

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers)

2 Total pages filed: **7**

3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	OFFICE USE ONLY
	M	Daryl	R	
NICKNAME	LAST	SUFFIX	Date Received	
	Davis	II		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE			Date Hand-delivered or Date Postmarked
Change of Address	9216 Vineyard Lane Fort Worth, TX 76123			
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	Receipt #
	(817)	692-2020		Amount \$
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI	Date Processed
		Kenneth	S B	Date Imaged
NICKNAME	LAST	SUFFIX		
	Spears			
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE			
(Residence or Business)	6400 Briarcliff Ct., Fort Worth, TX 76132			
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	
	(817)	995-4022		
9 REPORT TYPE	☐ January 15 ☒ 30th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment (Officeholder Only) ☐ July 15 ☐ 8th day before election ☐ Exceeded Modified Reporting Limit ☐ Final Report (Attach C/OH - FR)			
10 PERIOD COVERED	Month Day Year Month Day Year 2 / 10 / 26 THROUGH 3 / 27 / 26			
11 ELECTION	ELECTION DATE		ELECTION TYPE	
	Month	Day	Year	☐ Primary ☐ Runoff ☒ Other Description 5 / 2 / 26 ☐ General ☐ Special Uniform Municipal
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (if known)	
			Crowley ISD Board Trustee, Place 3	
14 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.			
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	☐ GENERAL	COMMITTEE ADDRESS		
	☐ SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRESS		

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CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME Daryl R. Davis, II.		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 625.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 1,154.85
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 391.68
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

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



Daryl R. Davis
Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Daryl R. Davis this the 2 day of April, 2026, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

Catherine Montalvo Secretary

OR

(2) Unsworn Declaration

My name is Daryl R. Davis, II. and my date of birth is 06/17/1981

My address is _____, _____, _____, _____, _____
(street) (city) (state) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20____
(month) (year)

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3****19 FILER NAME**

Daryl R. Davis, II

20 Filer ID (Ethics Commission Filers)**21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE****SUBTOTAL
AMOUNT**

1. ☒	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 625.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	SCHEDULE E: LOANS	\$
5. ☒	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 400.27
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9. ☒	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 754.58
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME DAVID R. DAVIS, II		3 Filer ID (Ethics Commission Filers)
4 Date 3/3/26	5 Full name of contributor ☐ out-of-state PAC (ID#: Monica Porter	7 Amount of contribution (\$) \$250.
6 Contributor address; City; State; Zip Code 1705 Blue Water Crowley TX 76036 Gt.		
8 Principal occupation / Job title (See Instructions) Tax Compliance		9 Employer (See Instructions) Texas Instruments
Date 3/6/26	Full name of contributor ☐ out-of-state PAC (ID#: Camille Holmes	Amount of contribution (\$) \$ 25.
Contributor address; City; State; Zip Code 8200 Clarksprings Dallas TX 75236 #5303		
Principal occupation / Job title (See Instructions) Education		Employer (See Instructions) Sirius Education Solutions
Date 3/12/26	Full name of contributor ☐ out-of-state PAC (ID#: Kevin Robinzine	Amount of contribution (\$) \$ 25.
Contributor address; City; State; Zip Code 949 Scenic Dr. Ft. Worth TX 76111 Apt 432		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 3/16/26	Full name of contributor ☐ out-of-state PAC (ID#: Christy D. Starling	Amount of contribution (\$) \$ 100.
Contributor address; City; State; Zip Code 2909 E. Arkansas Arlington, TX 76126 Ln. #C444		
Principal occupation / Job title (See Instructions) Real Estate Investor		Employer (See Instructions) Self-employed
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 2
2 FILER NAME Daryl R. Davis, II		3 Filer ID (Ethics Commission Filers)
4 Date 03/23/2026	5 Full name of contributor out-of-state PAC (ID#: _____) Ralph Emerson, Sr. 6 Contributor address; City; State; Zip Code 5001 Coneflower Rd., Ft. Worth, TX 73123	7 Amount of contribution (\$) 50.00
8 Principal occupation / Job title (See Instructions) Pastor		9 Employer (See Instructions) Rising Star Baptist Church
Date 03/24/2026	Full name of contributor out-of-state PAC (ID#: _____) Benjamin L Swanson Contributor address; City; State; Zip Code 2615 Handley Drive, Ft. Worth, TX 76112	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions) Education		Employer (See Instructions) FWISD
Date 03/25/2026	Full name of contributor out-of-state PAC (ID#: _____) Reginald Palmer Contributor address; City; State; Zip Code 8232 Melville Lane, Ft. Worth, TX 76120	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) BNSF Railway
Date 03/25/2026	Full name of contributor out-of-state PAC (ID#: _____) Blake Moorman Contributor address; City; State; Zip Code PO Box 3523, Ft. Worth, TX 76113	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) City of Fort Worth
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 1		2 FILER NAME Daryl R. Davis, II		3 Filer ID (Ethics Commission Filers)	
4 Date 03/27/2026		5 Payee name Bankem Printing			
6 Amount (\$) 378.88		7 Payee address; City; State; Zip Code 2357 S. Collins, Arlington, TX 74014			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising expense		(b) Description door hangers		
	(c) Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held					
Date 03/16/2026		Payee name TextByChoice			
Amount (\$) 12.00		Payee address; City; State; Zip Code 503 East Jackson Street, Ste 109, Tampa, FL 33602			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising expense		Description Campaign text messages		
	Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held					
Date 03/27/2026		Payee name Act Blue			
Amount (\$) 9.39		Payee address; City; State; Zip Code PO Box 96207, Boston, MA 02196			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking		Description Credit card processing fees		
	Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held					
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: 1	2 FILER NAME Daryl R. Davis, II		3 Filer ID (Ethics Commission Filers)
4 Date 02/10/2026	5 Payee name Squarespace, Inc.		
6 Amount (\$) 294.22 ☒ Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Website		(b) Description Website hosting
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			
Date 02/23/2026	Payee name GoDaddy		
Amount (\$) 191.75 ☒ Reimbursement from political contributions intended	Payee address; City; State; Zip Code 2155 E. GoDaddy Way, Tempe, AZ 85284		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Website		Description Website domain
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			
Date 02/28/2026	Payee name Fort Worth Jack & Jill		
Amount (\$) 268.61 ☒ Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1930 17th Street, NW Washington, DC, 20009		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising		Description event program ad
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			