CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

_	Filer ID (Ethi	ics Commission Filers)	2 Total pages filed:			OFFICE	USE ONLY
	00085798		69			Date Received	
3	CANDIDATE /	MS / MRS / MR	FIRST		MI	ELECTRONIC	CALLY FILED
	OFFICEHOLDER NAME	The Honorable	Kevin D			08/01/2025	
		NICKNAME	LAST		SUFFIX	1	
			Sparks			Date Hand-delivered	or Date Postmarked
4	ORIGINAL	X January 15	Runoff	Other (s	specify)	Date Hand-delivered	of Date 1 ostillarred
	REPORT TYPE	July 15	Exceeded modified	reporting limit		Receipt #	Amount
		30th day before election	15th day after cam				
		8th day before election	appointment (office	• •		Date Processed	
5	ORIGINAL PERIOD		<u> </u>		Year	-	
5	COVERED	Month Day Yea 07/01/2024	THROUGH	Month Day 12/31/2024	real	Date Imaged	
_	EXPLANATION OF C			12/31/2024		<u> </u>	
_		t is that I listed the date tha	at we denosited some r	nonetary political cont	tributions into o	ır hank rathar tha	n the day we receive
7	AFFIDAVIT			ear, or affirm, under p correct.	enalty of perjur	/, that this correct	ed report is true
7	AFFIDAVIT		and				ed report is true
7	AFFIDAVIT		and	correct.	y and all applica s: I swear, or aith and without	ble statements: affirm that the ori an intent to misle	ginal report
7	AFFIDAVIT		and Che	correct. ck the box next to any Semiannual report was made in good for	y and all applica s: I swear, or aith and without formation contai swear, or affirm the 14th busine iginally filed is ir tt any error or or	ble statements: affirm that the ori an intent to misle ned in the report. that I am filing these day after the diaccurate or incon	ginal report ad or to is corrected ate I learned nplete. I
7	AFFIDAVIT		and Che	correct. ck the box next to any Semiannual report was made in good for misrepresent the inf Other reports: Is report not later than that the report as or swear, or affirm, that filed was made in go The	y and all applica s: I swear, or aith and without formation contai swear, or affirm the 14th busine iginally filed is in any error or or bood faith. Honorable Ke	affirm that the ori an intent to misle ned in the report. that I am filing thess day after the disaccurate or inconnission in the report	ginal report ad or to is corrected ate I learned nplete. I
7		AMP / SEAL ABOVE	and Che	correct. ck the box next to any Semiannual report was made in good for misrepresent the inf Other reports: Is report not later than that the report as or swear, or affirm, that filed was made in go The	y and all applica s: I swear, or aith and without formation contai swear, or affirm the 14th busine iginally filed is in any error or or bood faith. Honorable Ke	affirm that the ori an intent to misle ned in the report. that I am filing thess day after the diaccurate or inconnission in the report	ginal report ad or to is corrected ate I learned nplete. I
7	AFFIX NOTARY ST		and Che	correct. ck the box next to any Semiannual report was made in good formisrepresent the inf Other reports: I see report not later than that the report as or swear, or affirm, that filed was made in good The Signatu	y and all applica s: I swear, or aith and without ormation contai swear, or affirm the 14th busine iginally filed is in t any error or or ood faith.	affirm that the ori an intent to misle ned in the report. that I am filing the saday after the diaccurate or inconnission in the report. vin D Sparks or Officeholder	ginal report ad or to is corrected ate I learned nplete. I ort as originally
7	AFFIX NOTARY ST Sworn to and subsc	AMP / SEAL ABOVE ribed before me, by the sai	and Che	correct. ck the box next to any Semiannual report was made in good formisrepresent the inf Other reports: I see report not later than that the report as or swear, or affirm, that filed was made in good. The Signatu	y and all applica s: I swear, or aith and without ormation contai swear, or affirm the 14th busine iginally filed is ir t any error or or ood faith. Honorable Ke ure of Candidate	affirm that the ori an intent to misle ned in the report. that I am filing the saday after the diaccurate or inconnission in the report. vin D Sparks or Officeholder	ginal report ad or to is corrected ate I learned nplete. I ort as originally
7	AFFIX NOTARY ST Sworn to and subsc	ribed before me, by the sai	and Che	correct. ck the box next to any Semiannual report was made in good formisrepresent the inf Other reports: I see report not later than that the report as or swear, or affirm, that filed was made in good. The Signatu	y and all applica s: I swear, or aith and without ormation contai swear, or affirm the 14th busine iginally filed is ir t any error or or ood faith. Honorable Ke ure of Candidate	affirm that the ori an intent to misle ned in the report. that I am filing the saday after the diaccurate or inconnission in the report. vin D Sparks or Officeholder	ginal report ad or to is corrected ate I learned nplete. I ort as originally

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

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to comp	olete this form.	1 Filer ID (Ethics Comm 00085798		2 Total pages file	
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE U	JSE ONLY
OFFICEHOLDER NAME	The Honorable	Kevin D			Date Received	
10 001					ELECTRONICA	JII V EII ED
					08/01/2025	CLITICLD
	NICKNAME	LAST		SUFFIX	08/01/2025	
		Sparks				
4 CANDIDATE /	ADDRESS / PO BOX; AP	T / SUITE #; CIT	Y;	ZIP CODE	Date Hand-delivered or	Date Postmarked
OFFICEHOLDER MAILING	2600 Mockingbird					
ADDRESS					Receipt #	Amount
Change of Address	Midland, TX 79705					
	iviididiid, 177 73703				Date Processed	
					Date Imaged	
F. CAMBAICNI	MC (MDC (MD	FIDET				
5 CAMPAIGN TREASURER	MS / MRS / MR	FIRST		MI		
NAME	Mr.	Rick G				
	NICKNAME	LAST		SUFFIX		
		Strange				
6 CAMPAIGN	STREET ADDRESS (NO PO	O BOX PLEASE);	AP	T / SUITE #; CITY	; STA	TE; ZIP CODE
TREASURER ADDRESS	1104 Castle Rock Ct					
(Residence or Business)	Midland, TX 79705					
7 CAMPAIGN TREASURER		NE NUMBER E	EXTENSION			
PHONE	(432) 553-3627					
8 REPORT			_	-	_	
TYPE	X January 15	30th day before	election	Runoff	15th day after can appointment (offic	
	July 15	8th day before 6	election \square	Exceeded modified	Final Report (Atta	
			- П	reporting limit		,
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	07/01/2024	TH	HROUGH	12/31/202		
	0.702,202.			,,		
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year		rimary	Runoff	Other	
	,		-	브	<u> </u>	
			General	Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT	T (if known)	
	State Senator District 31					
	-!			,		
		ദേ т	O PAGE 2			
		00 1	O I AGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

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Sparks, Kevin D (The	Honorable)	14 Filer ID (100085798	Ethics Com	mission Filers)		
candidate / officeholder.	These expenditures may have been made without	the candidate's or office	holder's kno	owledge or		
COMMITTEE TYPE	COMMITTEE NAME					
GENERAL						
	COMMITTEE ADDRESS					
SPECIFIC						
	COMMITTEE CAMPAIGN TREASURER NAME					
	COMMITTEE CAMPAIGN TREASURER ADDRE	SS				
1 TOTAL LINUTEM	ZED POLITICAL CONTRIBUTIONS (OTHER THA	N PLEDGES LOANS	1			
			\$	0.00		
		S)	\$	414,450.66		
3. TOTAL UNITEM	IZED POLITICAL EXPENDITURES		\$	0.00		
4. TOTAL POLITIC	AL EXPENDITURES		\$	25,200.65		
		AST DAY OF THE	\$	701,762.87		
		OF THE LAST DAY	\$	0.00		
	The Hon	orable Kevin D Snark	S			
TARY STAMP / SEAL AB	DVE					
cribed before me, by the s	aid	, this the		day		
of, 20, to certify which, witness my hand and seal of office.						
cer administering	Printed name of officer administering	Title of officer	administeri	ng oath		
	This box is for notice of pandidate / officeholder. consent. Candidates and COMMITTEE TYPE GENERAL SPECIFIC 1. TOTAL UNITEMIOR GUARANTE 2. TOTAL POLITIC (OTHER THAN F. 3. TOTAL UNITEMIOR PORTING PE. 6. TOTAL PRINCIP OF THE REPORTING PE. 6. TOTAL PE.	candidate / officeholder. These expenditures may have been made without consent. Candidates and officeholders are required to report this information. COMMITTEE TYPE GENERAL COMMITTEE NAME GENERAL COMMITTEE ADDRESS SPECIFIC COMMITTEE ADDRESS	This box is for notice of political contributions accepted or political expenditures made by political condidate / officeholder. These expenditures may have been made without the candidates or office consent. Candidates and officeholders are required to report this information only if they receive no consent. Candidates and officeholders are required to report this information only if they receive no committee type. COMMITTEE TYPE GENERAL COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) 3. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) 4. TOTAL POLITICAL EXPENDITURES 5. TOTAL POLITICAL EXPENDITURES 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD I swear, or affirm, under penalty of perjury, that the acc true and correct and includes all information required to under Title 15, Election Code. The Honorable Kevin D Spark Signature of Candidate or Officehold Signature of Candidate or Officehold CAMPA STAMP / SEAL ABOVE CIDEN STAMP / SEAL ABOVE	This box is for notice of political contributions accepted or political expenditures made by political committees to candidate / officeholder. These expenditures may have been made without the candidates or officeholder's kind consent. Candidates and officeholders are required to report this information only if they receive notice of such COMMITTEE TYPE COMMITTEE NAME COMMITTEE TAME GENERAL COMMITTEE ADDRESS		

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

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					4 01 09
18 FIL	ER NAN		19 Filer ID	(Eth	nics Commission Filers)
Sp	arks, K	evin D (The Honorable)	00085798		
		E SUBTOTALS		T	SUBTOTAL AMOUNT
INA		SCHEDULE		igspace	
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	414,250.66
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	200.00	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS	\$		
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	25,200.65
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10	. 🔲	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11	. X	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	1,600.00
12	. 🔲	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL C	NS	SCHEDULE A1			
	The Instru	ction Guide explains how t	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 1/30 Rpt: 5/69	
2	FILER NAME Sparks, Kevi	in D (The Honorable)			3	Filer ID (Ethics Commission 00085798	on Filers)
4	Date 12/10/2024	5 Full name of contributorA & M PAC6 Contributor address; City; State	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$2,500.00
_	Deinsinal	Austin, TX 78701	- Ia	Frankrije (Operlanta stiere			
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 12/13/2024	Full name of contributor AT&T Texas PAC Contributor address; City; Stat				Amount of Contribution (\$)	\$2,000.00
	Dringing aggr	Austin, TX 78701		Employer (Coo Instructions	_		
	Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
	Date 10/28/2024	Full name of contributor [Alsup, James (Mr.) Contributor address; City; Stat	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$250.00
		Midland, TX 79705					
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	i)		
	Date 10/28/2024	Full name of contributor Angelo Jr., Ernest (Mr.) Contributor address; City; Stat Midland, TX 79701				Amount of Contribution (\$)	\$5,000.00
	Principal occu Petroleum E	pation / Job title (See Instructions) ngineer		Employer (See Instructions Self	5)		
	Date 10/11/2024	Full name of contributor Apache Corporation PAC Contributor address; City; Stat Houston, TX 77042	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		

	MONET	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1			
	The Instru	ction Guide explains hov	v to complete this fo	rn	n.	1	Total pages Schedule A1: Sch: 2/30 Rpt: 6/69			
2	FILER NAME Sparks, Kevi	in D (The Honorable)				3	Filer ID (Ethics Commission 00085798	on Filers)		
4	Date 12/14/2024	Full name of contributor Archer, Stuart (Mr.) Contributor address; City; S	out-of-state PAC (ID#:			7	Amount of Contribution (\$)	\$1,000.00		
_		Frisco, TX 75033								
8	Principal occu CEO	pation / Job title (See Instructions	(1)	9	Employer (See Instructions Oceans Healthcare	s) 				
	Date 11/21/2024	Full name of contributor Association General Con Contributor address; City; S					Amount of Contribution (\$)	\$2,500.00		
	Principal occu	Austin, TX 78768 pation / Job title (See Instructions	s) [Employer (See Instructions	(s)				
	i inioipai ooda	patient, cos tido (eco metrodoni			Employer (GGG mondonoris	<i>''</i>				
	Date 11/21/2024	Full name of contributor BNSF Rail PAC Contributor address; City; S	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$1,500.00		
		Fort Worth, TX 76161								
	Principal occu	pation / Job title (See Instructions	5)		Employer (See Instructions	5)				
	Date 11/21/2024	Full name of contributor Beef PAC Contributor address; City; S Amarillo, TX 79106					Amount of Contribution (\$)	\$5,000.00		
	Principal occu	pation / Job title (See Instruction:	5)		Employer (See Instructions	5)				
	Date 10/15/2024	Full name of contributor Bellina, Jim (Mr.) Contributor address; City; S Amarillo, TX 79106	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$1,000.00		
	Principal occu CEO	pation / Job title (See Instructions	5)		Employer (See Instructions AMA Tech Tel	s)				

	MONET	ARY POLITICAL CONT	S	SCHEDULE A1			
	The Instru	ction Guide explains how to co	mplete this forn	n.	1	Total pages Schedule A1: Sch: 3/30 Rpt: 7/69	
2	FILER NAME Sparks, Kevi	n D (The Honorable)			3	Filer ID (Ethics Commission 00085798	on Filers)
4	Date 10/31/2024	 5 Full name of contributor out-out-out-out-out-out-out-out-out-out-)	7	Amount of Contribution (\$)	\$1,500.00
_	B	Midland, TX 79702		5 1 (0 1 1 1			
8	Owner	pation / Job title (See Instructions)	9	Employer (See Instructions Statewide Minerals Co)		
	Date 10/28/2024	Full name of contributor out-out-out-out-out-out-out-out-out-out-)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Business Manager			Moriah Group			
	Date 10/28/2024	Full name of contributor out-o Burkes, Jonathan & Amy Contributor address; City; State; Zip	of-state PAC (ID#:)		Amount of Contribution (\$)	\$250.00
		Midland, TX 79707					
	Orthopedic S	pation / Job title (See Instructions) Surgeon		Employer (See Instructions Midland Memorial Hosp	-		
	Date 10/24/2024	Burkholder, John	of-state PAC (ID#:)		Amount of Contribution (\$)	\$250.00
	Principal occu President	pation / Job title (See Instructions)		Employer (See Instructions Burkholder Holdings)		
	Date 12/13/2024	Full name of contributor out-out-out-out-out-out-out-out-out-out-)		Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
			1				

	MONET	ARY POLITICAL CONTRIBUTIO	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 4/30 Rpt: 8/69	
2	FILER NAME Sparks, Kevi	n D (The Honorable)		3	Filer ID (Ethics Commission 00085798	on Filers)
4	Date 10/15/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$3,000.00
_	Dringing Loggy	San Ramon, CA 94583	2. Employer (See Instructions			
ð	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#: Chevron Phillips Chemical State PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,000.00
		The Woodlands, TX 77380				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/26/2024	Full name of contributor			Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Congress Ventures LLC Contributor address; City; State; Zip Code Austin, TX 78703			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 10/28/2024	Full name of contributor out-of-state PAC (ID#:_ Cowden, Linda (Ms.) Contributor address; City; State; Zip Code Midland, TX 79705)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	i)		

	MONET	ARY POLITICAL CO	S	SCHEDULE A1			
	The Instru	ction Guide explains how to	o complete this forr	n.	1	Total pages Schedule A1: Sch: 5/30 Rpt: 9/69	
2	FILER NAME Sparks, Kevi	in D (The Honorable)			3	Filer ID (Ethics Commission 00085798	on Filers)
4	Date 12/13/2024	Full name of contributor Cross Oak Group Contributor address; City; State	out-of-state PAC (ID#: e; Zip Code		7	Amount of Contribution (\$)	\$1,000.00
0	Dringing oggu	Austin, TX 78701 pation / Job title (See Instructions)	lo.	Employer (See Instructions			
0	Fillicipal occu	pation / Job title (See instructions)	9	Employer (See Instructions	')		
	Date 10/28/2024	Full name of contributor Crump, Lea & Melanie Contributor address; City; State)		Amount of Contribution (\$)	\$1,000.00
	Midland, TX 79705						
	Principal occu CEO	pation / Job title (See Instructions)		Employer (See Instructions BC Operating	5)		
	Date 10/31/2024	Full name of contributor Culp, Tim (Mr.) Contributor address; City; State)		Amount of Contribution (\$)	\$5,000.00
		Midland, TX 79705					
	Principal occu President	pation / Job title (See Instructions)		Employer (See Instructions Southwest Royalties Inc			
	Date 10/23/2024	Full name of contributor Cunneen, Seth & Carla Contributor address; City; State Midland, TX 79705	out-of-state PAC (ID#: e; Zip Code)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Manager	pation / Job title (See Instructions)		Employer (See Instructions Crown Quest)		
	Date 12/06/2024	Full name of contributor Davis, John Allen (Mr.) Contributor address; City; State Midland, TX 79701	out-of-state PAC (ID#:;)		Amount of Contribution (\$)	\$250.00
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions Davis Gerald Cremer	5)		
			'				

	MONET	ARY POLITICAL CONTRIBU	IS		SCHEDULE A1	
	The Instruc	ction Guide explains how to complete t	his for	m.	1	Total pages Schedule A1: Sch: 6/30 Rpt: 10/69
2	FILER NAME Sparks, Kevi	n D (The Honorable)			3	Filer ID (Ethics Commission Filers) 00085798
4	Date 12/13/2024	 Full name of contributor out-of-state PAC Delisi Communications PAC Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$) \$1,000.00
		Austin, TX 78701				
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	i)	
	Date 10/28/2024	Full name of contributor out-of-state PAC Donaldson, Briggs & Susannah Contributor address; City; State; Zip Code)		Amount of Contribution (\$) \$500.00
	Principal occu	Midland, TX 79710 pation / Job title (See Instructions)		Employer (See Instructions	<u>, </u>	
	Land Manag			Purvis Operating Co	')	
	Date 11/21/2024	Full name of contributor out-of-state PACDunn, Tim (Mr.) Contributor address; City; State; Zip Code	(ID#:)		Amount of Contribution (\$) \$25,000.00
		Midland, TX 79705				
	Principal occu CEO	pation / Job title (See Instructions)		Employer (See Instructions Crown Quest	5)	
	Date 11/26/2024	Full name of contributor out-of-state PAC Eli Lilly & Company PAC Contributor address; City; State; Zip Code Austin, TX 78701)		Amount of Contribution (\$) \$1,500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)	
	Date 11/26/2024	Full name of contributor out-of-state PACE out-o	C (ID#:			Amount of Contribution (\$) \$2,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	()	
			1			

	MONET	ARY POLITICAL CONTRIBUTI	SCHEDULE A1			
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 7/30 Rpt: 11/69	
2	FILER NAME Sparks, Kevi	n D (The Honorable)		3	Filer ID (Ethics Commission 00085798	on Filers)
4	Date 11/26/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$1,500.00
8	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u> 		
		,	, , , , , , , , , , , , , , , , , , , ,	_		
	Date 10/28/2024	Full name of contributor uut-of-state PAC (ID# Exxon Mobil PAC Contributor address; City; State; Zip Code	#:) 		Amount of Contribution (\$)	\$1,000.00
		Irving, TX 75039				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#Foley & Lardner LLP Contributor address; City; State; Zip Code	<u>*</u>		Amount of Contribution (\$)	\$1,500.00
		Dallas, TX 75201				
	Principal occu	oation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID) Friends of the University PAC Contributor address; City; State; Zip Code Austin, TX 78763	#:)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	oation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/21/2024	Full name of contributor out-of-state PAC (ID# Gin PAC Contributor address; City; State; Zip Code Round Rock, TX 78664	#:)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
			-			

	MONET	ARY POLITICAL (NS	SCHEDULE A1			
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 8/30 Rpt: 12/69	
2	FILER NAME Sparks, Kevi	n D (The Honorable)			3	Filer ID (Ethics Commission 00085798	on Filers)
4	Date 12/12/2024	5 Full name of contributorHS Law PAC6 Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code	_	7	Amount of Contribution (\$)	\$1,000.00
_		Austin, TX 78701	, 1		Ĺ		
8	Principal occu	pation / Job title (See Instructions	i)	9 Employer (See Instructions	5)		
	Date 11/26/2024	Full name of contributor Halliburton Company PAC Contributor address; City; Si)	•	Amount of Contribution (\$)	\$1,000.00
	Principal occu	Houston, TX 77072 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Dete	Full name of contributor				Account of Octobrillo time (D)	
	Date 10/28/2024	Harrison, Cole (Mr.) Contributor address; City; Si	out-of-state PAC (ID#:_ ate; Zip Code		•	Amount of Contribution (\$)	\$500.00
	Principal occu	Midland, TX 79705 pation / Job title (See Instructions) 1	Employer (See Instructions	<u> </u>		
	Owner	(,	Fiesta Energy	,		
	Date 10/15/2024	Full name of contributor Health Care Service Corp Contributor address; City; St Austin, TX 78701)		Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 10/28/2024	Full name of contributor Henderson, Pat (Ms.) Contributor address; City; Si Midland, TX 79707	out-of-state PAC (ID#:_		•	Amount of Contribution (\$)	\$500.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	5)		

	MONET	ARY POLITICAL C	ONTRIBUTIO	N	S		SCHEDULE A	A1
	The Instru	ction Guide explains how	to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 9/30 Rpt: 13/69	
2	FILER NAME Sparks, Kevi	n D (The Honorable)				3	Filer ID (Ethics Commission File 00085798	ers)
4	Date 10/28/2024	5 Full name of contributor Holmes, William (Mr.)6 Contributor address; City; St	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$) \$25,	000.00
•	Dringing Loon	Midland, TX 79702	, T	_	Employer (Con Instructions	<u></u>		
8	Oil & Gas	pation / Job title (See Instructions)	9	Employer (See Instructions Self	5)		
	Date 12/12/2024	Full name of contributor HomePAC of Texas Contributor address; City; St)		Amount of Contribution (\$) \$1,	000.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)		Employer (See Instructions	 s)		
	Date 10/28/2024	Full name of contributor Hord, Dan (Mr.) Contributor address; City; St Midland, TX 79702	out-of-state PAC (ID#:_)		Amount of Contribution (\$) \$5,	000.00
	Principal occu Partner	pation / Job title (See Instructions)		Employer (See Instructions Hedluc Investments	<u>l</u> s)		
	Date 10/28/2024	Full name of contributor Huge, Kenneth (Mr.) Contributor address; City; St Midland, TX 79707					Amount of Contribution (\$) \$	400.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)		
	Date 10/28/2024	Full name of contributor Johnson, Bert & Anne Contributor address; City; St Midland, TX 79705	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	500.00
	Principal occu President	pation / Job title (See Instructions			Employer (See Instructions Johnson Ranch & Interes			
			-					

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDULE A1	1		
	The Instruc	ction Guide explains how to complete this f	orı	m.	1	Total pages Schedule A1: Sch: 10/30 Rpt: 14/69	=
2	FILER NAME Sparks, Kevi	in D (The Honorable)			3	Filer ID (Ethics Commission Filers) 00085798	
4	Date 12/11/2024	 Full name of contributor out-of-state PAC (ID#:_ Johnson, Dennis Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$) \$5,000.00)
		Midland, TX 79701					
8	Principal occu CRO	pation / Job title (See Instructions)	9	Employer (See Instructions Summit Petroleum	5)		
	Date 10/28/2024	Full name of contributor out-of-state PAC (ID#:_ Johnson, Matthew & Kristina Contributor address; City; State; Zip Code)		Amount of Contribution (\$) \$1,000.00)
	Dringing age	Midland, TX 79705 pation / Job title (See Instructions)	_	Employer (Coo Instructions	<u></u>		_
	Architectural			Employer (See Instructions Cosee Home	·)		
	Date 12/14/2024	Full name of contributor)		Amount of Contribution (\$) \$1,500.00)
		Austin, TX 78760					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 10/28/2024	Full name of contributor out-of-state PAC (ID#:_ Marecle, Eric & Heather Contributor address; City; State; Zip Code Midland, TX 79705				Amount of Contribution (\$) \$500.00)
	Principal occu Vice Preside	pation / Job title (See Instructions) ent		Employer (See Instructions Discovery Operating	5)		_
	Date 10/28/2024	Full name of contributor out-of-state PAC (ID#:_ Mayne, Taylor & Jeannie Contributor address; City; State; Zip Code Midland, TX 79702)		Amount of Contribution (\$) \$500.00)
	Principal occu Oil & Gas	pation / Job title (See Instructions)		Employer (See Instructions Mayne & Mertz Inc	5)		
			<u> </u>				_

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 11/30 Rpt: 15/69		
2	FILER NAME Sparks, Kev	in D (The Honorable)		3	Filer ID (Ethics Commission 00085798	on Filers)	
4	Date 12/14/2024	Full name of contributor)	7	Amount of Contribution (\$)	\$1,000.00	
•	Dringing! goog	Richmond, VA 23219	0 Employer (See Instructions				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions)) 			
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Monk Casey PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00	
	Principal occu	Austin, TX 78701 spation / Job title (See Instructions)	Employer (See Instructions)			
	Date 10/28/2024	Full name of contributor out-of-state PAC (ID#:_ Musselman, Henry (Mr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00	
	Principal occu	Midland, TX 79702 upation / Job title (See Instructions)	Employer (See Instructions)			
	Vice Preside	ent	Compass Oil & Gas				
	Date 10/25/2024	Full name of contributor out-of-state PAC (ID#:_Myer, Gaines Contributor address; City; State; Zip Code Midland, TX 79707)		Amount of Contribution (\$)	\$2,500.00	
	Principal occu Director of P	pation / Job title (See Instructions) Production	Employer (See Instructions Diamondback Energy)			
	Date 12/10/2024	Full name of contributor out-of-state PAC (ID#:_NACDS PAC Contributor address; City; State; Zip Code Arlington, VA 22209			Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
			ı				

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 12/30 Rpt: 16/69	
2	FILER NAME Sparks, Kevi	n D (The Honorable)		3	Filer ID (Ethics Commission 00085798	on Filers)
4	Date 11/26/2024	 Full name of contributor out-of-state PAC (ID#: NRG Energy PAC Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$2,500.00
0	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	9 Employer (See Instructions	., 		
0	Fillicipal occu	oation / Job title (See Instituctions)	3 Employer (See instructions	»)		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#: ONCOR Texas PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5,000.00
		Dallas, TX 75202	,			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 09/09/2024	Full name of contributor out-of-state PAC (ID#: ONEOK Employee PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 12/06/2024	Full name of contributor out-of-state PAC (ID#: ONEOK Employee PAC Contributor address; City; State; Zip Code Tulsa, OK 74102)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 10/15/2024	Full name of contributor out-of-state PAC (ID#: Occidental Petroleum Corporation PAC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
			1			

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 13/30 Rpt: 17/69		
2	FILER NAME Sparks, Kevi	in D (The Honorable)		3	Filer ID (Ethics Commission 00085798	on Filers)	
4	Date 12/14/2024	 Full name of contributor out-of-state PAC (ID#:_ One Gas Inc PAC Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$750.00	
_		Tulsa, OK 74103					
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)			
	Date 12/06/2024	Full name of contributor out-of-state PAC (ID#:_Panhandle Producers & Royalty Owners Associ Contributor address; City; State; Zip Code Amarillo, TX 79106			Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#:_ PharmPAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,000.00	
	Principal occu	Austin, TX 78757 pation / Job title (See Instructions)	Employer (See Instructions)			
		,	, , , , , , , , , , , , , , , , , , , ,	,			
	Date 09/16/2024	Full name of contributor out-of-state PAC (ID#:_ Phillips 66 PAC Contributor address; City; State; Zip Code Baton Rouge, LA 70879			Amount of Contribution (\$)	\$2,500.66	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 11/21/2024	Full name of contributor out-of-state PAC (ID#:_ Phillips, Bart (Mr.) Contributor address; City; State; Zip Code Fort Worth, TX 76132			Amount of Contribution (\$)	\$500.00	
	Principal occu Oil & Gas	pation / Job title (See Instructions)	Employer (See Instructions Self)			

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDUL	E A1		
	The Instruc	ction Guide explains how to complete this f	or	m.	1	Total pages Schedule A1: Sch: 14/30 Rpt: 18/69	
2	FILER NAME Sparks, Kevi	n D (The Honorable)			3	Filer ID (Ethics Commission 00085798	n Filers)
4	Date 10/28/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$1,000.00
8	Principal occu	The Hills, TX 78738 pation / Job title (See Instructions)	9	Employer (See Instructions	<u> </u>		
•	Retired			Retired	,		
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#:_Poinsett PLLC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78701					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 11/26/2024	Full name of contributor out-of-state PAC (ID#:_ Provider Coalition for Care PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,000.00
		Georgetown, TX 78633					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Date 10/28/2024	Full name of contributor out-of-state PAC (ID#:_Purvis, J. & Mitzi (Mr.) Contributor address; City; State; Zip Code Midland, TX 79702)		Amount of Contribution (\$)	\$2,000.00
	Principal occu Investor	pation / Job title (See Instructions)		Employer (See Instructions Self	5)		
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#:_Quest Diagnostics Incorporated PAC Contributor address; City; State; Zip Code Secaucus, NJ 07094)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			1				

	MONET	ARY POLITICAL (IS	SCHEDULE A1				
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 15/30 Rpt: 19/69		
2	FILER NAME Sparks, Kevi	n D (The Honorable)			3	Filer ID (Ethics Commissi 00085798	on Filers)	
4	Date 12/12/2024	5 Full name of contributor Rathbone, Jack6 Contributor address; City; St	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$10,000.00	
		Midland, TX 79707			L			
8	Principal occu Co-Fouunde	pation / Job title (See Instructions r	9	Employer (See Instructions Mid-States Operating C		pany		
	Date 12/14/2024	Full name of contributor Red Rock Texas PAC Contributor address; City; Si	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$4,000.00	
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions	s)	Employer (See Instructions	 s)			
	Date 10/28/2024	Full name of contributor Reynolds, Jay (Mr.) Contributor address; City; St	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$1,000.00	
	Principal occu Energy Inves	pation / Job title (See Instructions	5)	Employer (See Instructions Rod Ric Drilling	<u>l</u> S)			
	Date 12/13/2024	Full name of contributor Robison, Douglass & Ang Contributor address; City; Si Abilene, TX 79605				Amount of Contribution (\$)	\$2,000.00	
	Principal occu President	pation / Job title (See Instructions	5)	Employer (See Instructions Natura Resources	5)			
	Date 11/26/2024	Full name of contributor Ryan LLC PAC Contributor address; City; St Dallas, TX 75240	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$2,500.00	
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	5)			
			<u> </u>					

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDULE /		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 16/30 Rpt: 20/69	
2	FILER NAME Sparks, Kevi	in D (The Honorable)		3	Filer ID (Ethics Commission 00085798	on Filers)
4	Date 12/13/2024	5 Full name of contributor out-of-state PAC (ID#:_ SCOPE 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$3,000.00
_	<u> </u>	Amarillo, TX 79101				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Scharbauer, Chris (Mr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,500.00
		Amarillo, TX 79118				
	Principal occu Rancher	pation / Job title (See Instructions)	Employer (See Instructions Scharbauer Ranch LLC	5)		
	Date 11/21/2024	Full name of contributor			Amount of Contribution (\$)	\$5,000.00
	Dringing agg	Midland, TX 79702	Employer (See Instructions	_		
	Investor	pation / Job title (See Instructions)	Employer (See Instructions Self	')		
	Date 11/26/2024	Full name of contributor out-of-state PAC (ID#:_Schauwecker, Mike (Mr.) Contributor address; City; State; Zip Code Fort Worth, TX 76102			Amount of Contribution (\$)	\$500.00
	Principal occu President	pation / Job title (See Instructions)	Employer (See Instructions Enertrade Inc	()		
	Date 10/28/2024	Full name of contributor out-of-state PAC (ID#:_ Shelton, Bob & Helen Contributor address; City; State; Zip Code Midland, TX 79705)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired)		

	MONET	ARY POLITICAL (CONTRIBUTIO	N	S		SCHEDULE A1
	The Instru	ction Guide explains hov	v to complete this fo	rn	n.	1	Total pages Schedule A1: Sch: 17/30 Rpt: 21/69
2	FILER NAME Sparks, Kevi	n D (The Honorable)				3	Filer ID (Ethics Commission Filers) 00085798
4	Date 10/28/2024	5 Full name of contributor Sipes, LD (Mr.)6 Contributor address; City; S	out-of-state PAC (ID#:)	7	Amount of Contribution (\$) \$300.00
_		Midland, TX 79702	,	_			
8	Retired	pation / Job title (See Instruction:	5)	9	Employer (See Instructions Retired	5)	
	Date 12/12/2024	Full name of contributor Sledgelaw Group PLLC Contributor address; City; S	out-of-state PAC (ID#:				Amount of Contribution (\$) \$2,500.00
	Principal occu	Austin, TX 78766 pation / Job title (See Instructions	5)		Employer (See Instructions	<u> </u> s)	
	· 	`			. , ,		
	Date 12/13/2024	Full name of contributor Sparks, Don & Gwyn Contributor address; City; S	out-of-state PAC (ID#:)		Amount of Contribution (\$) \$25,000.00
	Dringinal acqu	Midland, TX 79705 pation / Job title (See Instructions			Employer (See Instructions	·/	
	Founder	pation / 300 title (See instruction.	5)		Discovery Operating	•)	
	Date 10/31/2024	Full name of contributor Sparks, John B (Mr.) Contributor address; City; S Midland, TX 79707					Amount of Contribution (\$) \$1,000.00
	Principal occu Retired	pation / Job title (See Instruction:	5)		Employer (See Instructions Retired	5)	
	Date 10/28/2024	Full name of contributor Stallings, Kyle & Jamie Contributor address; City; S Midland, TX 79702	out-of-state PAC (ID#:)		Amount of Contribution (\$) \$25,000.00
	Principal occu Oil & Gas Inv	pation / Job title (See Instructions	5)		Employer (See Instructions Self	5)	
			1				

	MONET	ARY POLITICAL (SCHEDULE A1				
	The Instru	ction Guide explains how	to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 18/30 Rpt: 22/69	
2	FILER NAME Sparks, Kevi	n D (The Honorable)				3	Filer ID (Ethics Commission 00085798	on Filers)
4	Date 10/28/2024	5 Full name of contributor Stalllings, Todd & Connie6 Contributor address; City; Stallings)	7	Amount of Contribution (\$)	\$5,000.00
8	Dringinal occu	Midland, TX 79707 pation / Job title (See Instructions		<u> </u>	Employer (See Instructions	·/		
•	Geophysicist		5)	J	Self	•)		
	Date 12/06/2024	Full name of contributor Strategies 360 Texas LLC Contributor address; City; S					Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78701	,			Ĺ		
	Principal occu	pation / Job title (See Instructions	5)		Employer (See Instructions	5)		
	Date 12/06/2024	Full name of contributor Sween, Paul (Mr.) Contributor address; City; S	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$1,000.00
	Dringinal accu	Paradise Valley, AZ 8525 pation / Job title (See Instructions			Employer (See Instructions	·/		
		ging Partner	5)		Employer (See Instructions Dominium)		
	Date 12/14/2024	Full name of contributor TABA PAC Contributor address; City; S Leander, TX 78641					Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions	5)		Employer (See Instructions	<u>I</u> 5)		
	Date 12/14/2024	Full name of contributor TALAPAC Contributor address; City; S Austin, TX 78759	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions	5)		Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 19/30 Rpt: 23/69	
2	FILER NAME Sparks, Kevi	in D (The Honorable)		3	Filer ID (Ethics Commission 00085798	on Filers)
4	Date 12/12/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$1,000.00
8	Principal occu	Houston, TX 77002 pation / Job title (See Instructions)	9 Employer (See Instructions			
•	r incipal occu	pation / 300 title (See Instructions)	3 Employer (See Instructions)		
	Date 12/12/2024	Full name of contributor out-of-state PAC (ID#:_ TBA Bank PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions)		
		,	. , (
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ TREPAC - Texas Realtor PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5,000.00
		Austin, TX 78768				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/01/2024	Full name of contributor out-of-state PAC (ID#:_ TSA PAC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$3,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 07/25/2024	Full name of contributor out-of-state PAC (ID#:_ TSCPA PAC Contributor address; City; State; Zip Code Addison, TX 75001			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBU	SCHEDULE A1		
	The Instru	ction Guide explains how to complete	this form.	1 Total pages Schedule A1: Sch: 20/30 Rpt: 24/69	
2	FILER NAME Sparks, Kevi	n D (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085798	
4	Date 12/14/2024	 Full name of contributor out-of-state PA TSHP PAC Contributor address; City; State; Zip Code 		7 Amount of Contribution (\$) \$500.00	
_	Deinsinal	Round Rock, TX 78665	In Familiary (Oar Instruction		
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	
	Date 12/14/2024	Full name of contributor out-of-state PA TXTA TRUCK PAC Contributor address; City; State; Zip Code	AC (ID#:)	Amount of Contribution (\$) \$1,000.00	
	Principal occu	Austin, TX 75701 pation / Job title (See Instructions)	Employer (See Instructions)	
		,		,	
	Date 12/12/2024	Full name of contributor out-of-state PA Tech PAC Contributor address; City; State; Zip Code	AC (ID#:)	Amount of Contribution (\$) \$10,000.00	
	Principal occu	Lubbock, TX 79409 pation / Job title (See Instructions)	Employer (See Instructions)	
	Date 11/26/2024	Full name of contributor out-of-state PA Texans for Conservative Leadership PAC Contributor address; City; State; Zip Code Fort Worth, TX 76126		Amount of Contribution (\$) \$25,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	
	Date 10/15/2024	Full name of contributor out-of-state PA Texans for Lawsuit Reform PAC Contributor address; City; State; Zip Code Austin, TX 78701	AC (ID#:)	Amount of Contribution (\$) \$15,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A		
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 21/30 Rpt: 25/69		
2	FILER NAME Sparks, Kevin D (The Honorable)		3	Filer ID (Ethics Commission 00085798	on Filers)		
4	Date 12/13/2024			7	Amount of Contribution (\$)	\$15,000.00	
_		Austin, TX 78701		Ĺ			
8	8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions		s)				
	Date Full name of contributor out-of-state PAC (ID#:) 10/28/2024 Texas & Southwestern Cattle Raisers Association Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5,000.00		
Fort Worth, TX 76185 Principal occupation / Job title (See Instructions) Employer (See Instructions)							
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	S)			
	Date Full name of contributor out-of-state PAC (ID#:) 12/13/2024 Texas Aggregates & Concrete Association PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,500.00		
		Round Rock, TX 78681					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)			
	Date 10/11/2024	Full name of contributor out-of-state PAC (ID#: Texas Agricultural Co-op Council PAC Contributor address; City; State; Zip Code Round Rock, TX 78664			Amount of Contribution (\$)	\$1,500.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>I</u> s)			
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#: Texas Apartment Association PAC Contributor address; City; State; Zip Code Austin, TX 78701)		Amount of Contribution (\$)	\$3,500.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)			

	MONET	ARY POLITICAL CONTRIBUTIO	SCHEDULE A1			
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 22/30 Rpt: 26/69	
2	FILER NAME Sparks, Kevi	n D (The Honorable)		3	Filer ID (Ethics Commission 00085798	on Filers)
4	Date 11/26/2024			7	Amount of Contribution (\$)	\$1,500.00
_	Deinsinal assu	Austin, TX 78759	O Frankrija (Caa kastrustiana			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date Full name of contributor out-of-state PAC (ID#:) 10/15/2024 Texas Association of Health Plans PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,000.00	
	Austin, TX 78701 Principal occupation / Job title (See Instructions) Employer (See Instructions					
	r inicipal occu	pation / 300 title (See Instructions)	Employer (See instructions	')		
	Date Full name of contributor out-of-state PAC (ID#:) 10/01/2024 Texas Automobile Dealers Association PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,500.00	
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/28/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Building Branch AGC PAC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Texas College of Emergency Physicians PAC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1			
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 23/30 Rpt: 27/69	
2	FILER NAME Sparks, Kevi	in D (The Honorable)		3	Filer ID (Ethics Commission 00085798	on Filers)
4	Date 10/15/2024	Date 5 Full name of contributor out-of-state PAC (ID#:)		7	Amount of Contribution (\$)	\$1,000.00
_	Dein ein al. a ann	Austin, TX 78711	D. Farakara (Carakaratian			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date Full name of contributor out-of-state PAC (ID#:) 11/21/2024 Texas Dental Association PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00	
Austin, TX 78704 Principal occupation / Job title (See Instructions) Employer (See Instructions))				
	Date Full name of contributor out-of-state PAC (ID#:) 12/13/2024 Texas Food & Fuel Association PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,000.00	
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/21/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Medical Association PAC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/28/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Nurse PAC Contributor address; City; State; Zip Code Austin, TX 78759			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTIO	SCHEDULE A1			
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 24/30 Rpt: 28/69	
2	FILER NAME Sparks, Kevin D (The Honorable)			3	Filer ID (Ethics Commission 00085798	on Filers)
4	Date 10/28/2024			7	Amount of Contribution (\$)	\$2,500.00
_	5	Austin, TX 78735				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 12/12/2024 Texas Podiatric Medical Association PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00	
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Date Full name of contributor out-of-state PAC (ID#:) 10/28/2024 Texas Society of Architects Committee Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,500.00	
	Principal occu	Austin, TX 78702 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#:_ Texas State Association of Fire Fighters PAC Contributor address; City; State; Zip Code Austin, TX 78701)		Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#: Texas Statewide Telephone Cooperative Inc PAC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
		•				

	MONET	ARY POLITICAL CONTRIBU		SCHEDULE A1			
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 25/30 Rpt: 29/69		
2	FILER NAME Sparks, Kevin D (The Honorable)			3	Filer ID (Ethics Commission 00085798	on Filers)	
4	Date 12/13/2024			7	Amount of Contribution (\$)	\$1,000.00	
_	<u> </u>	Spring, TX 77386		<u> </u>			
8	8 Principal occupation / Job title (See Instructions)9 Employer (See Instructions)		S)				
	Date Full name of contributor out-of-state PAC (ID#:) 12/14/2024 Texas Trial Lawyers Association PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5,000.00		
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions	s)			
	Date 12/13/2024	Full name of contributor out-of-state PAC Textron PAC Contributor address; City; State; Zip Code Providence, RI 02903	C (ID#:)		Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)			
	Date 12/06/2024	Full name of contributor out-of-state PAC The American Electric Power Company Contributor address; City; State; Zip Code Austin, TX 78701	C (ID#:)		Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)			
	Date 10/28/2024	Full name of contributor out-of-state PAC The US Oncology Network PAC Contributor address; City; State; Zip Code The Woodlands, TX 77380	C (ID#:)		Amount of Contribution (\$)	\$1,500.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)			
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MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1			
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 26/30 Rpt: 30/69			
2	FILER NAME Sparks, Kevin D (The Honorable)		3	Filer ID (Ethics Commission 00085798	on Filers)			
4	Date 11/21/2024			7	Amount of Contribution (\$)	\$1,000.00		
8	Principal occu	Austin, TX 78701 pation / Job title (See Instructions	9	Employe	er (See Instructions	<u>;)</u>		
Ĭ	Advisor	panon, oos uno (cco mondonone		Butler S		-,		
	Date Full name of contributor out-of-state PAC (ID#:) 12/13/2024 Thomas, Georgia (Ms.) Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$3,000.00			
		Midland, TX 79705						
	Principal occupation / Job title (See Instructions) Retired Employer (See Instructions Retired		s)					
	Date Full name of contributor out-of-state PAC (ID#:) 10/31/2024 Tomlin, Don (Mr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5,000.00			
		Midland, TX 79705						
	Principal occu Owner	pation / Job title (See Instructions	;) 		er (See Instructions etroleum Corp	s)		
	Date 11/26/2024	Full name of contributor TxANA PAC Contributor address; City; St Austin, TX 78701	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions	5)	Employe	er (See Instructions	5)		
	Date 12/06/2024	Full name of contributor United Supermarkets PAC Contributor address; City; St					Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions	s)	Employe	er (See Instructions	5)		
			1					

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 27/30 Rpt: 31/69		
2	FILER NAME Sparks, Kevin D (The Honorable)			3	Filer ID (Ethics Commission 00085798	on Filers)	
4	Date 11/26/2024			7	Amount of Contribution (\$)	\$2,500.00	
_		San Antonio, TX 78269	,				
8	Principal occu	pation / Job title (See Instruction:	s)	9 Employer (See Instructions	s)		
	Date 12/14/2024				Amount of Contribution (\$)	\$500.00	
Austin, TX 78754 Principal occupation / Job title (See Instructions) Employer (See Instructions)			<u>s)</u>				
	i iliopai occa		5)	Employer (eee meadeding	٥,		
	Date Full name of contributor □ out-of-state PAC (ID#:			Amount of Contribution (\$)	\$500.00		
		Midland, TX 79706					
	Principal occu Physician	pation / Job title (See Instruction	s)	Employer (See Instructions Midland Surgical Assoc		es	
	Date 12/13/2024	Full name of contributor Vista Employee PAC Contributor address; City; S Irving, TX 75039				Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instruction:	s)	Employer (See Instructions	5)		
	Date 12/13/2024	Full name of contributor WALPAC Contributor address; City; S San Antonio, TX 78247	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instruction	s)	Employer (See Instructions	s)		

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1			
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 28/30 Rpt: 32/69			
2	Priler NAME Sparks, Kevin D (The Honorable)		3	Filer ID (Ethics Commission 00085798	on Filers)			
4	Date 09/29/2024			7	Amount of Contribution (\$)	\$250.00		
ρ	Principal occu	Midland, TX 79705 pation / Job title (See Instructions)	l _a	Employer (See Instructions				
	Associate Di			One Accord for Kids	,			
	Date Full name of contributor out-of-state PAC (ID#:) 12/06/2024 Ware, Richard Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00			
	Deire sin al acces	Amarillo, TX 79105		Faralaga (Openhantan)				
	Principal occupation / Job title (See Instructions) Banker Employer (See Instructions) Amarillo National Bank)					
	Date Full name of contributor out-of-state PAC (ID#:) 12/06/2024 Ware, William Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00			
		Amarillo, TX 79105	,					
	Principal occu Banker	pation / Job title (See Instructions)		Employer (See Instructions Amarillo National Bank)			
Date Full name of contributor out-of-state PAC (ID#:) 10/28/2024 Weekly, Richard (Mr.) Contributor address; City; State; Zip Code Houston, TX 77027			Amount of Contribution (\$)	\$5,000.00				
	Principal occu Real Estate	pation / Job title (See Instructions) Investments		Employer (See Instructions Weekly Development)			
	Date 12/12/2024	Full name of contributor West, Denzil Contributor address; City; State; Midland, TX 79707	out-of-state PAC (ID#:; Zip Code)		Amount of Contribution (\$)	\$500.00	
	Principal occu CEO	pation / Job title (See Instructions)		Employer (See Instructions Admiral Permian Resou		s		
			1					

MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1			
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 29/30 Rpt: 33/69		
2	FILER NAME Sparks, Kevin D (The Honorable)		3	Filer ID (Ethics Commission 00085798	on Filers)		
4	Date 10/28/2024			7	Amount of Contribution (\$)	\$1,000.00	
_	Deirectional	Midland, TX 79701	lo lo	Faralaga (Cara Instruction			
8	Engineer Ma	pation / Job title (See Instructions) nager		Employer (See Instructions Fasken Oil & Ranch)		
	Date Full name of contributor out-of-state PAC (ID#:) 10/28/2024 Wilkinson, Jack & Terry Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00		
	Midland, TX 79710 Principal occupation / Job title (See Instructions) Investor Employer (See Instructions) Self)				
	Date Full name of contributor out-of-state PAC (ID#:) 10/28/2024 Wilkinson, John & Mary Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00		
	Principal occu	Midland, TX 79707 pation / Job title (See Instructions)		Employer (See Instructions)		
	General Mar	nager /Senior Fellow		Honeywell / UOP			
	Date Full name of contributor out-of-state PAC (ID#:) 12/06/2024 Williams, Modesta (Ms.) Contributor address; City; State; Zip Code Midland, TX 79705			Amount of Contribution (\$)	\$5,000.00		
	Principal occu Oil & Gas / F	pation / Job title (See Instructions)		Employer (See Instructions Self)		
	Date 10/14/2024	Full name of contributor Wilson, Word Contributor address; City; State; Midland, TX 79702	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$2,500.00
	Principal occu Owner	pation / Job title (See Instructions)		Employer (See Instructions Word B Wilson Investme		5	
			·				

NET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1	
Instru	ction Guide explains how to complete this fo	1 Total pages Schedule A1: Sch: 30/30 Rpt: 34/69	
FILER NAME Sparks, Kevin D (The Honorable)			3 Filer ID (Ethics Commission Filers) 00085798
Date 12/12/2024 5 Full name of contributor out-of-state PAC (ID#:) Wind stream Holdings II PAC 6 Contributor address; City; State; Zip Code		7 Amount of Contribution (\$) \$1,000.00	
	Austin, TX 78701		
ipal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)
Date Full name of contributor out-of-state PAC (ID#:) 10/28/2024 Woerndle, Rudolph (Mr.) Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$300.00	
	Midland, TX 79701		
ipal occu ney	pation / Job title (See Instructions)	Employer (See Instructions Self	s)
	Instruction in the control of the co	Instruction Guide explains how to complete this for R NAME ks, Kevin D (The Honorable) 5 Full name of contributor out-of-state PAC (ID#:_ Wind stream Holdings II PAC 6 Contributor address; City; State; Zip Code Austin, TX 78701 pal occupation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Woerndle, Rudolph (Mr.) Contributor address; City; State; Zip Code Midland, TX 79701 pal occupation / Job title (See Instructions)	Instruction Guide explains how to complete this form. R NAME ks, Kevin D (The Honorable) 5 Full name of contributor out-of-state PAC (ID#:

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: 35/69 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Sparks, Kevin D (The Honorable) 00085798 \$ 0.00 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 10/21/2024 Purvis, Margaret (Ms.) \$200.00 Hosted an event at her 7 Contributor address; City; State; Zip Code home Midland, TX 79710 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) Energy Self 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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 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.	
1	Total pages Schedule F1: Sch: 1/33 Rpt: 36/69	2 FILER NAME Sparks, Kevin D (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085798
4	Date 07/05/2024	5 Payee name AT&T	
6	Amount (\$) \$163.95	7 Payee address; City; State; Zip Code 4400 Midland Dr Suite 600 Midland, TX 79707	
8	PURPOSE OF EXPENDITURE	Office Overficacin Expense	vel outside of Texas. Complete Schedule T. Istin, TX, officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Sparks, Kevin (Mr.)	Office held State Senator District 31
	Date 08/05/2024	Payee name AT&T	
	Amount (\$) \$164.16	Payee address; City; State; Zip Code 4400 Midland Dr Suite 600 Midland, TX 79707	
	PURPOSE OF EXPENDITURE	Office Overficad/Nertical Experise	vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense ense
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Sparks, Kevin (Mr.)	Office held State Senator District 31
	Date 09/05/2024	Payee name AT&T	
	Amount (\$) \$146.19	Payee address; City; State; Zip Code 4400 Midland Dr Suite 600 Midland, TX 79707	
	PURPOSE OF EXPENDITURE	Office Overficad/Nertial Experise	vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense ense
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Sparks, Kevin (Mr.)	Office held State Senator District 31

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to con	plete this form.
1 Total pages Schedule F1: Sch: 2/33 Rpt: 37/69	2 FILER NAME Sparks, Kevin D (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085798
4 Date		00003790
10/04/2024	5 Payee name AT&T	
6 Amount (\$) \$146.74	7 Payee address; City; State; Zip Cod 4400 Midland Dr Suite 600 Midland, TX 79707	de
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office Expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office soug H Sparks, Kevin (Mr.)	ht Office held State Senator District 31
Date 11/05/2024	Payee name AT&T	
Amount (\$) \$146.78	Payee address; City; State; Zip Cod 4400 Midland Dr Suite 600 Midland, TX 79707	de
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 Office Expense
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office soug H Sparks, Kevin (Mr.)	ht Office held State Senator District 31
Date 12/04/2024	Payee name AT&T	
Amount (\$) \$181.90	Payee address; City; State; Zip Cod 4400 Midland Dr Suite 600 Midland, TX 79707	le
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 Office Expense
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office soug H Sparks, Kevin (Mr.)	ht Office held State Senator District 31

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 comp	lete this form.
1	Total pages Schedule F1: Sch: 3/33 Rpt: 38/69	2 FILER NAME Sparks, Kevin D (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085798
4	Date 10/15/2024	5 Payee name Amarillo Chamber	
6	Amount (\$) \$150.00	7 Payee address; City; State; Zip Code 1000 S Polk S	
8	PURPOSE OF EXPENDITURE	Amarillo, TX 79101 (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 Fees
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Sparks, Kevin (Mr.)	Office held State Senator District 31
	Date 09/29/2024	Payee name Anedot Inc	
	Amount (\$) \$10.30	Payee address; City; State; Zip Code 1340 Poydras St Suite 1770 New Orleans, LA 70112	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fees
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Sparks, Kevin (Mr.)	Office held State Senator District 31
	Date 10/14/2024	Payee name Anedot Inc	
	Amount (\$) \$100.30	Payee address; City; State; Zip Code 1340 Poydras St Suite 1770 New Orleans, LA 70112	
	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 Fees
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Sparks, Kevin (Mr.)	Office held State Senator District 31

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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to con	-	te this form.
1	Total pages Schedule F1: Sch: 4/33 Rpt: 39/69	2 FILER NAME Sparks, Kevin D (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085798
4	Date 10/23/2024	5 Payee name Anedot Inc		
6	Amount (\$) \$40.30	7 Payee address; City; State; Zip Coo 1340 Poydras St Suite 1770 New Orleans, LA 70112	ek	
8	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 Fees
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office soug	jht	Office held State Senator District 31
	Date 10/24/2024	Payee name Anedot Inc		
	Amount (\$) \$10.30	Payee address; City; State; Zip Coo 1340 Poydras St Suite 1770 New Orleans, LA 70112	e et	
	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 Fees
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office soug	jht	Office held State Senator District 31
	Date 10/25/2024	Payee name Anedot Inc		
	Amount (\$) \$100.30	Payee address; City; State; Zip Coo 1340 Poydras St Suite 1770 New Orleans, LA 70112	ək	
	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 Fees
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office soug Sparks, Kevin (Mr.)	jht	Office held State Senator District 31

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form

		The instruction Guide explains now to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 5/33 Rpt: 40/69	Sparks, Kevin D (The Honorable)	00085798
4	Date	5 Payee name	
	12/06/2024	Anedot Inc	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$40.30	1340 Poydras St	
		Suite 1770	
		New Orleans, LA 70112	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	l outside of Texas. Complete Schedule T.
	EXPENDITURE	1 003	n, TX, officeholder living expense
		Fees	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	experiditure to beriefit C/O	Sparks, Kevin (Mr.)	State Senator District 31
	Date	Payee name	
	12/06/2024	Anedot Inc	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$40.30	1340 Poydras St	
		Suite 1770	
		New Orleans, LA 70112	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	Loutside of Tourse Complete Cohedule T
	EXPENDITURE	1 663	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense
		Fees	
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	Sparks, Kevin (Mr.)	State Senator District 31
	Date	Payee name	
	12/11/2024	Anedot Inc	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$200.30	1340 Poydras St	
		Suite 1770	
		New Orleans, LA 70112	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	Loutside of Tourse Complete Cohedule T
	EXPENDITURE	1 663	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense
		Fees	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	experiulture to benefit C/OI	Sparks, Kevin (Mr.)	State Senator District 31
_			

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

	Candidate/Officeholder/Politica Credit Card Payment	l Committee Legal Services Salaries/Wage The Instruction Guide explains how to comp	es/Contract Labor OTHER (enter a category not listed above) lete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 6/33 Rpt: 41/69	Sparks, Kevin D (The Honorable)	00085798
4	Date	5 Payee name	
	12/12/2024	Anedot Inc	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$20.30	1340 Poydras St	
		Suite 1770	
		New Orleans, LA 70112	
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.
			Check if Austin, TX, officeholder living expense Fees
			1 663
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	Sparks, Kevin (Mr.)	State Senator District 31
F	Date	Payee name	
	12/12/2024	Anedot Inc	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$400.30	1340 Poydras St	
		Suite 1770	
		New Orleans, LA 70112	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	Description
	OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
	EX. ENDITORE		Check if Austin, TX, officeholder living expense
			Fees
H	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·	State Senator District 31
F	Date	Payee name	
	12/13/2024	Anedot Inc	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$40.30	1340 Poydras St	
		Suite 1770	
		New Orleans, LA 70112	
H	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.
	EXPENDITURE		Check if Austin, TX, officeholder living expense
			Fees
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		State Senator District 31
\vdash			
I			

SCHEDULE F1

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

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

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	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: 7/33 Rpt: 42/69	Sparks, Kevin D (The Honorable) 00085798
4	Date	5 Payee name
	11/01/2024	Canva
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$87.00	200 E 6th Street
		Austin, TX 79701
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Printing
		1 mung
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
		Spairs, Nevill (Mr.)
	Date	Payee name
	12/09/2024	Canva
	Amount (\$)	Payee address; City; State; Zip Code
	\$335.00	200 E 6th Street
		Austin, TX 79701
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Printing
		Timung
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	10/30/2024	Cherry, Amelia
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,343.00	2606 Lockheed Dr
		Midland, TX 79701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
	ZAI ZIADITORZ	Check if Austin, TX, officeholder living expense
		Event Services
_	Occupation ONE VIII	Open Higher (Office health a group of the control o
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held Sparks Kovin (Mr.) State Senator District 21
	Onanara to bonom O/OI	Sparks, Kevin (Mr.) State Senator District 31

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 co	mplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 8/33 Rpt: 43/69	Sparks, Kevin D (The Honorable)	00085798
4 Date	5 Payee name	
09/23/2024	Chevron	
6 Amount (\$)	7 Payee address; City; State; Zip Co	de
\$14.00	3210 N Garfield St	
	Midland, TX 79705	
8 PURPOSE		(h) Description
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
		Travel
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	ght Office held
expenditure to benefit C/O		Since Held
Date	Payee name	
10/09/2024	Chevron	
Amount (\$)	Payee address; City; State; Zip Co	de
\$12.00	3210 N Garfield St	
	Midland, TX 79705	
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
		Travel
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght Office held
Date 12/17/2024	Payee name Chevron	
		do
Amount (\$) \$14.00	Payee address; City; State; Zip Co 3210 N Garfield St	ue
Ψ11.00		
	Midland, TX 79705	
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 Travel
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght Office held
expenditure to benefit C/O	1	

SCHEDULE F1

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

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

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:		3 Filer ID (Ethics Commission Filers)
	Sch: 9/33 Rpt: 44/69	Sparks, Kevin D (The Honorable)	00085798
4	Date 09/05/2024	5 Payee name City of Midland	
6	Amount (\$) \$34.00	7 Payee address; City; State; Zip Code 300 N Loraine	
		Midland, TX 79701	
8	PURPOSE OF EXPENDITURE	Office Overficacin Expense	vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense ense
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Sparks, Kevin (Mr.)	Office held State Senator District 31
	Date 10/09/2024	Payee name Crumbl Cookie	
	Amount (\$) \$58.78	Payee address; City; State; Zip Code 4400 N Midland Dr Ste 501 Midland, TX 79705	
	PURPOSE OF EXPENDITURE	1 000/Beverage Expense	vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense ENSE
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Sparks, Kevin (Mr.)	Office held State Senator District 31
	Date 11/12/2024	Payee name Cumberland Farms	
	Amount (\$) \$44.64	Payee address; City; State; Zip Code 2301 W SR-390	
		Lynn Haven, FL 32444	
	PURPOSE OF EXPENDITURE	1 000/Develage Expense	vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Sparks, Kevin (Mr.)	Office held State Senator District 31

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

	Credit Card Payment	The Instruction Guide explains how to cor	mple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 10/33 Rpt: 45/69	Sparks, Kevin D (The Honorable)		00085798
4	Date	5 Payee name		
	11/04/2024	Dallas, John		
6	Amount (\$)	7 Payee address; City; State; Zip Co	de	
	\$482.15	311 Hazeltine Dr		
		Lakeway, TX 78734		
8	PURPOSE OF	, , ,	(b)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Loan Repayment/Reimbursement		Check if Austin, TX, officeholder living expense
				Event Reimbursement
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght	Office held
	experialitate to benefit C/OI	1		
	Date	Payee name		
	10/22/2024	Dillards		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$38.97	4511 N Midkiff Rd		
		Midland, TX 79705		
	PURPOSE OF	, ,	(b)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Event Expense		Check if Austin, TX, officeholder living expense
				Event
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght	Office held
	experience to benefit ever	T Sparks, Kevin (Mr.)		State Senator District 31
	Date	Payee name		
	10/16/2024	Ector County Odessa		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$60.00	BO Box 14537		
		0.1		
		Odessa, TX 79768		
	PURPOSE OF	,	(b)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Fees		Check if Austin, TX, officeholder living expense
				Fees
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght	Office held
	S. portation to bottom 0/01	Sparks, Kevin (Mr.)		State Senator District 31

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: 11/33 Rpt: 46/69	2 FILER NAME Sparks, Kevin D (The Honorable) 3 Filer ID (Ethics Commission Filers) 00085798	
4	Date 12/02/2024	5 Payee name Fed Ex	
	Amount (\$) \$37.01	7 Payee address; City; State; Zip Code 4612 Billingsley Blvd Ste 40 Midland, TX 79705	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Printing	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held Sparks, Kevin (Mr.) State Senator District 31	_
	Date 12/10/2024	Payee name Fisher, Mattie	
	Amount (\$) \$78.44	Payee address; City; State; Zip Code 5401 E Parmer Ln Apt 217 Austin, TX 78754	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Reimbursement	
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
	Date 07/01/2024	Payee name Google	
	Amount (\$) \$79.01	Payee address; City; State; Zip Code 901 Cherry Ave	
		San Bruno, CA 94066	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Advertising	
	Complete ONLY if direct 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 Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 12/33 Rpt: 47/69	Sparks, Kevin D (The Honorable) 00085798
4	Date	5 Payee name
	08/01/2024	Google
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$79.01	901 Cherry Ave
		San Bruno, CA 94066
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Advertising
		i i i i i i i i i i i i i i i i i i i
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	09/03/2024	Google
	Amount (\$)	Payee address; City; State; Zip Code
	\$79.01	901 Cherry Ave
		San Bruno, CA 94066
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Advertising
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	10/01/2024	Google
	Amount (\$)	Payee address; City; State; Zip Code
	\$79.01	901 Cherry Ave
		San Bruno, CA 94066
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Advertising
		,g
	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 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

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

	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: 13/33 Rpt: 48/69	Sparks, Kevin D (The Honorable) 00085798
4	Date	5 Payee name
	11/01/2024	Google
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$79.01	901 Cherry Ave
		San Bruno, CA 94066
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Advertising
		Auvertising
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	12/02/2024	Google
L		-
	Amount (\$)	Payee address; City; State; Zip Code
	\$79.01	901 Cherry Ave
		San Bruno, CA 94066
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Advertising
		Auvertising
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
⊨	Data	Development
	Date 08/26/2024	Payee name HEB
L		
	Amount (\$)	Payee address; City; State; Zip Code
	\$9.58	3325 W Wadley Ave
		Midland, TX 79707
	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 Office Expense
		Office Expense
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
\vdash		State Senate. Slottlet St

SCHEDULE F1

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

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

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 compl	ete this form.			
1	Total pages Schedule F1:	2 FILER NAME		3	Filer ID	(Ethics Commission Filers)
	Sch: 14/33 Rpt: 49/69	Sparks, Kevin D (The Honorable)			00085798	
4	Date	5 Payee name		•		
	10/09/2024	HEB				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$168.99	3325 W Wadley Ave				
		Midland, TX 79705				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description			
	OF EXPENDITURE	Event Expense		el outs	side of Texas. Com	plete Schedule T.
	EXPENDITORE		—	in, TX	, officeholder living	g expense
			Event			
9	Complete ONLY if direct	Candidate/Officeholder name Office sought			Office h	old.
9	expenditure to benefit C/OI					enator District 31
_	Data					
	Date 10/22/2024	Payee name HEB				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$49.80	3325 W Wadley Ave				
		A				
		Midland, TX 79705				
	PURPOSE OF	,	Description		ide of Towns Occ	unlata Cabandula T
	EXPENDITURE	Event Expense	ш		side of Texas. Com I, officeholder living	
			Event Expe			,
	Complete ONLY if direct	Candidate/Officeholder name Office sought			Office h	eld
	expenditure to benefit C/OI	H Sparks, Kevin (Mr.)			State S	enator District 31
	Date	Payee name				
	09/12/2024	Hankins, Ken				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$4,381.44	804 Canonero Cir				
		Midland, TX 79705				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description			
	OF EXPENDITURE	Loan Repayment/Reimbursement		el outs	side of Texas. Com	plete Schedule T.
	EXPENDITORE		ш.		, officeholder living	g expense
			Reimburser	nent	l	
	Complete ONLY if alias -t	Condidate Office holder name			Office I	ald
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought			Office h	eiu

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to comp	es/Contract Labor OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 15/33 Rpt: 50/69	Sparks, Kevin D (The Honorable)	00085798
4	Date	5 Payee name	
	12/30/2024	High Plains REpublican Women	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$60.00	PO Box 19003	
	!		
		Amarillo, TX 79114	
8	PURPOSE OF	(con a magained matter than the per mine defined and) Description
	EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	!		Fees
	!		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	t Office held
	expenditure to benefit C/OF	^H Sparks, Kevin (Mr.)	State Senator District 31
Т	Date	Payee name	
	08/16/2024	MRT Media Group	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$39.97	201 E. Illinois	
	!		
		Midland, TX 79701	
	PURPOSE OF	(((((((((((((((((((() Description
	EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	!		Office Expense
	!		·
	Complete ONLY if direct	Candidate/Officeholder name Office sought	t Office held
	expenditure to benefit C/OF	^H Sparks, Kevin (Mr.)	State Senator District 31
	Date	Payee name	
	09/04/2024	MRT Media Group	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$16.00	201 E. Illinois	
	!		
	!	Midland, TX 79701	
	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 Office Expense
	!		Office Expense
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought	t Office held
	expenditure to benefit C/O		State Senator District 31
			-

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 con	nple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 16/33 Rpt: 51/69	Sparks, Kevin D (The Honorable)		00085798
4	Date	5 Payee name		
	10/02/2024	MRT Media Group		
6	Amount (\$)	7 Payee address; City; State; Zip Coo	de	
	\$16.00	201 E. Illinois		
		M. H I TV 70704		
Ļ		Midland, TX 79701		
8	PURPOSE OF	(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.
	EXPENDITURE	Office Overfleau/Refital Expense		Check if Austin, TX, officeholder living expense
				Office Expense
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug Sparks, Kevin (Mr.)	jht	Office held State Senator District 31
_	<u> </u>	·		State Schator District 31
	Date 10/30/2024	Payee name MRT Media Group		
_		·	10	
	Amount (\$) \$21.00	Payee address; City; State; Zip Coc 201 E. Illinois	ie.	
	Ψ21.00	201 L. IIII1013		
		Midland, TX 79701		
-	PURPOSE		(b)	Description
	OF EXPENDITURE	Office Overhead/Rental Expense	,	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	·		Check if Austin, TX, officeholder living expense
				Office Expense
_	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht	Office held
	expenditure to benefit C/OI			State Senator District 31
	Date	Payee name		
	11/27/2024	MRT Media Group		
	Amount (\$)	Payee address; City; State; Zip Coo	de	
	\$16.00	201 E. Illinois		
		Midland, TX 79701		
	PURPOSE OF	,	(b)	Description
	EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				Office Expense
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	ht	Office held
	experiulture to beliefft C/OI	T Sparks, Kevin (Mr.)		State Senator District 31

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Credit Card F ayment	The Instruction Guide explains how to complete this fo	rm.		
1	Total pages Schedule F1:	2 FILER NAME	3	Filer ID	(Ethics Commission Filers)
	Sch: 17/33 Rpt: 52/69	Sparks, Kevin D (The Honorable)		00085798	
4	Date	5 Payee name			
	10/08/2024	Moxley, Carter			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$108.24	1100 Congress Ave			
		Austin, TX 78701			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descript	tion		
	OF EXPENDITURE	Loan Repayment/Reimbursement		le of Texas. Comp	
	EXI ENDITORE	I — I —		officeholder living	expense
		Reimbu	ırsement		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought		Office he	ald.
9	expenditure to benefit C/OI			Office fie	iiu
	Data				
	Date	Payee name			
	07/18/2024	OHMS Cafe			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$144.16	619 S Tyler St			
		Amarillo, TX 79101			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)			
	EXPENDITURE	1 dod/beverage Expense		officeholder living	olete Schedule T. expense
		, <u> </u>	Expense	· ·	
	Complete ONLY if direct	Candidate/Officeholder name Office sought		Office he	eld
	expenditure to benefit C/OI	^H Sparks, Kevin (Mr.)		State Se	enator District 31
	Date	Payee name			
	10/08/2024	Parker, Shannon			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$418.00	620 S. Taylor St			
		Suite 203			
		Amarillo, TX 79119			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descript	tion		
	OF EXPENDITURE			le of Texas. Comp	plete Schedule T.
	EXPENDITURE			officeholder living	expense
		Reimbi	ursement		
	Operation ONE VIII II	On this to 10 ff a baldon name		Ot ;	1.4
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought		Office he	·Iα

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 Salaries (Contract Labor

	Credit Card Payment	The Instruction Guide explains how to co	Ŭ	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 18/33 Rpt: 53/69	Sparks, Kevin D (The Honorable)		00085798
4	Date	5 Payee name		
	12/24/2024	Parker, Shannon		
6	Amount (\$)	7 Payee address; City; State; Zip Co	ode	
	\$106.00	620 S. Taylor St		
		Suite 203		
		Amarillo, TX 79119		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Loan Repayment/Reimbursement		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense Reimbursement
				Trembarsement
9	Complete ONLY if direct	Candidate/Officeholder name Office sou	<u>l</u> ight	Office held
	expenditure to benefit C/OI		J	
F	Date	Payee name		
	07/08/2024	Paychex		
H	Amount (\$)	Payee address; City; State; Zip Co	ode	
	\$229.66	911 Panorama Tr South		
		Rochester, NY 14625		
	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.
	ZAI ZAISTONZ			Check if Austin, TX, officeholder living expense Payroll Expense
				rayron Expense
H	Complete ONLY if direct	Candidate/Officeholder name Office sou	<u>l</u> ight	Office held
	expenditure to benefit C/OI		J	State Senator District 31
H	Date	Payee name		
	08/12/2024	Paychex		
┢	Amount (\$)	Payee address; City; State; Zip Co	ode	
	\$19.19	911 Panorama Tr South		
		Rochester, NY 14625		
	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.
	LAFENDITORE			Check if Austin, TX, officeholder living expense
				Payroll Expense
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sou	laht	Office held
	expenditure to benefit C/OI		gut	State Senator District 31
\vdash		1 -7 - 7 /		

SCHEDULE F1

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

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

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 compl	ete this form.		
1	Total pages Schedule F1:	2 FILER NAME	3	Filer ID (Ethics Commission	Filers)
	Sch: 19/33 Rpt: 54/69	Sparks, Kevin D (The Honorable)		00085798	
4	Date	5 Payee name			
	08/14/2024	Paychex			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$600.27	911 Panorama Tr South			
		Rochester, NY 14625			
8	PURPOSE OF	l ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	Description		
	EXPENDITURE	Salaries/Wages/Contract Labor	<u> </u>	side of Texas. Complete Schedule T. (, officeholder living expense	
			Payroll Expense		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought		Office held	
	expenditure to benefit C/Ol	H Sparks, Kevin (Mr.)		State Senator District 31	
	Date	Payee name			
	08/14/2024	Paychex			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$120.91	911 Panorama Tr South			
		Rochester, NY 14625			
	PURPOSE OF	, , ,	Description		
	EXPENDITURE	Salaries/Wages/Contract Labor		side of Texas. Complete Schedule T. K, officeholder living expense	
			Payroll Taxes	,	
	Complete ONLY if direct	Candidate/Officeholder name Office sought		Office held	
	expenditure to benefit C/O	H Sparks, Kevin (Mr.)		State Senator District 31	
	Date	Payee name			
	08/15/2024	Paychex			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$74.73	911 Panorama Tr South			
_		Rochester, NY 14625			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description		
	OF EXPENDITURE	Salaries/Wages/Contract Labor		side of Texas. Complete Schedule T. (, officeholder living expense	
			Payroll Expense		
			, , ,		
	Complete ONLY if direct	Candidate/Officeholder name Office sought		Office held	
	expenditure to benefit C/O	^H Sparks, Kevin (Mr.)		State Senator District 31	
_					

SCHEDULE F1

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

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

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 comple	ete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3	Filer ID (Ethics Commission Filers)
	Sch: 20/33 Rpt: 55/69	Sparks, Kevin D (The Honorable)		00085798
4	Date	5 Payee name		
	08/29/2024	Paychex		
6	Amount (\$)	7 Payee address; City; State; Zip Code		
	\$600.90	911 Panorama Tr South		
		Rochester, NY 14625		
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b)	Description	
	EXPENDITURE	Salaries/Wages/Contract Labor	므	ide of Texas. Complete Schedule T. , officeholder living expense
			Payroll Expense	
			., .	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought		Office held
	expenditure to benefit C/OI			State Senator District 31
_	Date	Payee name		
	08/29/2024	Paychex		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$120.90	911 Panorama Tr South		
		Rochester, NY 14625		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description	
	OF EXPENDITURE	Salaries/Wages/Contract Labor	`	ide of Texas. Complete Schedule T.
	EXPENDITORE		ш	, officeholder living expense
			Payroll Taxes	
	Complete ONLY if direct	Candidate/Officeholder name Office sought		Office held
	expenditure to benefit C/OI			State Senator District 31
	Data	· · ·		
	Date 08/30/2024	Payee name Paychex		
		-		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$74.73	911 Panorama Tr South		
		Dochostor NIV 14605		
		Rochester, NY 14625		
	PURPOSE OF	, , ,	Description Check if travel outs	ide of Texas. Complete Schedule T.
	EXPENDITURE	Salaries/Wages/Contract Labor		, officeholder living expense
			Payroll Expense	
	Complete ONLY if direct	Candidate/Officeholder name Office sought		Office held
	expenditure to benefit C/OI	^H Sparks, Kevin (Mr.)		State Senator District 31
_				

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

	Credit Card Payment	The Instruction Guide explains how to co	mple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 21/33 Rpt: 56/69	Sparks, Kevin D (The Honorable)		00085798
4	Date	5 Payee name		<u>'</u>
	09/23/2024	Paychex		
6	Amount (\$)	7 Payee address; City; State; Zip Co	de	
	\$600.27	911 Panorama Tr South		
		Rochester, NY 14625		
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 Payroll Expense
				Taylon Expense
9	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held
	expenditure to benefit C/OI		J -	State Senator District 31
H	Date	Payee name		
	09/23/2024	Paychex		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$120.91	911 Panorama Tr South		
		Rochester, NY 14625		
	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.
	EXI ENDITORE			Check if Austin, TX, officeholder living expense Payroll Taxes
				rayion raxes
_	Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held
	expenditure to benefit C/OI		9	State Senator District 31
	Date	Payee name		
	09/24/2024	Paychex		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$149.35	911 Panorama Tr South		
		Rochester, NY 14625		
-	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.
	EXPENDITORE	-		Check if Austin, TX, officeholder living expense
				Payroll Expense
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sou	abt	Office held
	expenditure to benefit C/OI		ynı	State Senator District 31
				State Seriator District ST

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee
Credit Card Payment Event Expense Fees Food/Beverage Expense

Gift/Awards/Memorials Expense Legal Services

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

	Credit Card F dyment	The Instruction Guide explains how to com	plet	te this form.				
1	Total pages Schedule F1:	2 FILER NAME		3	Filer	ID	(Ethics Commission Filers)	_
	Sch: 22/33 Rpt: 57/69	Sparks, Kevin D (The Honorable)			0008	35798		
4	Date	5 Payee name		I				_
	09/27/2024	Paychex						
6	Amount (\$)	7 Payee address; City; State; Zip Code	е					_
	\$600.28	911 Panorama Tr South						
		Rochester, NY 14625						
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b)	Description				_
	OF	Salaries/Wages/Contract Labor	ĺ	Check if travel outs	de of T	exas. Com	plete Schedule T.	
	EXPENDITURE			Check if Austin, TX		older living	expense	
				Payroll Expense	!			
_	Opening CNII V if allowed	Overdidate (Office had described	1-4			Off: -	.1.1	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough Sparks, Kevin (Mr.)	nι			Office he State S	enator District 31	
						Jiaic 3	Enator District 31	_
	Date	Payee name						
	09/27/2024	Paychex						
	Amount (\$)	Payee address; City; State; Zip Code	е					
	\$120.90	911 Panorama Tr South						
		Rochester, NY 14625						
	PURPOSE OF	,	b)	Description				
	EXPENDITURE	Salaries/Wages/Contract Labor	ŀ	Check if travel outs Check if Austin, TX				
				Payroll Taxes	01110011	oldor living	Composition	
				•				
	Complete ONLY if direct	Candidate/Officeholder name Office sough	ht		(Office he	eld	_
	expenditure to benefit C/OI	[†] Sparks, Kevin (Mr.)			;	State S	enator District 31	
	Date	Payee name						_
	09/30/2024	Paychex						
	Amount (\$)	Payee address; City; State; Zip Code	e					_
	\$74.73	911 Panorama Tr South						
		Rochester, NY 14625						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b)	Description				_
	OF	Salaries/Wages/Contract Labor	`	Check if travel outs	de of T	exas. Com	plete Schedule T.	
	EXPENDITURE	, and the second	j	Check if Austin, TX		older living	expense	
				Payroll Expense	!			
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	ht			Office he		
	Emportante to benefit 0/01	Sparks, Kevin (Mr.)				state S	enator District 31	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete	te this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 23/33 Rpt: 58/69	Sparks, Kevin D (The Honorable)	00085798
4	Date	5 Payee name	•
	10/16/2024	Paychex	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$600.27	911 Panorama Tr South	
		Rochester, NY 14625	
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 Payroll
			a dyron
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
•	expenditure to benefit C/O		State Senator District 31
=	Date	Payee name	
	10/16/2024	Paychex	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$120.91	911 Panorama Tr South	
	,		
		Rochester, NY 14625	
	PURPOSE		Description
	OF	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Check if Austin, TX, officeholder living expense
		F	Payroll Taxes
	0 1: 01:14 7 7 7		
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought H Sparks, Kevin (Mr.)	Office held State Senator District 31
		Sparks, Reviir (Wir.)	State Seriator District 31
	Date	Payee name	
	10/17/2024	Paychex	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$168.54	911 Panorama Tr South	
		Rochester, NY 14625	
	PURPOSE OF		Description
	EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			Payroll
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	^H Sparks, Kevin (Mr.)	State Senator District 31
_			

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

	Credit Card Payment		The Instruction Guide explains how to c	ompl	ete this form.
1	Total pages Schedule F1:	2	FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 24/33 Rpt: 59/69		Sparks, Kevin D (The Honorable)		00085798
4	Date	5	Payee name		<u>'</u>
	10/30/2024		Paychex		
6	Amount (\$)	7	Payee address; City; State; Zip C	ode	
	\$600.28		911 Panorama Tr South		
			Rochester, NY 14625		
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.
	EXPENDITURE		-		Check if Austin, TX, officeholder living expense
					Payroll
9	Complete ONLY if direct	<u> </u>	Candidate/Officeholder name Office so	ught	Office held
9	expenditure to benefit C/OI		Sparks, Kevin (Mr.)	ugni	State Senator District 31
H	Data	_			
	Date 10/30/2024		Payehay		
		┞	Paychex		
	Amount (\$)		Payee address; City; State; Zip C	ode	
	\$139.50		911 Panorama Tr South		
		L	Rochester, NY 14625		
	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
					Payroll Taxes
	Complete ONLY if direct		Candidate/Officeholder name Office so	ught	Office held
	expenditure to benefit C/OI	Н :	Sparks, Kevin (Mr.)		State Senator District 31
	Date		Payee name		
	10/31/2024		Paychex		
	Amount (\$)		Payee address; City; State; Zip C	ode	
	\$87.86		911 Panorama Tr South		
			Rochester, NY 14625		
	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.
	LXI LINDITORE				Check if Austin, TX, officeholder living expense
					Payroll
L	Complete ONLY if direct	<u> </u>	Candidate/Officeholder name Office so	liabt	Office held
	expenditure to benefit C/OI		Sparks, Kevin (Mr.)	uynt	State Senator District 31
			Sparre, Reviii (mir)		State Seriator District SI

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Travel in D

	Credit Card Payment	The Instruction Guide explains how to comple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 25/33 Rpt: 60/69	Sparks, Kevin D (The Honorable)	00085798
4	Date	5 Payee name	·
	11/14/2024	Paychex	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$600.27	911 Panorama Tr South	
		Rochester, NY 14625	
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 Payroll
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		State Senator District 31
_	Date	Payee name	
	11/14/2024	Paychex	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$120.91	911 Panorama Tr South	
		Rochester, NY 14625	
	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.
	LAPENDITORE		Check if Austin, TX, officeholder living expense
			Payroll Taxes
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		State Senator District 31
	Data		
	Date 11/15/2024	Payee name Paychex	
	Amount (\$) \$74.73	Payee address; City; State; Zip Code 911 Panorama Tr South	
	Ψ14.10	3111 anorama 11 Coddi	
		Rochester, NY 14625	
	DUDDOCE		Providelia
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Overhead/Kental Expense	Check if Austin, TX, officeholder living expense
			Payroll
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	H Sparks, Kevin (Mr.)	State Senator District 31

SCHEDULE F1

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

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

Printing Expense Salaries/Wages/Contract Labor

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

The Instruction Guide	explains how to	complete this f	orm

EXPENDITURE CATEGORIES FOR BOX 8(a)

			ine instruction Guide explains now to co	ompi	ete this form.
1	Total pages Schedule F1:	2	FILER NAME		3 Filer ID (Ethics Commission Filers)
l	Sch: 26/33 Rpt: 61/69		Sparks, Kevin D (The Honorable)		00085798
4	Date	5	Payee name		·
	11/29/2024		Paychex		
6	Amount (\$)	7	Payee address; City; State; Zip Co	ode	
	\$600.27		911 Panorama Tr South		
			Rochester, NY 14625		
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description
	OF	` <i>`</i>	Office Overhead/Rental Expense	`´	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		·		Check if Austin, TX, officeholder living expense
					Payroll
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Officeholder name Office sou	ught	Office held
L			Sparks, Kevin (Mr.)		State Senator District 31
	Date		Payee name		
	11/29/2024		Paychex		
	Amount (\$)		Payee address; City; State; Zip Co	ode	
	\$120.91		911 Panorama Tr South		
			Rochester, NY 14625		
	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 Payroll Taxes
					Taylon Taxes
H	Complete ONLY if direct	<u> </u>	Candidate/Officeholder name Office sou	<u>l</u> uaht	Office held
	expenditure to benefit C/OI		Sparks, Kevin (Mr.)	3	State Senator District 31
H	Date		Payee name		
	11/29/2024		Paychex		
H	Amount (\$)	┝	Payee address; City; State; Zip Co	ode	
	Amount (\$) \$74.73		911 Panorama Tr South	oue	
	ψ1σ		off and and an obtain		
			Rochester, NY 14625		
L	DUDDOOF	(-)	·	4.3	
	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(a)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Salaties/Wages/Contract Labor		Check if Austin, TX, officeholder living expense
					Payroll
	Complete ONLY if direct		Candidate/Officeholder name Office sou	ught	Office held
	expenditure to benefit C/OI	٠,	Sparks, Kevin (Mr.)		State Senator District 31
Γ					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
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 Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this	s form.
1	Total pages Schedule F1: Sch: 27/33 Rpt: 62/69	2 FILER NAME Sparks, Kevin D (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085798
4	Date 12/13/2024	5 Payee name Paychex	•
6	Amount (\$) \$600.27	7 Payee address; City; State; Zip Code 911 Panorama Tr South	
8	PURPOSE OF EXPENDITURE		neck if travel outside of Texas. Complete Schedule T. neck if Austin, TX, officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Sparks, Kevin (Mr.)	Office held State Senator District 31
	Date 12/13/2024	Payee name Paychex	
	Amount (\$) \$120.01	Payee address; City; State; Zip Code 911 Panorama Tr South Rochester, NY 14625	
	PURPOSE OF EXPENDITURE	Salaries/Wages/Sofritaet Eabor	ription neck if travel outside of Texas. Complete Schedule T. neck if Austin, TX, officeholder living expense roll Taxes
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Sparks, Kevin (Mr.)	Office held State Senator District 31
	Date 12/16/2024	Payee name Paychex	
	Amount (\$) \$266.61	Payee address; City; State; Zip Code 911 Panorama Tr South	
		Rochester, NY 14625	
	PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	neck if travel outside of Texas. Complete Schedule T. neck if Austin, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Sparks, Kevin (Mr.)	Office held State Senator District 31

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - 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 Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee 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: 28/33 Rpt: 63/69 Sparks, Kevin D (The Honorable) 00085798 4 Date Payee name 12/31/2024 Paychex 6 Amount (\$) Payee address; City; State; Zip Code \$600.27 911 Panorama Tr South Rochester, NY 14625 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. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Payroll Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Sparks, Kevin (Mr.) State Senator District 31 Date Payee name 12/31/2024 Paychex Amount (\$) Payee address; City; State; Zip Code \$120.01 911 Panorama Tr South Rochester, NY 14625 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense **Payroll Taxes** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Sparks, Kevin (Mr.) State Senator District 31 Date Payee name 10/09/2024 Permian Basin of Midland Tx Amount (\$) Payee address: City; State; Zip Code \$304.99 208 S A St Midland, TX 79701 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Printing Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Advertising Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Sparks, Kevin (Mr.) State Senator District 31

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

1 Total pages Schedule F1: 2 FILER NAME Schr: 29/33 Rpt: 64/69 Sparks, Kevin D (The Honorable) 3 Filer ID (Ethics Commission Filers) 00085798 00085		Credit Card Payment	The Instruction Guide explains how to comple	ete this form.
Date	1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Phoebes Dine Phoebes Dine Phoebes Dine Payee address: City: State: Zip Code S48.17 Austin, TX 78701 Austin, TX 78701 Check it is available of Texas. Complete Schedule T. Check it is available of Texas. Complete Sc		Sch: 29/33 Rpt: 64/69	Sparks, Kevin D (The Honorable)	00085798
Samount (S)	4	Date		
\$48.17		09/17/2024	Phoebes Dine	
Austin, TX 78701 8 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Condition Circled if travel roadilet of Texas. Complete Schedule T. Condition Circled if travel roadilet of Texas. Complete Schedule T. Circled if Austin, TX, officeholder living expense 9 Complete ONLY if direct expenditure to benefit CiOH Candidate/Officeholder name Office sought Office held Sparks, Kevini (Mr.) State Senator District 31 Date Payee name Office Sought Office held Sparks, Kevini (Mr.) State; Zip Code 1220 Mockingbird Ln Dallas, TX 75247 PURPOSE Office Site of Texas Complete ONLY if direct expenditure to benefit CiOH Complete ONLY if direct expenditure to benefit CiOH Candidate/Officeholder name Office sought Office held Date Payee name Office sought Office held Servant Leadership Amount (6) Payee address; City; State; Zip Code 1/04/2024 Servant Leadership Amount (6) Payee address; City; State; Zip Code 2104 Decanna Ln Midland, TX 79707 PURPOSE Office held Complete ONLY if direct Candidate/Officeholder name Office sought Office held Complete ONLY if direct Candidate/Officeholder name Office hought Officeholder hiding expense Complete ONLY if direct Candidate/Officeholder name Office hought Officeholder hiding expense Complete ONLY if direct Candidate/Officeholder name Office hought Officeholder hiding expense Complete ONLY if direct Candidate/Officeholder name Office hought Officeholder hiding expense Complete ONLY if direct Candidate/Officeholder name Officeholder hiding expense Complete ONLY if direct Candidate/Officeholder name Officeholder hiding expense Complete ONLY if direct	6			
Purpose OF Expenditure to benefit C/OH Category (see Categories listed at the top of this schedule) (b) Description Check if Austin, TX, officeholder living expense Coffice Expense		\$48.17	408 W 11th St	
Purpose OF Expenditure to benefit C/OH Category (see Categories listed at the top of this schedule) (b) Description Check if Austin, TX, officeholder living expense Coffice Expense			A T.V 70704	
Complete ONLY if direct Complete Only if only in the top of this schedule	Ļ			
Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name of the sought of the schedule	8		· · · · · · · · · · · · · · · · · · ·	
9 Complete QNLY if direct expenditure to benefit C/OH Sparks, Kevin (Mr.) Date QT 929 Amount (\$) Payee name QT 929 Amount (\$) Payee address; City; State; Zip Code 1220 Mockingbird Ln Dallas, TX 75247 PURPOSE OF EXPENDITURE Candidate/Officeholder name Office sought (b) Description Check if Austin, TX, officeholder living expense Travel Date 1/04/2024 Payee address; City; State; Zip Code 1220 Mockingbird Ln Dallas, TX 75247 OF EXPENDITURE Candidate/Officeholder name Office sought Office held Date 1/104/2024 Payee name Servant Leadership Amount (\$) Payee address; City; State; Zip Code 2104 Decarna Ln Midland, TX 79707 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Check if Austin, TX, officeholder living expense Travel (b) Description Check if Austin, TX, officeholder Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Retreat Complete QNLY if direct Check if Austin, TX, officeholder Inving expense Retreat Complete QNLY if direct Check if Austin, TX, officeholder Inving expense Retreat Complete QNLY if direct Check if Austin, TX, officeholder Inving expense Retreat Complete QNLY if direct Check if Austin, TX, officeholder Inving expense Retreat Complete QNLY if direct Check if Austin, TX, officeholder Inving expense Retreat		EXPENDITURE	1 oou/beverage Expense	
Sparks, Kevin (Mr.) State Senator District 31				Office Expense
Sparks, Kevin (Mr.) State Senator District 31	_	Complete ONLY if direct	Candidate/Officeholder name Office cought	Office hold
Date 09/03/2024 Amount (\$) Payee address; City; State; Zip Code 1220 Mockingbird Ln Dallas, TX 75247 PURPOSE OF EXPENDITURE Candidate/Officeholder name Complete ONLY if direct expenditure to benefit C/OH Date 11/04/2024 Amount (\$) Payee name Servant Leadership Payee name Servant Leadership Payee name Servant Leadership Payee address; City; State; Zip Code Complete ONLY if direct expenditure to benefit C/OH Date 11/04/2024 Servant Leadership Amount (\$) Payee address; City; State; Zip Code 2104 Deeanna Ln Midland, TX 79707 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) City Code (b) Description City Code (c) Categories listed at the top of this schedule) City Code (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Retreat Complete ONLY if direct Candidate/Officeholder name Office sought Office held	9			
Date Payee address; City; State; Zip Code Sevent Leadership	\vdash	Date		
Amount (\$)				
\$26.95 1220 Mockingbird Ln Dallas, TX 75247 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule)		Amount (\$)	•	
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Check if travel outside of Texas. Complete Schedule T.				
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Check if travel outside of Texas. Complete Schedule T.				
OF EXPENDITURE Travel Out of District Check if Austin, TX, officeholder living expense Travel Office held Office held Date			Dallas, TX 75247	
Check if Austin, Tx, officeholder living expense			(a) Category (See Categories listed at the top of this schedule) (b)	`
Complete ONLY if direct expenditure to benefit C/OH Date Payee name 11/04/2024 Servant Leadership Amount (\$) Payee address; City; State; Zip Code \$2,000.00 \$104 Deeanna Ln Midland, TX 79707 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Event Expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held			Travel Out of District	
Date Payee name Servant Leadership Amount (\$) Payee address; City; State; Zip Code \$2,000.00 2104 Deeanna Ln Midland, TX 79707 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Check if Austin, TX, officeholder living expense Retreat Complete ONLY if direct Candidate/Officeholder name Office sought Office held				
Date Payee name Servant Leadership Amount (\$) Payee address; City; State; Zip Code \$2,000.00 2104 Deeanna Ln Midland, TX 79707 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Retreat Complete ONLY if direct Candidate/Officeholder name Office sought Office held				
Date 11/04/2024 Servant Leadership Amount (\$) Payee address; City; State; Zip Code \$2,000.00 \$2,000.00 Midland, TX 79707 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Event Expense Candidate/Officeholder name Candidate/Officeholder name Office sought Office held			9	Office held
Amount (\$) Payee address; City; State; Zip Code \$2,000.00 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Event Expense Candidate/Officeholder name Candidate/Officeholder name Office sought Office held		experiditure to benefit C/Oi	1	
Amount (\$) \$2,000.00 Payee address; City; State; Zip Code 2104 Deeanna Ln Midland, TX 79707 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Retreat Complete ONLY if direct Candidate/Officeholder name Office sought Office held				
\$2,000.00 Midland, TX 79707 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Retreat Complete ONLY if direct Candidate/Officeholder name Office sought Office held			·	
Midland, TX 79707 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Retreat Complete ONLY if direct Candidate/Officeholder name Office sought Office held				
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Retreat Complete ONLY if direct Candidate/Officeholder name Office sought Office held		Ψ2,000.00	210- Decama En	
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Retreat Complete ONLY if direct Candidate/Officeholder name Office sought Office held			Midland, TX 79707	
OF EXPENDITURE Event Expense Complete ONLY if direct Candidate/Officeholder name Complete ONLY if direct Complete ON		PURPOSE		Description
Complete ONLY if direct Candidate/Officeholder name Office sought Office held			,	Check if travel outside of Texas. Complete Schedule T.
Complete ONLY if direct		EXI ENDITORE		
averaged to the second to the COOL				
avaged it was to be public C/OLI		Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
			1	State Senator District 31

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	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: 30/33 Rpt: 65/69	Sparks, Kevin D (The Honorable)	00085798
4	Date	5 Payee name	
	10/22/2024	Staples	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$51.95	4509 Navarro Dr	
		Midland, TX 79707	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	outside of Toylor Complete Cabadula T
	EXPENDITURE	Event Expense	outside of Texas. Complete Schedule T. n, TX, officeholder living expense
		Event Expens	se
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	Sparks, Kevin (Mr.)	State Senator District 31
	Date	Payee name	
	12/10/2024	Staples	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$33.55	4509 Navarro Dr	
		Midland, TX 79707	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel.	outside of Texas. Complete Schedule T.
	EXPENDITURE	1 miling Expense	n, TX, officeholder living expense
		Printing	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	experience to benefit Gree	Sparks, Kevin (Mr.)	State Senator District 31
	Date	Payee name	
	09/20/2024	Starbucks	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$20.00	2401 Utah Ave S	
		Ste 800	
	DIES CO	Seattle, WA 98134	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel	outside of Texas. Complete Schedule T.
	EXPENDITURE	1 000/Develage Expense	n, TX, officeholder living expense
		Office Expens	se
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	experientare to benefit 6/01	Sparks, Kevin (Mr.)	State Senator District 31

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

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 Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to comp	lete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 31/33 Rpt: 66/69	Sparks, Kevin D (The Honorable)	00085798
4	Date	5 Payee name	'
	12/06/2024	Texas Farm Bureau	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$46.50	7420 Fish Pond Rd	
		Waco, TX 76710	
8	PURPOSE		Description
	OF	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Check if Austin, TX, officeholder living expense
			Overhead
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	
	experience to borione Gro	Sparks, Kevin (Mr.)	State Senator District 31
	Date	Payee name	
	10/04/2024	Texas Senate	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$44.50	1100 Congress Ave	
		Austin, TX 78701	
	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 Gifts
_	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		State Senator District 31
_	Date		
	10/04/2024	Payee name Texas Senate	
	Amount (\$) \$25.00	Payee address; City; State; Zip Code	
	Φ25.00	1100 Congress Ave	
		Ati- TV 70704	
		Austin, TX 78701	
	PURPOSE OF	,	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Gift/Awards/Memorials Expense	Check if Austin, TX, officeholder living expense
			Gifts
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	¹ Sparks, Kevin (Mr.)	State Senator District 31

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1: Sch: 32/33 Rpt: 67/69	2 FILER NAME Sparks, Kevin D (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085798
4	Date 10/09/2024	5 Payee name USPS PO	
6	Amount (\$) \$292.00	7 Payee address; City; State; Zip Code 3304 W Wadley Ave	
8	PURPOSE OF EXPENDITURE	Event Expense	outside of Texas. Complete Schedule T. , TX, officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Sparks, Kevin (Mr.)	Office held State Senator District 31
	Date 11/12/2024	Payee name Uber	
	Amount (\$) \$73.08	Payee address; City; State; Zip Code 1455 Market St. Ste 400 San Francisco, CA 94103	
	PURPOSE OF EXPENDITURE	Traver out of District	outside of Texas. Complete Schedule T. , TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date 11/13/2024	Payee name Uber	
	Amount (\$) \$32.16	Payee address; City; State; Zip Code 1455 Market St. Ste 400	
		San Francisco, CA 94103	
	PURPOSE OF EXPENDITURE	Traver out or District	outside of Texas. Complete Schedule T. , TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/O	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
Credit Card Payment

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

	Credit Card F ayment	The Instruction Guide explains how to com	nple	te this form.			
1	Total pages Schedule F1:	2 FILER NAME		3	3	Filer ID	(Ethics Commission Filers)
	Sch: 33/33 Rpt: 68/69	Sparks, Kevin D (The Honorable)				00085798	
4	Date	5 Payee name		L			
	11/14/2024	Uber					
6	Amount (\$)	7 Payee address; City; State; Zip Cod	de				
	\$43.93	1455 Market St. Ste 400					
		San Francisco, CA 94103					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description			
	OF	Travel Out of District	. ,	Check if travel ou	tsid	le of Texas. Com	plete Schedule T.
	EXPENDITURE			Check if Austin, T	Χ,	officeholder living	expense
				Travel			
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	jht			Office he	eld
	experioration benefit C/O	1					
	Date	Payee name					
	10/21/2024	WB Liquors					
	Amount (\$)	Payee address; City; State; Zip Cod	de				
	\$857.61	4706 N Midkiff Rd					
		Midland, TX 79705					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description			
	OF	Event Expense	()	Check if travel ou	tsid	le of Texas. Com	plete Schedule T.
	EXPENDITURE			Check if Austin, T	Χ,	officeholder living	expense
				Advertising			
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	jht			Office he	
	experience to benefit Gree	¹ Sparks, Kevin (Mr.)				State S	enator District 31
	Date	Payee name					
	10/29/2024	Wilson, Willie					
	Amount (\$)	Payee address; City; State; Zip Cod	de				
	\$2,004.93	1610 Maple Ave					
		Midland, TX 79705					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description			
	OF EXPENDITURE	Event Expense		Check if travel ou			
	EXPENDITORE			Check if Austin, T		officeholder living	expense
				Event Services	5		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	jht			Office he	
	Superiord to benefit 0/01	¹ Sparks, Kevin (Mr.)				State S	enator District 31

SCHEDULE |

	The Instruction Guide explains how to complete this form.							
1 Total pages Schedule I: 2 FILER NAME Sch: 1/1 Rpt: Sparks, Kevin D (The Honorable)					3	Filer ID 00085798	(Ethics Commission Filers)	
1	Date 09/16/2024	5	Payee name Nonprofit Management Center					
6	Amount (\$) 1,500.00	7	Payee Address; City; State; Zip 3500 N A St Unit 2300 Midland, TX 79705					
В	PURPOSE OF EXPENDITURE	(a	Category (See instructions for examples of acceptable categories) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description Sponsor	(See	e instructions regard	ling type of information required.)	
	Date 12/24/2024	İ	Payee name Spaw Senate Account					
	Amount (\$) 100.00		Payee Address; City; State; Zip 1100 Congress Ave Austin, TX 78701					
	PURPOSE OF EXPENDITURE	(a	Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense	(b) Description Donation	(See	e instructions regard	ling type of information required.)	