 28/29 Rpt: 33/45	Darby, Drew (The Honorable) 00051651					
4	Date	5 Payee name					
	03/31/2025	Wilson, Lori					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$250.00	PO Box 94					
		Knickerbocker, TX 76939					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
		Campaign contract labor					
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/OI	1					
F	Date	Payee name					
	04/30/2025	Wilson, Lori					
Г	Amount (\$)	Payee address; City; State; Zip Code					
	\$250.00	PO Box 94					
		Knickerbocker, TX 76939					
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.					
		Check if Austin, TX, officeholder living expense Campaign contract labor					
		Control graduation and the control graduation an					
┢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/OI	1					
F	Date	Payee name					
	05/31/2025	Wilson, Lori					
Г	Amount (\$)	Payee address; City; State; Zip Code					
	\$250.00	PO Box 94					
		Knickerbocker, TX 76939					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin TV, official deal in iting a propaga					
		Check if Austin, TX, officeholder living expense Campaign contract labor					
		Campaign contract					
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/OI						
ı							

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Committee	Food/Beverage Expense Gift/Awards/Memorials Expe Legal Services The Instruction Guide	Salaries	Expense /Wages/Contract Labor	Trave	I in District I Out of Dis ER (enter a	trict category not listed above)
1	Total pages Schedule F1:	2 FILER NAM	ИΕ			3 Filer	ID	(Ethics Commission Filers)
	Sch: 29/29 Rpt: 34/45	Darby, Dre	ew (The Honorable)			000	51651	
4	Date	5 Payee nam	ie			<u>'</u>		
	06/30/2025	Wilson, Lo						
6	Amount (\$)	7 Payee addr	ress; City;	State; Zip C	Code			
	\$250.00	PO Box 94	4					
L			cker, TX 76939					
8	PURPOSE OF		(See Categories listed at the top		(b) Description			
	EXPENDITURE	Salaries/W	Vages/Contract Labor	r	Check if trave			olete Schedule T.
					Campaign o			СХРСПОС
9	Complete ONLY if direct expenditure to benefit C/Ol		fficeholder name	Office so	ought		Office he	eld

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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 Salaries/Wages/Contract Labor

The Instruction Guide explains how to complete this form.								
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)				
Sch: 1/8 Rpt: 35/45	Darby, Drew (The Honorable)				00051651			
4 CREDIT CARD ISSUER		ncial institution cial Services	EXPEND	DF UNITEMIZED DITURES ED TO A CREDIT	\$	1,180.5	57	
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) (Credit Card Issue	r Paid			
	\$51.17	05/31/2025						
7 PAYEE	(a) Payee name	•	(b) Payee a	ddress;	City,	State,	Zip Code	
	Notion Labs		Ste. 2	ison Street isco, CA 94110				
8 PURPOSE OF	(a) Category		(b) Descript	ion				
EXPENDITURE X Political	(See Categories listed at the top Office Overhead/Rent		Software f	or campaign off	ïce			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense		
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held			
expenditure to benefit C/OH			_					
PAYMENT	(a) Amount Charged	(b) Date of Charge	. , . , ,	Credit Card Issue	r Paid			
	\$59.83	03/31/2025	05/05/202	5				
PAYEE	(a) Payee name	•	(b) Payee a	ddress;	City,	State,	Zip Code	
	Notion Labo		2300 Harrison Street					
	Notion Labs		Ste. 2					
			San Francisco, CA 94110					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description					
l <u> </u>	Office Overhead/Ren		Software for campaign office					
X Political								
Non-Political	\(\frac{1}{2}\) \(\begin{array}{cccccccccccccccccccccccccccccccccccc	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense		
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held			
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) (02/05/202	Credit Card Issue	r Paid			
	\$33.20	01/13/2025	02/05/202	5				
PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code	
			410 Terry	Avenue North				
	Amazon							
			Seattle, W	'A 98109				
PURPOSE OF	(a) Category	of their colored also	(b) Descript		<u> </u>			
EXPENDITURE	(See Categories listed at the top Office Overhead/Ren		Supplies for	or capitol office				
X Political								
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense		
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held			
expenditure to benefit C/OH								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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 Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.								
1 Total pages Schedule F4:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)						
Sch: 2/8 Rpt: 36/45	Darby, Drew (The F	Honorable)		00051651					
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	1,180.5	57			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid					
	\$29.22	01/29/2025	03/05/2025						
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code			
	Amazon		410 Terry Avenue North						
			Seattle, WA 98109						
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description						
X Political	Office Overhead/Rent		Supplies for capitol office						
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living exp	ense				
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held					
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue 06/05/2025	er Paid					
	\$59.83	04/30/2025	00/03/2023						
PAYEE	(a) Payee name	-	(b) Payee address;	City,	State,	Zip Code			
	Notion Labs		2300 Harrison Street						
	NOTION Labs		Ste. 2						
			San Francisco, CA 94110						
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description						
X Political	Office Overhead/Rent		Software for campaign office						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense						
Complete ONLY if direct	Candidate/Officeholder	name Offic	ce sought Office held						
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid					
	\$237.43	01/06/2025	02/05/2025						
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code			
	Costco		4301 W William Cannon I	Drive					
	Cosico		Bldg A, Ste. 100						
			Austin, TX 78749						
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description						
	Office Overhead/Rent		Supplies for capitol office						
X Political			<u> </u>						
Non-Political	\(\frac{1}{2} \)	of Texas. Complete Schedule T.		, officeholder living exp	ense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held					

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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 Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)		
	Sch: 3/8 Rpt: 37/45	Darby, Drew (The F	Honorable)			00051651				
4	CREDIT CARD ISSUER		ncial institution revious	EXPENDI	F UNITEMIZED ITURES D TO A CREDIT	\$	1,180.5	57		
6	PAYMENT	(a) Amount Charged \$28.46	(b) Date of Charge 01/21/2025	(c) Date(s) C 03/05/2025	Credit Card Issuer	Paid				
7	PAYEE	(a) Payee name Costco		Bldg A, Ste Austin, TX	illiam Cannon D e. 100 78749	City, Prive	State,	Zip Code		
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description	on or capitol office					
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense			
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held				
Е	xpenditure to benefit C/OH	(a) Amazunt Chavarad	(h) Data of Charge	(a) Data(a) C	Sundit Cond Inc.	Daid				
	PAYMENT	(a) Amount Charged \$151.54	(b) Date of Charge 01/07/2025	02/05/2025	Credit Card Issuer	Paid				
	PAYEE	(a) Payee name	I	(b) Payee ac	ldress;	City,	State,	Zip Code		
		Amazon		410 Terry A	Avenue North					
L				Seattle, W						
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Supplies for	on or capitol office					
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		7 Check if Austin, TX,	officeholder living exp	ense			
H	Complete ONLY if direct	Candidate/Officeholder		ice sought Office held						
е	xpenditure to benefit C/OH									
	PAYMENT	(a) Amount Charged \$34.63	(b) Date of Charge 01/14/2025	(c) Date(s) C 02/05/2025	Credit Card Issuer	Paid				
	PAYEE	(a) Payee name Amazon		(b) Payee ac 410 Terry A Seattle, WA	Avenue North	City,	State,	Zip Code		
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	•	(b) Description						
L	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense			
е	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held				

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

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)

Salahes/Wages/Contract Labor OTHER (enter a category not listed a

	The Instruction Guide explains how to complete this form.								
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (E	3 Filer ID (Ethics Commission Filers)			
	Sch: 4/8 Rpt: 38/45	Darby, Drew (The Honorable)			00051651				
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITED EXPENDITURES CHARGED TO A C CARD	\$	1,180.5	57		
6	PAYMENT	(a) Amount Charged \$38.38	(b) Date of Charge 01/02/2025	(c) Date(s) Credit Car 02/05/2025	d Issuer Paid				
7	PAYEE	(a) Payee name Notion Labs		(b) Payee address; 2300 Harrison Stre Ste. 2 San Francisco, CA		State,	Zip Code		
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Software for campaign office					
L	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if A	austin, TX, officeholder living	expense			
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held				
	PAYMENT	(a) Amount Charged \$38.38	(b) Date of Charge 02/03/2025	(c) Date(s) Credit Car 03/05/2025	d Issuer Paid				
	PAYEE	(a) Payee name Notion Labs		(b) Payee address; 2300 Harrison Stre Ste. 2 San Francisco, CA		State,	Zip Code		
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	,	(b) Description Software for campa	aign office				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if A	ustin, TX, officeholder living	expense			
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held				
	PAYMENT	(a) Amount Charged \$38.38	(b) Date of Charge 02/28/2025	(c) Date(s) Credit Car 04/07/2025	d Issuer Paid				
	PAYEE	(a) Payee name Notion Labs		(b) Payee address; 2300 Harrison Stre Ste. 2 San Francisco, CA		State,	Zip Code		
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense			(b) Description Software for campa	aign office					
L	Non-Political	(*) —	of Texas. Complete Schedule T.		ustin, TX, officeholder living	expense			
e	Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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 Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete thi	is form.				
1 Total pages Schedule F4:	chedule F4: 2 FILER NAME			3 Filer ID (Ethic	cs Commiss	sion Filers)		
Sch: 5/8 Rpt: 39/45	Darby, Drew (The H	00051651						
4 CREDIT CARD ISSUER		ncial institution revious	EXPEND	F UNITEMIZED ITURES D TO A CREDIT	\$	1,180.5	57	
6 PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issue	r Paid			
	\$309.81	03/09/2025	04/07/2025	5				
7 PAYEE	(a) Payee name	l	(b) Payee ac	ddress;	City,	State,	Zip Code	
	Costco		4301 W W Bldg A, Ste Austin, TX		Orive			
8 PURPOSE OF	(a) Category		(b) Descripti	on				
EXPENDITURE X Political	(See Categories listed at the top Office Overhead/Rent		Supplies fo	or capitol office				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense		
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held			
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issue	r Paid			
	\$39.02	03/02/2025	04/07/202	5				
PAYEE	(a) Payee name		(b) Payee ac	ddress;	City,	State,	Zip Code	
	HEB - #755 Austin	Congress		ongress Ave				
	() 2 :		Austin, TX 78704 (b) Description					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Office Overhead/Rent		1 ' '	or capitol office				
X Political		•						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense		
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held			
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged \$2,196.72	(b) Date of Charge 05/09/2025	(c) Date(s) C 06/05/2025	Credit Card Issuei 5	r Paid			
PAYEE	(a) Payee name	l .	(b) Payee ac	ddress;	City,	State,	Zip Code	
			420 S Con	gress Avenue				
	Levenger							
			Delray Bea	ach, FL 33445				
PURPOSE OF	(a) Category	(4)	(b) Description					
EXPENDITURE (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense		Committee gifts for members of Energy Resources				es		
X Political GIIVAWards/Memoriais Expense Committee				:				
Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expe					ense			
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held			
expenditure to benefit C/OH								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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 Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.								
1	Total pages Schedule F4:	1: 2 FILER NAME			3 Filer ID (Ethics Commission Filers)				
	Sch: 6/8 Rpt: 40/45	Darby, Drew (The H	00051651						
4	CREDIT CARD ISSUER		ncial institution revious	EXPEND	F UNITEMIZED ITURES D TO A CREDIT	\$	1,180.5	57	
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issuer	r Paid			
		\$294.48	05/27/2025						
7	PAYEE	(a) Payee name		(b) Payee ac	ddress;	City,	State,	Zip Code	
		Austin Print Compa	uny	6448 Hwy Bldg C. Ste Austin, TX	e. C102				
8	PURPOSE OF	(a) Category		(b) Descripti	on				
	EXPENDITURE X Political	(See Categories listed at the top Gift/Awards/Memorial		Committee Committee	gifts for memb	ers of Energy	Resource	es	
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	X, officeholder living expense			
9	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held			
€	expenditure to benefit C/OH		-	_					
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issuer	r Paid			
		\$591.34	06/07/2025						
Г	PAYEE	(a) Payee name		(b) Payee ac	ddress;	City,	State,	Zip Code	
		Hilton Washington I	DC Capitol Hill	525 New J	ersey Avenue N	٧W			
L					n, DC 20001				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description Lodging to attend The Energy Council Conference					
	X Political								
L	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense		
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held			
E	expenditure to benefit C/OH		T						
	PAYMENT	(a) Amount Charged \$37.88	(b) Date of Charge 01/29/2025	(c) Date(s) C 03/05/202!	Credit Card Issuer 5	r Paid			
	PAYEE	(a) Payee name	•	(b) Payee ac	ddress;	City,	State,	Zip Code	
		A		410 Terry /	Avenue North				
		Amazon							
L				Seattle, W					
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top.	of this schedule)	(b) Description Supplies for capitol office					
EXPENDITURE (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Sup				Supplies to	ог сарітої опісе				
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense		
6	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held			
\vdash		<u> </u>							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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 Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete	this form.	(1 11 11 11 11 11 11 11 11 11 11 11 11 1	,	,	
1	Total pages Schedule F4:	4: 2 FILER NAME				3 Filer ID (Ethics Commission Filers)			
	Sch: 7/8 Rpt: 41/45	Darby, Drew (The Honorable)			00051651				
4	CREDIT CARD ISSUER	Name of financial institution see previous 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD			\$ 1,180.57				
6	PAYMENT	(a) Amount Charged \$91.39	(b) Date of Charge 01/13/2025	(c) Date(s 02/05/20) Credit Card Issuer 125	Paid			
7	PAYEE	(a) Payee name H-E-B #428			odie Lane	City,	State,	Zip Code	
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		Austin, T (b) Descri Supplies					
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	I	Check if Austin, TX,	officeholder living exp	ense		
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held			
	PAYMENT	(a) Amount Charged \$123.03	(b) Date of Charge 03/09/2025	(c) Date(s 04/07/20) Credit Card Issuer 125	Paid			
	PAYEE	(a) Payee name H-E-B #428			odie Lane	City,	State,	Zip Code	
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		Austin, T (b) Descri Supplies					
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense		
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held			
	PAYMENT	(a) Amount Charged \$16.51	(b) Date of Charge 05/28/2025	(c) Date(s) Credit Card Issuer	Paid			
	PAYEE	(a) Payee name H-E-B #428		(b) Payee 6900 Bro Austin, T	odie Lane	City,	State,	Zip Code	
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	tal Expense	(b) Descri Supplies	for capitol office				
L	Non-Political	` 1	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense		
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	riame Office	e sought		Office held			
1									

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	- Gift/Awards	age Expense Memorials Expense	Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Transportation Equipment Travel in District Travel Out of District OTHER (enter a category r						
	The Instruction Guide explains how to complete this form.									
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics	Commission Filers)					
Sch: 8/8 Rpt: 42/45	Darby, Drew (The H	onorable)		00051651						
4 CREDIT CARD ISSUER	Name of finan see pro		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CRED CARD	 \$	1,180.57					
6 PAYMENT	(a) Amount Charged \$1,134.48	(b) Date of Charge 05/10/2025	(c) Date(s) Credit Card Issu 06/05/2025	uer Paid						
7 PAYEE	(a) Payee name Graphic Image Inc		(b) Payee address; 305 Spagnoli Road Melville, NY 11747	City,	State, Zip Code					
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of Gift/Awards/Memorials	•	(b) Description Staff gifts							
Non-Political	I	f Texas. Complete Schedule T		X, officeholder living expen	nse					
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Off	fice sought	Office held						

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

	The Instru	ction Guide explains how to complete this form.			ages Schedule K: /2 Rpt: 43/45
2	FILER NAME		3	Filer ID	(Ethics Commission Filers)
	Darby, Drew	v (The Honorable)		00051	651
1	Date	5 Name of person from whom amount is received			8 Amount (\$)
-	02/01/2025	Costco			\$7.9
	02/01/2025				Φ1.9
		6 Address of person from whom amount is received; City; State; Zip Code			
		Austin, TX 78749			
		7 Purpose for which amount is received	litica	al conti	ribution returned to filer
		Refund on office supplies for capitol office			
_	Date	Name of person from whom amount is received			Amount (\$)
	02/10/2025	Elan Financial Services			\$29.2
	02/10/2023				Ψ23.2
		Address of person from whom amount is received; City; State; Zip Code			
		0.4.4.40.00470			
		St. Louis, MO 63179			
		<u> </u>	litica	al conti	ribution returned to filer
		Refund on Amazon expense for office supplies			
	Date	Name of person from whom amount is received			Amount (\$)
	02/10/2025	Elan Financial Services			\$11.1
		Address of person from whom amount is received; City; State; Zip Code			
		riadicas di personi noni mioni amodili is recontati, city, citate, zip code			
		St. Louis, MO 63179			
			litica	al conti	I ribution returned to filer
		Refund on Bitly software for campaign office	muc	ai conti	ibation retarried to mer
	Date	Name of person from whom amount is received			Amount (\$)
	02/02/2025	First Financial Bank			\$363.8
		Address of person from whom amount is received; City; State; Zip Code			
		Abilene, TX 79604			
		Purpose for which amount is received	litica	al conti	ribution returned to filer
		Interest earned on campaign money market account			
=	Date	Name of person from whom amount is received			Amount (\$)
	03/02/2025	First Financial Bank			\$299.8
	00/02/2020				Ψ233.0
		Address of person from whom amount is received; City; State; Zip Code			
		Abilene TV 70004			
		Abilene, TX 79604			
		<u> </u>	litica	al conti	ribution returned to filer
		Interest earned on campaign money market account			
1					

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

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	The Instru	ction Guide explains how to complete this form.	1		ages Schedule K: //2 Rpt: 44/45	
2	FILER NAME		3	Filer ID	(Ethics Commission	on Filers)
	Darby, Drew (The Honorable) 00051					
┝	Date	5 Name of person from whom amount is received	<u> </u>		8 Amount (\$)	
	03/30/2025	First Financial Bank			σ Amount (φ)	\$304.08
	03/30/2023					φ304.00
		6 Address of person from whom amount is received; City; State; Zip Code				
		N. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7.				
		Abilene, TX 79604				
			olitic	al contr	ribution returned to fil	er
		Interest earned on campaign money market account				
Г	Date	Name of person from whom amount is received			Amount (\$)	
	04/30/2025	First Financial Bank				\$308.37
		Address of person from whom amount is received; City; State; Zip Code				
		Address of person from amount is received, Gity, Glade, Elp Gode				
		Abilene, TX 79604				
			olitic	al contr	<u>I</u> ribution returned to fil	Ωr
		Interest earned on campaign money market account	Ontic	ai conti	ibation retained to in	Ci
⊨					ī	
	Date	Name of person from whom amount is received			Amount (\$)	
	06/01/2025	First Financial Bank				\$322.28
		Address of person from whom amount is received; City; State; Zip Code				
		Abilene, TX 79604				
			olitic	al contr	ribution returned to fil	er
L		Interest earned on campaign money market account				
Г	Date	Name of person from whom amount is received			Amount (\$)	
	06/30/2025	First Financial Bank				\$283.43
		Address of person from whom amount is received; City; State; Zip Code				
		Abilene, TX 79604				
		Purpose for which amount is received Check if po	olitic	al contr	ribution returned to fil	er
		Interest earned on campaign money market account				
H						

IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES SCHEDULE T FOR TRAVEL OUTSIDE OF TEXAS 1 Total pages Schedule T: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 45/45 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Darby, Drew (The Honorable) 00051651 4 Name of Contributor / Corporation or Labor Organization / Pledgor /Payee **United Airlines** 5 Contribution / Expenditure reported on: X Schedule F1 Schedule A2 Schedule B Schedule D Schedule B(J) Schedule C2 Schedule F4 Schedule COH-UC Schedule F2 Schedule G Schedule H 6 Dates of Travel 7 Name of person(s) traveling Darby, Drew (The Honorable) Departure city or name of departure location 06/05/2025 Austin, TX 9 Destination city or name of destination location 06/07/2025 Washington, DC 10 Means of transportation 11 Purpose of travel (including name of conference, seminar, or other event) Airfare to attend The Energy Council Conference Commercial Airplane