CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to complete thi	s form.		2 Total pages filed 14	•
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR FIRS Darri		MI	OFFICE US	E ONLY
	NICKNAME LAST Malle		SUFFIX		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUIT PO Box 1202	E#; CITY;	ZIP CODE	Date Hand-delivered or Da Receipt#	ate Postmarked Amount
Change of Address	Kilgore, TX 75663	Date Processed	4		
GANCOLOUS CONTRACTOR C				Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRS	T tricia	MI Jean	dan dakuntan sangan sempakkan mengan cam	
	NICKNAME LAST		SUFFIX		
AAA MACAAANII, MACAA	Fin	cher			
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX F 302 Laurel St. Kilgore, TX 75662	PLEASE); APT	/SUITE#; CITY;	STATE	E; ZIP CODE
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUM	MBER EXTENSION			
8 REPORT TYPE		day before election	Runoff Exceeded modified reporting limit	15th day after camp appointment (officeh Final Report (Attach	older only)
9 PERIOD COVERED	Month Day Year 02/14/2025	THROUGH	Month Day 03/24/2025	Year 5	
10 ELECTION	ELECTION DATE Month Day Year 05/03/2025	Primary X General	ELECTION TYPE Runoff Special	Other	
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (Kilgore Mayor	(if known)	
		GO TO PAGE 2	Service (1997)		

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

				2 of 14
13 C / OH NAME	Mallett, Darrin	14 F	iler ID	
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditures r These expenditures may have been made without the color officeholders are required to report this information only	andidate's or officeholder's kn	owledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
L_3	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRESS		
16 CONTRIBUTION TOTALS	EDGES, LOANS, ONICALLY) \$	0.00		
	\$	4,950.00		
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITIC	AL EXPENDITURES	\$	2,883.11
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LAST RIOD	DAY OF THE \$	2,166.89
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS OF TING PERIOD	THE LAST DAY \$	100.00
17 AFFIDAVIT				
	Martha DePa Notary ID # 1083: My Commission E: 05/20/2028	2673 prires A A A A A A A A A A A A A A A A A A A		
AFFIX NO	TARY STAMP / SEAL AB		i	
Sworn to and subs	cribed before me, by the s	aid Darrin Mallett, ertify which, witness my hand and seal of office.	this the 3rd	day
Signature of office	a Duca Coccer administering	Martha Detarpe Printed name of officer administering	Title of officer administer	ng oath

SUBTOTALS - CIOH

FORM C/OH COVER SHEET PG 3

				JUVER 3	3 of 14
	LER NAI allett, D	.	19 Filer ID		
		E SUBTOTALS SCHEDULE	•	SUBT	OTAL AMOUNT
1.	\boxtimes	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	,	\$	4,950.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	X	SCHEDULE E: LOANS		\$	100.00
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	2,883.11	
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	\$	
1:	L. 🔲	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
12	2.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$	
				•	

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 1/6 Rpt: 4/14 Filer ID FILER NAME Mallett, Darrin Date 5 Full name of contributor out-of-state PAC (ID#; 7 Amount of Contribution (\$) \$50,00 03/11/2025 Abram, Bonnie 6 Contributor address; City; State; Zip Code 2764 Danville Rd. Kilgore, TX 75662 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$50,00 03/10/2025 Baker, Jeff Contributor address; City; State; Zip Code 383 Greenwood St. Kilgore, TX 75662 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: \$20.00 03/12/2025 Billings, Brent Contributor address; City; State; Zip Code 6843 Peter Bonner Rd. Hallsville, TX 75650 Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#; Date 03/10/2025 \$125.00 Carroll, Bruce Contributor address; City; State; Zip Code SG19 Lake Cherokee Henderson, TX 75652 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date Cheek, Jeffrey 03/02/2025 \$250.00 Contributor address; City; State; Zip Code 5923 Kingston Pike Knoxville, TN 37919 Principal occupation / Job title (See Instructions) Employer (See Instructions)

MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	e A1
The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 2/6 Rpt: 5/14	
2 FILER NAME Mallett, Darri	in		3	Filer ID	
4 Date 03/12/2025	 5 Full name of contributor out-of-state PAC (ID#:_ETX Comfort Solutions 6 Contributor address; City; State; Zip Code 2807 Crestwood Ln. Kilgore, TX 75662 		7	Amount of Contribution (\$)	\$500.00
8 Principal occu	pation / Job title (See Instructions))			
Date 03/10/2025	Full name of contributor out-of-state PAC (ID#:_ Edmonson, Marja Contributor address; City; State; Zip Code 2031 CR 188 Kilgore, TX 75662			Amount of Contribution (\$)	\$50.00
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
Date 03/10/2025	Full name of contributor out-of-state PAC (ID#:_ Gee, Jill Contributor address; City; State; Zip Code 500 Woodway Kilgore, TX 75662			Amount of Contribution (\$)	\$50.00
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
Date 03/10/2025	Full name of contributor out-of-state PAC (ID#: Harber, Brooks Contributor address; City; State; Zip Code 11271 Highway 80 W Hallsville, TX 75650			Amount of Contribution (\$)	\$50.00
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	, , , , , , , , , , , , , , , , , , ,	
Date 03/01/2025	Full name of contributor out-of-state PAC (ID#:_ Hay, David Contributor address; City; State; Zip Code 2629 Goldbug Ave. Sullivans Island, SC 29482			Amount of Contribution (\$)	\$100.00
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		
			····		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fe	orm.	1	Total pages Schedule A1: Sch: 3/6 Rpt: 6/14	
ĺ	FILER NAME Mallett, Dari			3	Filer ID	
Į.	Date 03/04/2025	5 Full name of contributor out-of-state PAC (ID#:_Hulin, Kerry 6 Contributor address; City; State; Zip Code 5695 Alfred Road Maurice, LA 70555		7	Amount of Contribution (\$)	\$500,00
В	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	Maratini da sa	
ł	Date 03/17/2025	Full name of contributor out-of-state PAC (ID#:_ Jones, Gregg Contributor address; City; State; Zip Code 13603 CR 283 N Kilgore, TX 75662)		Amount of Contribution (\$)	\$1,000.00
	Principal occ	upation / Job title (See Instructions)	Employer (See Instructions	;)		
	Date 03/19/2025	Full name of contributor out-of-state PAC (ID#:_ Lucas, Todd Contributor address; City; State; Zip Code PO Box 392)		Amount of Contribution (\$)	\$50.00
	Principal occi	Ore City, TX 75683 upation / Job title (See Instructions)	Employer (See Instructions	[_ i)	W-1	
•	Date 03/02/2025	Full name of contributor out-of-state PAC (ID#:_ Mallett, Baylee Contributor address; City; State; Zip Code 2320 Dulles Station Blvd.)		Amount of Contribution (\$)	\$15.00
	Principal occi	Herndon, VA 20171 upation / Job title (See Instructions)	Employer (See Instructions	 ;)		
ł	Date 02/25/2025	Full name of contributor out-of-state PAC (ID#: Mallett, Dylan)		Amount of Contribution (\$)	\$200.00
		Contributor address; City; State; Zip Code 2007 Idylwood Dr. Kilgore, TX 75662				
	Principal occi	upation / Job title (See Instructions)	Employer (See Instructions	5)		
TARRE				ELANGE -		

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1; The Instruction Guide explains how to complete this form. Sch: 4/6 Rpt: 7/14 2 FILER NAME 3 Filer ID Mallett, Darrin 4 Date 5 Full name of contributor out-of-state PAC (ID#:_ 7 Amount of Contribution (\$) Griffin, Scooter 02/28/2025 \$1,000.00 6 Contributor address; City; State; Zip Code 17 NP Lake Cherokee Rd. Longview, TX 75603 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 03/11/2025 Morgan, Lisa \$25,00 Contributor address; City; State; Zip Code 168 Barnett Rd. Kilgore, TX 75662 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#; Amount of Contribution (\$) 03/21/2025 Newman, Donna \$100.00 Contributor address; City; State; Zip Code 1606 McAllen Henderson, TX 75654 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#; Amount of Contribution (\$) 03/05/2025 \$500.00 OConner, Randy Contributor address; City; State; Zip Code 271 Sweetwater Hills Drive Hendersonville, NC 28791 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 02/25/2025 Parrish, Alisha \$20.00 Contributor address; City; State; Zip Code 305 W Walnut St. Hallsville, TX 75650 Principal occupation / Job title (See Instructions) Employer (See Instructions) Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V4.1.0.e02d6221

The Instruction Guide explains now to complete this form. 2 FILER NAME Mallett, Darrin 4 Date 03/10/2025 Powell, Larry 6 Contributor address; City; State; Zip Code 15319 FM 2276 N Kilgore, TX 75662 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	otal pages Schedule A1: Sch: 5/6 Rpt: 8/14 iller ID	
Mallett, Darrin Date 03/10/2025 5 Full name of contributor	iler ID	
Date O3/10/2025 Powell, Larry Contributor address; City; State; Zip Code 15319 FM 2276 N Kilgore, TX 75662 Principal occupation / Job title (See Instructions) Date O3/18/2025 Pratka, Christy Contributor address; City; State; Zip Code 3105 Stone Rd. Kilgore, TX 75662		
Date Full name of contributor out-of-state PAC (ID#:) A 03/18/2025 Pratka, Christy Contributor address; City; State; Zip Code 3105 Stone Rd. Kilgore, TX 75662	mount of Contribution (\$)	\$20.00
03/18/2025 Pratka, Christy Contributor address; City; State; Zip Code 3105 Stone Rd. Kilgore, TX 75662		
Principal occupation / Job title (See Instructions) Employer (See Instructions)	mount of Contribution (\$)	\$50.00
Date Full name of contributor out-of-state PAC (ID#:) A 03/01/2025 Sanders, Lisa Contributor address; City; State; Zip Code 2411 Clay St.	mount of Contribution (\$)	\$25.00
Kilgore, TX 75662 Principal occupation / Job title (See Instructions) Employer (See Instructions)		<u> </u>
Date Full name of contributor out-of-state PAC (ID#:) A 03/11/2025 Shipp, Vickie Contributor address; City; State; Zip Code 1512 Leach St.	mount of Contribution (\$)	\$50.00
Kilgore, TX 75662 Principal occupation / Job title (See Instructions) Employer (See Instructions)		
Date Full name of contributor out-of-state PAC (ID#:) A 03/11/2025 Stack, Stephanie Contributor address; City; State; Zip Code 200 Jeter St.	smount of Contribution (\$)	\$50.00
Santa Cruz, CA 95060 Principal occupation / Job title (See Instructions) Employer (See Instructions)		
orms provided by Texas Ethics Commission www.ethics.state.tx.us		

	MONET	ARY POLITICAL CONTRIBUTION	DNS	SCHEDULE A	11
	The Instru	ction Guide explains how to complete this t	orm.	1 Total pages Schedule A1: Sch: 6/6 Rpt: 9/14	
2	FILER NAME Mallett, Darr			3 Filer ID	
4	Date 02/25/2025	 5 Full name of contributor out-of-state PAC (ID#: Staehs, Sharon 6 Contributor address; City; State; Zip Code 207 Fair Park Ave. Henderson, TX 75654 		7 Amount of Contribution (\$)	50.00
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instruction	ns)	, HAIP-
***************************************	Date 03/06/2025	Full name of contributor out-of-state PAC (ID#: Williams, Greg Contributor address; City; State; Zip Code 1700 Valley Brook Ln Longview, TX 75605		Amount of Contribution (\$)	\$50.00
	Principal occu	upation / Job title (See Instructions)	Employer (See Instruction:	ns)	

LOANS				SCHEDULE E		
The Instruction	on Guide explains how to complete this f	orm.		Total pages Schedule E: Sch: 1/1 Rpt: 10/14		
2 FILER NAME Mallett, Darrin			3 Filer ID			
TOTAL OF UN	NITEMIZED LOANS			\$		
5 Date of loan 02/20/2025	7 Name of lender out-of-state PA Mallett, Darrin	C (ID#:)	9 Loan Amount (\$) \$100.00		
8 Is lender a financial institution?	8 Lender address; City; State; 2007 Idylwood Dr.	Zip Code		10 Interest Rate		
No	Kilgore, TX 75662			11 Maturity Date		
12 Principal occupati President	ion / Job title (See Instructions)	13 Employer (See Instructions Kilgore Tire)	d		
14 Description of Co	llateral	15 Check if personal funds we	re deposited	into political account (See Instructions)		
16 GUARANTOR INFORMATION	17 Name of guarantor			19 Amount Guaranteed (\$)		
X not applicable	18 Guarantor address; City; State;	Zĺp Code	***************************************			
20 Principal occupati	on	21 Employer (See Instructions)			

	ı					

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

Event Expense
Fees
Food/Beverage Expense
Gitt/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

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	∤- al Co	mmittee	Food/Beverage Expense Gift/Awards/Memorials Expens Legal Services The Instruction Guide ex	se	Printing Salaries	-	se s/Contract Labor		Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME	Ē		····			3	Filer ID	
	Sch: 1/4 Rpt: 11/14	L	Mallett, Dar	rrin		·					
4	Date	5	Payee name	l .							
	02/28/2025		Anedot								
6	Amount (\$)	7	Payee addre	ess; City;	State;	Zip (Code				
	\$11.70		5555 Hilton	Nation Ave. Ste. 106							
	;										
		<u> </u>		ge, LA 70808		• 14					
8	PURPOSE OF	(a)		See Categories listed at the top o	of this scher	dule)	(p)	Description			
	EXPENDITURE		Fees							ide of Texas. Complete Schedule T. , officeholder living expense	
	!							Service Fee	, , ,	one of the state o	
	;										
9	Complete ONLY if direct expenditure to benefit C/Oh		Dandidate/Offi	iceholder name	Of	ffice so	ought	and the second of the second o		Office held	nt There are a second
****	Date	Ī	Payee name								<u></u>
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	\$16.80		-	Ave. Ste. 106	•	'					
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			Baton Rouç	ge, LA 70808							
	PURPOSE	(a)	Category (S	ee Categories listed at the top o	of this scher	dule)	(b)	Description			
	OF EXPENDITURE		Fees				į			de of Texas. Complete Schedule T.	
	!							Check if Austin, Service Fee	, TX,	officeholder living expense	
	!							Service Fee			
co lonium .	Complete ONLY if direct		Candidate/Offi	iceholder name	Of	ffice so	I ought			Office held	
	expenditure to benefit C/OF	러 .									
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	\$20.30		5555 Hilton	Ave. Ste. 106							
			Baton Roug	ge, LA 70808							
_	PURPOSE OF			ee Categories listed at the top of	of this sched	dule)	(b)	Description			
	EXPENDITURE		Fees					Lamb		de of Texas. Complete Schedule T.	
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	Complete ONLY if direct		Candidate/Offi	iceholder name	Of	ffice so	<u>l</u> sught			Office held	
	expenditure to benefit C/OF	1								T	
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Food/Beverage Expense Politing Expense Gitt/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages The Instruction Guide explains how to complete				e /Contract Labor		Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME	-					3	Filer ID
	Sch: 2/4 Rpt: 12/14		Mallett, Dai	rrin						
4	Date	5	Payee name			······································			·	A second
	03/10/2025		Anedot							
6	Amount (\$)	7	Payee addre	ess; City;	State;	Zip C	ode			
	\$22.60		5555 Hilton	Ave. Ste. 106						
			Baton Roug	ge, LA 70808						
8	PURPOSE	(a)	Category (s	ee Categories listed at the top of	of this sched	dule)	(b)	Description		
	OF EXPENDITURE		Fees					Lucal		ide of Texas. Complete Schedule T. , officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Off	iceholder name	Of	fice so	ught	***************************************		Office held
	Date		Payee name						-1	
	03/13/2025		Anedot							
	Amount (\$)	<u> </u>	Payee addre	ess; City;	State;	Zip C	ode			
	\$15.60		5555 Hilton	Ave. Ste. 106						
			Baton Roug	ge, LA 70808						
	PURPOSE	(a)	Category (s	see Categories listed at the top of	of this sched	dule)	(d)	Description		
	OF EXPENDITURE		Fees	·		·		Later		de of Texas. Complete Schedule T.
								Check if Austin Service Fee	, TX,	officeholder living expense
								Service ree		
, 1	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Off	iceholder name	Of	fice so	ught	delmande (f. 18.4 Minute del II de mili di la di gunte que Proprio de la granda del la della della della della	ann, deur an fin den	Office held
· · · · · ·	Date		Payee name							
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	Amount (\$)	-	Payee addre	ess; City;	State;	Zip C	ode			
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_			Baton Rou	ge, LA 70808						
	PURPOSE	(a)	Category (s	ee Categories listed at the top o	of this sched	iule)	(b)	Description		
	OF EXPENDITURE		Fees					Yaranii .		ide of Texas. Complete Schedule T. officeholder living expense
								Service Fee	1 1 1 1	omounded nouth exhause
	·									
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Off	iceholder name	Of	fice so	ught			Office held
			Professional Security	The state of the s			dina Laurania.			

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	-	Fees Office Overhead/Rer Food/Beverage Expense Folling Expense Gitt/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Con The Instruction Guide explains how to complete ti			e /Contract Labor		Transportation Equipment & Relate Travel in District Travel Out of District OTHER (enter a category not listed	,
·	Total reaca Cahadula E1.	2 50 50 8445		HOW to CO	mpre	te this form.		-:(10%	
1	Total pages Schedule F1:						၁ ၊	Filer ID	
	Sch: 3/4 Rpt: 13/14	Mallett, Dar						manager and the second	
4	Date	5 Payee name							
-4	03/20/2025	Anedot							
6	Amount (\$)	7 Payee addres	ss; City; State	e; Zip Co	de				
	\$2.30	5555 Hilton	Ave, Ste. 106						
		Baton Roug	e, LA 70808						
8	PURPOSE	(a) Category (c.	e Categories listed at the top of this so	h a di das	(h)	Description			
_	٥۶	Fees	e Categories listed at the top of this sc	nedule)	(~)	THE COURT	outside	e of Texas. Complete Schedule T.	
	EXPENDITURE	. 005				Check if Austin,	, TX, c	officeholder living expense	
						Service Fee			
9	Complete ONLY if direct		ceholder name	Office sou	ght			Office held	
	expenditure to benefit C/OI	1							
NAVE NA	Date	Payee name			*******			The second secon	
	03/24/2025	Anedot							
	**************************************	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	co Ciby State	v Zin Co	do			<u> </u>	
	Amount (\$) \$2.30	Payee addres	· ·	e; Zip Co	ue				
	\$2,30	2222 1111011	Ave. Ste. 106						
		Baton Roug	e, LA 70808						
	PURPOSE	(a) Category (Se	e Categories listed at the top of this so	hedule)	(b)	Description			
	OF EXPENDITURE	Fees						e of Texas. Complete Schedule T.	
						Louis	, TX, c	officeholder living expense	
						Service Fee			
	One and a CAN Mile of	0 - 21 - 10/6	and the later of t						
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Offi	cenolaer name	Office sou	ght			Office held	
			WAS A STATE OF THE						
	Date	Payee name							
	03/24/2025	CWJ Strate	gies						
	Amount (\$)	Payee addres	ss; City; State	; Zip Co	de				
	\$1,967.98	314 S Broad	dway Ave.						
		Tyler, TX 75	5702						
	PURPOSE				/h\	M = = = 1 = 2 = =			
	OF		e Categories listed at the top of this so	hedule)	(u)	Description Check it travel of	niteida	e of Texas. Complete Schedule T.	
	EXPENDITURE	Consulting (Exhense			Larrie		officeholder living expense	
								aign marketing materia	s
						.	•		
	Complete ONLY if direct	Candidate/Offi	ceholder name	Office sou	oht			Office held	
	expenditure to benefit C/Oł				J			21100 11010	
			The state of the s		•		- 		
Takish	Alexander and a second a second and a second a second and								

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	mmittee	Food/Beverage Expense Git/Awards/Memorials Expense Legal Services Polling Expense Printing Expense Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.						Travel in District Travel Out of District OTHER (enter a category not listed above)			
		·	**************************************		explains h	low to co	omple	ete this form.				
1	Total pages Schedule F1:	2							3	Filer ID		
	Sch: 4/4 Rpt: 14/14		Mallett, Dar	rin								
4	Date	5	Payee name									
	02/25/2025		Deluxe Che	ecks								
6	Amount (\$)	7	Payee addre	ss; City;	State;	Zip Co	ode					
	\$31.00		801 S Marq	uette Ave.								
			Minneapolis	s, MN 55402								
8	PURPOSE	(a)	Category /s	ee Categories listed at the top	of this caba	dula)	(b)	Description				
	OF	Ì	Advertising		OI dras scrie	duley	()	,	outsid	ie of Texas. Complete Schedule T.		
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9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offi	ceholder name	0	ffice sou	ught			Office held		
	experience to belieff 6/6/											
	Date		Payee name									
	03/14/2025		Harrington,	Patrick								
	Amount (\$)		Payee addre	ss; City;	State;	Zip Co	ode			the state of the s		
	\$300.00		4350 Old O	men Rd.								
			Apt. 5204									
			Tyler, TX 75	5703								
	PURPOSE	(a)	Category (s	ee Categories listed at the top	of this echo	dulal	(b)	Description				
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	EXPENDITORE		_	•				Lacal		officeholder living expense		
								Billboard Inst	alla	tion		
				CONTRACTOR OF THE PROPERTY OF						·		
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offi	ceholder name	O	ffice sou	ught			Office held		
						· · · · · · · · · · · · · · · · · · ·						
	Date		Payee name					1			***************************************	
	03/05/2025		XL Digital Ir	naging							=	
	Amount (\$)		Payee addre	ss; City;	State;	Zip Co	ode					
	\$483.23		11625 Colu	mbia Center Dr.								
			Dallas, TX 7	75229								
. I	PURPOSE	(a)	Category (Se	ee Categories listed at the top	of this sche	dule)	(b)	Description				
	OF EXPENDITURE		Advertising			•				e of Texas. Complete Schedule T.		
							ļ			officeholder living expense		
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	Complete ONLY if direct expenditure to benefit C/OF	1	andidate/Offi	ceholder name	Of	fice sou	ight			Office held		
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