

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: **31**

3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	OFFICE USE ONLY		
	NICKNAME	LAST	SUFFIX			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE	Date Received 4-2-26 <i>D. Han</i>
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	Date Hand-delivered or Date Postmarked 4-2-26		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI	Receipt #	Amount \$	Date Processed
	NICKNAME	LAST	SUFFIX	Date Imaged		
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #;	CITY;	STATE;	ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION			
9 REPORT TYPE	<input type="checkbox"/> January 15	<input checked="" type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)		
10 PERIOD COVERED	<input type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded Modified Reporting Limit	<input type="checkbox"/> Final Report (Attach C/OH - FR)		
11 ELECTION	Month	Day	Year	ELECTION TYPE		
12 OFFICE	OFFICE HELD (if any)			OFFICE SOUGHT (if known)		
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				
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS				
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME				
		COMMITTEE CAMPAIGN TREASURER ADDRESS				

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2
2 of 31

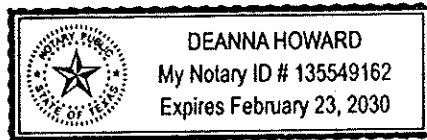
15 C/OH NAME Darrell Brown		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 218.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 10,178.66
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 3,988.50
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 6,408.16
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

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.

Darrell Brown
Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP/SEAL

Sworn to and subscribed before me by Darrell Brown this the 2 day of April.

20 20 to certify which, witness my hand and seal of office.

Deanna Howard Deanna Howard Executive Assistant
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____.

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**
3 of 31

19 FILER NAME Darrell Brown		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	■ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 10,396.66
2.	■ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 6807.32
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	SCHEDULE E: LOANS	\$
5.	■ SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 3,988.50
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	\$ 105.13
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: Sch: 1/18 Rpt: 4/31
2 FILER NAME Darrell Brown		3 Filer ID (Ethics Commission Filers)
4 Date 02/15/2026	5 Full name of contributor out-of-state PAC (ID#: _____) Jace Brown 6 Contributor address; City; State; Zip Code 11315 Fernald Ave. Dallas, Tx 75218	7 Amount of contribution (\$) 780.50
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/15/2026	Full name of contributor out-of-state PAC (ID#: _____) Bethany Smith Contributor address; City; State; Zip Code 2704 Harmon Dr. Grapevine, TX 76051	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/16/2026	Full name of contributor out-of-state PAC (ID#: _____) Adrian Higginbotham Contributor address; City; State; Zip Code 2415 Whitney Ln Grapevine, TX 76051	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/17/2026	Full name of contributor out-of-state PAC (ID#: _____) Christopher Kinsey Contributor address; City; State; Zip Code 4700 Prestwick Dr Colleyville, T 76034	Amount of contribution (\$) 105.75
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

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: Sch: 2/18 Rpt: 5/31
2 FILER NAME Darrell Brown		3 Filer ID (Ethics Commission Filers)
4 Date 02/14/2026	5 Full name of contributor out-of-state PAC (ID#: _____) Sara Marshall 6 Contributor address; City; State; Zip Code 1104 Riverwalk Ct. Colleyville, TX 76034	7 Amount of contribution (\$) 1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/14/2026	Full name of contributor out-of-state PAC (ID#: _____) John Doughney Contributor address; City; State; Zip Code 3405 Stonecrest Dr. Grapevine, TX 76051	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/15/2026	Full name of contributor out-of-state PAC (ID#: _____) Kristin DeRight Contributor address; City; State; Zip Code 2032 Bowie St. Amarillo, Tx 79109	Amount of contribution (\$) 150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/15/2026	Full name of contributor out-of-state PAC (ID#: _____) Peter Gauthier Contributor address; City; State; Zip Code 1312 P St. NW, Washington, DC 20005	Amount of contribution (\$) 20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/18 Rpt: 6/31
2 FILER NAME Darrell Brown		3 Filer ID (Ethics Commission Filers)
4 Date 02/17/2026	5 Full name of contributor out-of-state PAC (ID#: _____) Shelby Tidwell ----- 6 Contributor address; City; State; Zip Code 11517 Emerald Falls Dr Austin, TX 78738	7 Amount of contribution (\$) 31.95
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/17/2026	Full name of contributor out-of-state PAC (ID#: _____) David Nelson ----- Contributor address; City; State; Zip Code 1401 Woodland Hills Dr, Whitehouse, TX 75791	Amount of contribution (\$) 105.75
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/18/2026	Full name of contributor out-of-state PAC (ID#: _____) Jake and Jinky Hicks ----- Contributor address; City; State; Zip Code 4104 Mockingbird Ln, Colleyville, TX 76034	Amount of contribution (\$) 53.04
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/18/2026	Full name of contributor out-of-state PAC (ID#: _____) Katherine Parks ----- Contributor address; City; State; Zip Code 3513 Mercury Dr, Grapevine, TX 76051	Amount of contribution (\$) 53.04
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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: Sch: 4/18 Rpt: 7/31
2 FILER NAME Darrell Brown		3 Filer ID (Ethics Commission Filers)
4 Date 02/18/2026	5 Full name of contributor out-of-state PAC (ID#: _____) Leah Dixon	7 Amount of contribution (\$) 10.00
	6 Contributor address; City; State; Zip Code 2708 Cliffwood Dr, Colleyville, TX 76034	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/18/2026	Full name of contributor out-of-state PAC (ID#: _____) Maggie Taylor	Amount of contribution (\$) 53.04
	Contributor address; City; State; Zip Code 2908 Walnut Ln, Hurst, TX 76054	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/18/2026	Full name of contributor out-of-state PAC (ID#: _____) Mindy Russell	Amount of contribution (\$) 105.75
	Contributor address; City; State; Zip Code 1805 Camden Green, Colleyville, TX 76034	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/18/2026	Full name of contributor out-of-state PAC (ID#: _____) Claire Wander	Amount of contribution (\$) 200.00
	Contributor address; City; State; Zip Code 2066 Wedgewood Dr, Grapevine, TX 76051	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/18 Rpt: 8/31
2 FILER NAME Darrell Brown		3 Filer ID (Ethics Commission Filers)
4 Date 02/18/2026	5 Full name of contributor out-of-state PAC (ID#: _____) Gay Grissom 6 Contributor address; City; State; Zip Code 8574 Corral Circle, Fort Worth, TX 76244	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/18/2026	Full name of contributor out-of-state PAC (ID#: _____) Laurie Ackerman Contributor address; City; State; Zip Code 3501 High Countryside Dr, Grapevine, TX 76051	Amount of contribution (\$) 53.04
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/18/2026	Full name of contributor out-of-state PAC (ID#: _____) Bryan Smith Contributor address; City; State; Zip Code 907 Homestead Ln, Grapevine, TX 76051	Amount of contribution (\$) 53.04
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/18/2026	Full name of contributor out-of-state PAC (ID#: _____) Louie Murillo Contributor address; City; State; Zip Code 220 Glade Rd, Colleyville, TX 76034	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/18 Rpt: 9/31
2 FILER NAME Darrell Brown		3 Filer ID (Ethics Commission Filers)
4 Date 02/19/2026	5 Full name of contributor out-of-state PAC (ID#: _____) Jose Rodriguez 6 Contributor address; City; State; Zip Code 241 W Craig Pl, San Antoino, TX, 78212	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/23/2026	Full name of contributor out-of-state PAC (ID#: _____) Sandra Moore Contributor address; City; State; Zip Code 2322 Riata Park Ct Katy, TX, United States, 77494	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/25/2026	Full name of contributor out-of-state PAC (ID#: _____) Stephanie Hicks Contributor address; City; State; Zip Code 102 Bremen Dr, Hurst, TX 76054	Amount of contribution (\$) 37.22
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/26/2026	Full name of contributor out-of-state PAC (ID#: _____) Jennifer Ryback Contributor address; City; State; Zip Code 305 Oaklawn Dr, Colleyville, TX 76034	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/18 Rpt: 10/31
2 FILER NAME Darrell Brown		3 Filer ID (Ethics Commission Filers)
4 Date 02/26/2026	5 Full name of contributor out-of-state PAC (ID#: _____) Ali Stiles 6 Contributor address; City; State; Zip Code 2153 Willowood Dr, Grapevine, TX 76051	7 Amount of contribution (\$) 105.75
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/28/2026	Full name of contributor out-of-state PAC (ID#: _____) Kristin Peters Contributor address; City; State; Zip Code 2733 Hlidden Lake Dr, Grapevine, TX 76051	Amount of contribution (\$) 53.04
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/02/2026	Full name of contributor out-of-state PAC (ID#: _____) Linda Fulhart Contributor address; City; State; Zip Code 1924 Rost Ct, Grapevine, TX 76051	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/02/2026	Full name of contributor out-of-state PAC (ID#: _____) Jason Winans Contributor address; City; State; Zip Code 4705 Redondo St, North Richland Hills, TX 76180	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch:8/18 Rpt:11/31
2 FILER NAME Darrell Brown		3 Filer ID (Ethics Commission Filers)
4 Date 03/03/2026	5 Full name of contributor out-of-state PAC (ID#: _____) Rachel Wall ----- 6 Contributor address; City; State; Zip Code 2922 Oak Forest Dr, Grapevine, TX 76051	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/03/2026	Full name of contributor out-of-state PAC (ID#: _____) Amy Cave ----- Contributor address; City; State; Zip Code 608 Knott Cr, Euless, TX 76039	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/03/2026	Full name of contributor out-of-state PAC (ID#: _____) Michelle Dunlap ----- Contributor address; City; State; Zip Code 1803 Cranbrook Dr South, Colleyville, TX 76034	Amount of contribution (\$) 53.04
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/03/2026	Full name of contributor out-of-state PAC (ID#: _____) Alison Pair ----- Contributor address; City; State; Zip Code 320 Lloyd Cir, Colleyville, TX 76034	Amount of contribution (\$) 105.75
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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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: Sch: 9/18 Rpt: 12/31
2 FILER NAME Darrell Brown		3 Filer ID (Ethics Commission Filers)
4 Date 03/03/2026	5 Full name of contributor out-of-state PAC (ID#: _____) Michelle Quintana 6 Contributor address; City; State; Zip Code 2706 Valleywood Dr., Grapevine, TX 76051	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/03/2026	Full name of contributor out-of-state PAC (ID#: _____) Merin Poul Contributor address; City; State; Zip Code 4010 Ambleside Ct. Colleyville, TX 76034	Amount of contribution (\$) 10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/04/2026	Full name of contributor out-of-state PAC (ID#: _____) Valerie Van Gorp Contributor address; City; State; Zip Code 4008 Windermere Dr., Colleyville, TX	Amount of contribution (\$) 263.90
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/05/2026	Full name of contributor out-of-state PAC (ID#: _____) Stephanie Williams Contributor address; City; State; Zip Code 5205 Braedon Ln, Colleyville, TX 76034	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/18 Rpt: 13/31
2 FILER NAME Darrell Brown		3 Filer ID (Ethics Commission Filers)
4 Date 03/05/2026	5 Full name of contributor out-of-state PAC (ID#: _____) Kaitlin Kimbro ----- 6 Contributor address; City; State; Zip Code 2732 Harmon Dr. Grapevine, TX 76051	7 Amount of contribution (\$) 30.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/10/2026	Full name of contributor out-of-state PAC (ID#: _____) Kristine Leathers ----- Contributor address; City; State; Zip Code 6300 Emerald Dr, Colleyville, Tx 76034	Amount of contribution (\$) 105.75
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/10/2026	Full name of contributor out-of-state PAC (ID#: _____) Ajit Parandare ----- Contributor address; City; State; Zip Code 1109 Riverwalk Ct, Colleyville, TX 76034	Amount of contribution (\$) 105.75
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/10/2026	Full name of contributor out-of-state PAC (ID#: _____) Brian Snow ----- Contributor address; City; State; Zip Code 1409 Wreyhill Dr, Huyrst, TX 76054	Amount of contribution (\$) 200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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: Sch: 11/18 Rpt: 14/31
2 FILER NAME Darrell Brown		3 Filer ID (Ethics Commission Filers)
4 Date 03/11/2026	5 Full name of contributor out-of-state PAC (ID#: _____) Marissa De La Cruz 6 Contributor address; City; State; Zip Code 2157 Willowood Dr, Grapevine, TX 76051	7 Amount of contribution (\$) 79.39
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/11/2026	Full name of contributor out-of-state PAC (ID#: _____) Christy Spivey Contributor address; City; State; Zip Code 3907 Martin Pkwy, Colleyville, TX 76034	Amount of contribution (\$) 53.04
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/13/2026	Full name of contributor out-of-state PAC (ID#: _____) Donna Ward Contributor address; City; State; Zip Code 16 Cyress Pt, Amarillo, TX 79124	Amount of contribution (\$) 2,000.00
Principal occupation / Job title (See Instructions) Purpose and Passion Boutique Co-Owner		Employer (See Instructions) Self-employed
Date 03/13/2026	Full name of contributor out-of-state PAC (ID#: _____) Matthew Kammerdiener Contributor address; City; State; Zip Code 4404 W Jim Mitchell Tr, Colleyville, TX 76034	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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: Sch: 12/18 Rpt: 15/31
2 FILER NAME Darrell Brown		3 Filer ID (Ethics Commission Filers)
4 Date 03/14/2026	5 Full name of contributor out-of-state PAC (ID#: _____) Kimberley Davis	7 Amount of contribution (\$) 100.00
6 Contributor address; City; State; Zip Code 3218 Rolling Hills Ln, Grapevine, TX 76051		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/14/2026	Full name of contributor out-of-state PAC (ID#: _____) Julie Rounsaville	Amount of contribution (\$) 35.00
Contributor address; City; State; Zip Code 1479 Hampton Rd, Grapevine, TX 76051		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/18/2026	Full name of contributor out-of-state PAC (ID#: _____) Lydia Martin	Amount of contribution (\$) 21.14
Contributor address; City; State; Zip Code 2716 Woodson Cir, Bedford, TX 76021		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/18/2026	Full name of contributor out-of-state PAC (ID#: _____) Stephanie Hicks	Amount of contribution (\$) 37.22
Contributor address; City; State; Zip Code 102 Bremen Dr, Hurst, TX 76054		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/18 Rpt: 16/31
2 FILER NAME Darrell Brown		3 Filer ID (Ethics Commission Filers)
4 Date 03/18/2026	5 Full name of contributor out-of-state PAC (ID#: _____) Hayley Parham 6 Contributor address; City; State; Zip Code 4130 Harvestwood Dr, Grapevine, TX 76051	7 Amount of contribution (\$) 105.75
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/18/2026	Full name of contributor out-of-state PAC (ID#: _____) Ashley Benson Contributor address; City; State; Zip Code 12657 Chittamwood Trl., Euless, TX 76040	Amount of contribution (\$) 15.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/18/2026	Full name of contributor out-of-state PAC (ID#: _____) Beth Sills Contributor address; City; State; Zip Code 7208 Yolanda Dr, Ft. Worth, TX 76112	Amount of contribution (\$) 16.14
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/18/2026	Full name of contributor out-of-state PAC (ID#: _____) Patti Seeker Contributor address; City; State; Zip Code 5401 Linden Ct., Colleyville, Tx 76034	Amount of contribution (\$) 105.75
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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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: Sch: 14/18 Rpt: 17/31
2 FILER NAME Darrell Brown		3 Filer ID (Ethics Commission Filers)
4 Date 03/18/2026	5 Full name of contributor out-of-state PAC (ID#: _____) Haley Young 6 Contributor address; City; State; Zip Code 1616 Dorset Dr, Colleyville, TX 76034	7 Amount of contribution (\$) 25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/18/2026	Full name of contributor out-of-state PAC (ID#: _____) Patty Thompson Contributor address; City; State; Zip Code 1023 Pheasant Ridge Dr., Grapevine, TX 76051	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/18/2026	Full name of contributor out-of-state PAC (ID#: _____) Desha Schalekamp Contributor address; City; State; Zip Code 4449 Vineyard Creek Dr, Grapevine, TX 76051	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/19/2026	Full name of contributor out-of-state PAC (ID#: _____) Lowell Strike Contributor address; City; State; Zip Code 9429 Shorebird Ct., Parrish, FL 34219	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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: Sch: 15/18 Rpt: 18/31
2 FILER NAME Darrell Brown		3 Filer ID (Ethics Commission Filers)
4 Date 03/19/2026	5 Full name of contributor out-of-state PAC (ID#: _____) Bridgette Bumpas 6 Contributor address; City; State; Zip Code 5435 El Campo Ave., Ft. Worth, TX 76107	7 Amount of contribution (\$) 105.75
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/21/2026	Full name of contributor out-of-state PAC (ID#: _____) Caitlin Dodd Contributor address; City; State; Zip Code 4153 Windomere Dr, Grapevine, TX 76051	Amount of contribution (\$) 26.68
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/22/2026	Full name of contributor out-of-state PAC (ID#: _____) Lisa Sturgeon Hewitt Contributor address; City; State; Zip Code 1308 Ashford Ct., Colleyville, TX 76034	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/19/2026	Full name of contributor out-of-state PAC (ID#: _____) Ginna Dominguez Contributor address; City; State; Zip Code 5204 Elm St, Colleyville, TX 76034	Amount of contribution (\$) 105.75
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

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: Sch: 16/18 Rpt: 19/31
2 FILER NAME Darrell Brown		3 Filer ID (Ethics Commission Filers)
4 Date 03/22/2026	5 Full name of contributor out-of-state PAC (ID#: _____) Luis Diaz 6 Contributor address; City; State; Zip Code 2804 Walnut Lane, Hurst, TX 76054	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/22/2026	Full name of contributor out-of-state PAC (ID#: _____) Dawn Diaz Contributor address; City; State; Zip Code 2804 Walnut Ln., Hurst, TX 76054	Amount of contribution (\$) 105.75
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/22/2026	Full name of contributor out-of-state PAC (ID#: _____) Taylor Bernstein Contributor address; City; State; Zip Code 225 Springhill Dr., Hurst, TX 76054	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/22/2026	Full name of contributor out-of-state PAC (ID#: _____) Desha Schalekamp Contributor address; City; State; Zip Code 4449 Vinyard Creek Dr, Grapevine, TX 76051	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

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: Sch: 17/18 Rpt: 20/31
2 FILER NAME Darrell Brown		3 Filer ID (Ethics Commission Filers)
4 Date 03/23/2026	5 Full name of contributor out-of-state PAC (ID#: _____) Taylor Davis	7 Amount of contribution (\$) 500.00
	6 Contributor address; City; State; Zip Code 4206 Green Meadow St E, Colleyville, TX 76034	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/23/2026	Full name of contributor out-of-state PAC (ID#: _____) Jonathan Bodiford	Amount of contribution (\$) 211.18
	Contributor address; City; State; Zip Code 4008 Stonehaven Dr., Colleyville, TX 76034	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/24/2026	Full name of contributor out-of-state PAC (ID#: _____) Mindy Russell	Amount of contribution (\$) 105.75
	Contributor address; City; State; Zip Code 1805 Camden Green, Colleyville, TX 76034	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/23/2026	Full name of contributor out-of-state PAC (ID#: _____) Michael Hendrickson	Amount of contribution (\$) 50.00
	Contributor address; City; State; Zip Code 1108 Garry Lynne Dr, Colleyville, TX 76034	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

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: Sch: 18/18 Rpt: 21/31
2 FILER NAME Darrell Brown		3 Filer ID (Ethics Commission Filers)
4 Date 03/24/2026	5 Full name of contributor out-of-state PAC (ID#: _____) Carrie Murdock 6 Contributor address; City; State; Zip Code 4004 Meadow Drive, Grapevine, TX 76051	7 Amount of contribution (\$) 104.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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 A2: Sch: 1/7 Rpt: 22/31	
2 FILER NAME Darrell Brown		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 02/28/2026	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sarah Marshall	8 Amount of Contribution \$ 174.00	9 In-kind contribution description Event Reservation
7 Contributor address; City; State; Zip Code 1104 Riverwalk Ct., Colleyville TX 76034		Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) Volunteer		11 Employer (FOR NON-JUDICIAL)(See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL)(See Instructions)	
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)			
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution \$	In-kind contribution description
	Contributor address; City; State; Zip Code		
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)		Employer (FOR NON-JUDICIAL)(See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL)(See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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 A2: Sch: 2/7 Rpt: 23/31	
2 FILER NAME Darrell Brown		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 03/24/2026	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kimberly Phoenix	8 Amount of Contribution \$ 33.33	9 In-kind contribution description Meet and Greet Event
7 Contributor address; City; State; Zip Code 5333 Meritage Ln Grapevine TX 76051		Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) Volunteer		11 Employer (FOR NON-JUDICIAL)(See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL)(See Instructions)	
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)			
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution \$	In-kind contribution description
	Contributor address; City; State; Zip Code		
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL)(See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL)(See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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 A2: Sch: 3/7 Rpt: 24/31	
2 FILER NAME Darrell Brown		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 03/24/2026	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kimberley Barber Davis	8 Amount of Contribution \$ 33.33	9 In-kind contribution description Meet and Greet Event
7 Contributor address; City; State; Zip Code 3218 Rolling Hills Ln Grapevine TX 76051		Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) Volunteer		11 Employer (FOR NON-JUDICIAL)(See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL)(See Instructions)	
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)			
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution \$	In-kind contribution description
	Contributor address; City; State; Zip Code		
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)		Employer (FOR NON-JUDICIAL)(See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL)(See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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 A2: Sch: 4/7 Rpt: 25/31	
2 FILER NAME Darrell Brown		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 03/24/2026	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becky St. John	8 Amount of Contribution \$ 33.33	9 In-kind contribution description Meet and Greet Event
7 Contributor address; City; State; Zip Code 2702 W Kimball Grapevine TX 76051		Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) Housing Coordinator		11 Employer (FOR NON-JUDICIAL)(See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL)(See Instructions)	
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)			
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution \$	In-kind contribution description
	Contributor address; City; State; Zip Code		
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL)(See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL)(See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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 A2: Sch: 5/7 Rpt: 26/31	
2 FILER NAME Darrell Brown		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 03/24/2026	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rachel Wall	8 Amount of Contribution \$ 33.33	9 In-kind contribution description Meet and Greet Event
7 Contributor address; City; State; Zip Code 2922 Oak Forest Dr. Grapevine TX 76051		Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) Attorney		11 Employer (FOR NON-JUDICIAL)(See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL)(See Instructions)	
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)			
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution \$	In-kind contribution description
	Contributor address; City; State; Zip Code		
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)		Employer (FOR NON-JUDICIAL)(See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL)(See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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 A2: Sch: 6/7 Rpt: 27/31	
2 FILER NAME Darrell Brown		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 02/03/2026	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) One Eight Productions LLC	8 Amount of Contribution \$ 5,000.00	9 In-kind contribution description Videography and Video Editing Production
7 Contributor address; City; State; Zip Code 1023 Pheasnt Ridge Dr. Grapevine TX 76051		Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) Videographer		11 Employer (FOR NON-JUDICIAL)(See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL)(See Instructions)	
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)			
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution \$	In-kind contribution description
	Contributor address; City; State; Zip Code		
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL)(See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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 A2: Sch: 7/7 Rpt: 28/31	
2 FILER NAME Darrell Brown		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 02/12/2026	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Digemanse Fray Companies LLC, DBA The Fray Agency	8 Amount of Contribution \$ 1,500.00	9 In-kind contribution description Marketing Consulting and Graphic Design
7 Contributor address; City; State; Zip Code 601 S. Main Street, Ste 212 Grapevine, TX 76051		Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) Marketing Consultant		11 Employer (FOR NON-JUDICIAL)(See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL)(See Instructions)	
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)			
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution \$	In-kind contribution description
	Contributor address; City; State; Zip Code		
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)		Employer (FOR NON-JUDICIAL)(See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL)(See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>			

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)
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The instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/2 Rpt: 29/31	2 FILER NAME Darrell Brown	3 Filer ID (Ethics Commission Filers)
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4 Date 02/24/2026	5 Payee name Signs.com
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6 Amount (\$) 136.73	7 Payee address; 1550 South Gladiola St. <small>Check if individual's residence address.</small>	City; Salt Lake City	State; UT	Zip Code 87104
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Campaign Signs
	(c) <small>Check if travel outside of Texas. Complete Schedule T.</small> <small>Check if Austin, TX, officeholder living expense</small>	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 02/25/2026	Payee name Edwards & Patterson Signs
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Amount (\$) 2,235.18	Payee address; 203 S Belt Line Rd. <small>Check if individual's residence address.</small>	City; Irving	State; TX	Zip Code 75060
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Campaign Signs
	<small>Check if travel outside of Texas. Complete Schedule T.</small> <small>Check if Austin, TX, officeholder living expense</small>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 03/09/2026	Payee name Canva
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Amount (\$) 48.72	Payee address; 3212 E Cesar Chavez St. Ste. 1300 <small>Check if individual's residence address.</small>	City; Austin	State; TX	Zip Code 78702
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Campaign Images
	<small>Check if travel outside of Texas. Complete Schedule T.</small> <small>Check if Austin, TX, officeholder living expense</small>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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)
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The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/2 Rpt: 30/31	2 FILER NAME Darrell Brown	3 Filer ID (Ethics Commission Filers)
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4 Date 03/19/2026	5 Payee name Printplace.com
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6 Amount (\$) 951.63	7 Payee address; 1130 Avenue H East, <small>Check if individual's residence address.</small>	City; Arlington	State; TX	Zip Code 76011
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Campaign Signs
	(c) <small>Check if travel outside of Texas. Complete Schedule T.</small> <small>Check if Austin, TX, officeholder living expense</small>	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address; <small>Check if individual's residence address.</small>	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<small>Check if travel outside of Texas. Complete Schedule T.</small> <small>Check if Austin, TX, officeholder living expense</small>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
------	------------

Amount (\$)	Payee address; <small>Check if individual's residence address.</small>	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<small>Check if travel outside of Texas. Complete Schedule T.</small> <small>Check if Austin, TX, officeholder living expense</small>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 1/1 Rpt: 31/31	2 FILER NAME Darrell Brown	3 Filer ID (Ethics Commission Filers)
4 Date 02/18/2026	5 Payee name Amazon	
6 Amount (\$) 27.13 <small>Reimbursement from political contributions intended</small>	7 Payee address; 410 Terry Ave N <small>Check if individual's residence address.</small>	City; State; Zip Code Seattle WA 98109
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Thank you cards
	(c) <small>Check if travel outside of Texas. Complete Schedule T.</small>	<small>Check if Austin, TX, officeholder living expense</small>
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 03/04/2026	Payee name United States Postal Service	
Amount (\$) 78.00 <small>Reimbursement from political contributions intended</small>	Payee address; 1501 Hall Johnson Rd <small>Check if individual's residence address.</small>	City; State; Zip Code Colleyville TX 76034
8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Stamps
	<small>Check if travel outside of Texas. Complete Schedule T.</small>	<small>Check if Austin, TX, officeholder living expense</small>
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$) <small>Reimbursement from political contributions intended</small>	Payee address; <small>Check if individual's residence address.</small>	City; State; Zip Code
8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<small>Check if travel outside of Texas. Complete Schedule T.</small>	<small>Check if Austin, TX, officeholder living expense</small>
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