

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

DARRELL DAY FOR CONGRESS

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 01 / 2025 To: M M / D D / Y Y Y Y 12 / 31 / 2025

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	24185.56	33901.13
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	24185.56	33901.13
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	34813.60	45845.31
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	34813.60	45845.31
8. Cash on Hand at Close of Reporting Period (from Line 27)	141167.65	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	209802.32	

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov.

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

DARRELL DAY FOR CONGRESS

Report Covering the Period: From: / / To: / /

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	22940.43	31990.43
(ii) Unitemized.....	1220.13	1885.70
(iii) TOTAL of contributions from individuals ▶	24160.56	33876.13
(b) Political Party Committees.....	25.00	25.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	24185.56	33901.13
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	18000.00	58000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	18000.00	58000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	152.00	152.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	42337.56	92053.13

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	34813.60	45845.31
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	34813.60	45845.31

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	133643.69
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	42337.56
25. SUBTOTAL (add Line 23 and Line 24).....	175981.25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	34813.60
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	141167.65

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 5 OF 43
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
DARRELL DAY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Adolph, Chris, , ,

Mailing Address 10027 Silvertree Drl

City Dallas State TX Zip Code 75243

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 30 / 2025

Transaction ID : SA11AI.5157

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Bootwala, Muffi, , ,

Mailing Address 1222 E Arapaho Rd.
Suite 305

City Richardson State TX Zip Code 75080

FEC ID number of contributing federal political committee. C

Name of Employer Senior Care Occupation Administrator

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 05 / 2025

Transaction ID : SA11AI.5192

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Canon, Judith, , ,

Mailing Address 9715 Windham Dr.

City Dallas State TX Zip Code 75243

FEC ID number of contributing federal political committee. C

Name of Employer self Occupation Retired Teacher

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 12 / 2025

Transaction ID : SA11AI.5143

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1250.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: (check only one)		PAGE 6 OF 43	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DARRELL DAY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Cash, Miscellaneous, , ,

Mailing Address 1143 Rockingham Dr.

City Richardson	State TX	Zip Code 75080
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
267.01

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 04 / 2025

Transaction ID : SA11AI.5189

Amount of Each Receipt this Period
25.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Cate, Robyn, , ,

Mailing Address 17223 Hidden Glen

City Richardson	State TX	Zip Code 75080
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Sales	Occupation Finance
---------------------------	-----------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 08 / 2025

Transaction ID : SA11AI.5170

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Deskin, Linda, , ,

Mailing Address 613 Maydelle Ln.

City Garland	State TX	Zip Code 75042
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 03 / 2025

Transaction ID : SA11AI.5188

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	525.00
TOTAL This Period (last page this line number only)..... ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: (check only one)		PAGE 7 OF 43	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
DARRELL DAY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ellard, Linda, , ,

Mailing Address 13001 Hillcrest Lane

City Dallas	State TX	Zip Code 75240
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
6500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 12 / 2025

Transaction ID : SA11AI.5141

Amount of Each Receipt this Period
3200.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Ellard, Linda, , ,

Mailing Address 13001 Hillcrest Lane

City Dallas	State TX	Zip Code 75240
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FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
8000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 24 / 2025

Transaction ID : SA11AI.5183

Amount of Each Receipt this Period
1500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Erickson, Donald, , ,

Mailing Address 6554 Briarmeade

City Dallas	State TX	Zip Code 75252
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FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
240.15

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 12 / 2025

Transaction ID : SA11AI.5201

Amount of Each Receipt this Period
240.15

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	4940.15
TOTAL This Period (last page this line number only)..... ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 43
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
DARRELL DAY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Hairston, James, , ,

Mailing Address 3634 Granada

City Dallas State TX Zip Code 75205

FEC ID number of contributing federal political committee. C

Name of Employer CPI Foods Occupation President

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 260.25

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 10 / 2025

Transaction ID : SA11AI.5135

Amount of Each Receipt this Period
260.25

Memo Item

B. Full Name (Last, First, Middle Initial)
Hairston, James, , ,

Mailing Address 3634 Granada

City Dallas State TX Zip Code 75205

FEC ID number of contributing federal political committee. C

Name of Employer CPI Foods Occupation President

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 510.25

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 12 / 2025

Transaction ID : SA11AI.5203

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Klucinska, Agnieszka, , ,

Mailing Address 4700 Mckinney Ave., Apt 501

City Dallas State TX Zip Code 75205

FEC ID number of contributing federal political committee. C

Name of Employer VP Ortho FX Occupation Senior Executive

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 01 / 2025

Transaction ID : SA11AI.5162

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 760.25

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: (check only one)		PAGE 9 OF 43	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DARRELL DAY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Malladi, Preeti, , ,

Mailing Address 4100 W 15th

City Plano	State TX	Zip Code 75093
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FEC ID number of contributing federal political committee.

Name of Employer Self	Occupation Physician
--------------------------	-------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.5154

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
Matus, Elizabeth, , ,

Mailing Address 7317 Piedmont

City Dallas	State TX	Zip Code 75227
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FEC ID number of contributing federal political committee.

Name of Employer Hospital	Occupation Nurse
------------------------------	---------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.5196

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)
Nolan, Cyrena, , ,

Mailing Address 8 Glenshire Ct.

City Dallas	State TX	Zip Code 75225
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FEC ID number of contributing federal political committee.

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.5204

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 43
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
DARRELL DAY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Parigi, John, , ,

Mailing Address 6510 Warwick Dr.

City: Rockwall State: TX Zip Code: 75087

FEC ID number of contributing federal political committee: C

Name of Employer: Self Occupation: Executive Healthcare Services

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 09 / 2025

Transaction ID : SA11AI.5172

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Parmerlee, Diane, , ,

Mailing Address 13277 Hughes Lane

City: Dallas State: TX Zip Code: 75240

FEC ID number of contributing federal political committee: C

Name of Employer: self Occupation: Homemaker

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 24 / 2025

Transaction ID : SA11AI.5182

Amount of Each Receipt this Period
3500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Parmerlee, Mark, , ,

Mailing Address 13227 Hughes Lane

City: Dallas State: TX Zip Code: 75240

FEC ID number of contributing federal political committee: C

Name of Employer: Retired Occupation: Retired

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
7000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 12 / 2025

Transaction ID : SA11AI.5140

Amount of Each Receipt this Period
3500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

7500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 43
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
DARRELL DAY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Pearson, Megan, , ,

Mailing Address 210 S Windomere Ave.

City Dallas State TX Zip Code 75208

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Data

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 24 / 2025

Transaction ID : SA11AI.5180

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Pearson, Megan, , ,

Mailing Address 210 S Windomere Ave.

City Dallas State TX Zip Code 75208

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Data

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 10 / 2025

Transaction ID : SA11AI.5198

Amount of Each Receipt this Period
200.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Pettit, Dwayne, , ,

Mailing Address 7160 Cosgrove Dr

City Dallas State TX Zip Code 75231

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 17 / 2025

Transaction ID : SA11AI.5147

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 950.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 12 OF 43
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
DARRELL DAY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Rice, Sarah, , ,

Mailing Address 1307 Cherokee

City Richardson State TX Zip Code 75080

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Accountant

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 24 / 2025

Transaction ID : SA11AI.5184

Amount of Each Receipt this Period
3500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Summers, Brian, , ,

Mailing Address 2855 Maplewood Dr.

City High Ridge State MO Zip Code 63049

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 30 / 2025

Transaction ID : SA11AI.5160

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Tolliver, Catherine, , ,

Mailing Address 215 Long Canyon Ct

City Richardson State TX Zip Code 75080

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation Attorney

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 14 / 2025

Transaction ID : SA11AI.5144

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 4250.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 43
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
DARRELL DAY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Underhill, Bill, , ,

Mailing Address 9201 Moss Farm Ln.

City Dallas State TX Zip Code 75243

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 13 / 2025

Transaction ID : SA11AI.5175

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Wainer, Lawrence, , ,

Mailing Address 6137 Sul Ross Ln.

City Dallas State TX Zip Code 75114

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 25 / 2025

Transaction ID : SA11AI.5153

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	22940.43

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 43
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
DARRELL DAY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Boey, Maureen, , ,

Mailing Address 2729 Bechtol St.

City: Garland State: TX Zip Code: 75042

FEC ID number of contributing federal political committee: C

Name of Employer: Retired Occupation: Retired

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 05 / 2025

Transaction ID : SA11B.5194

Amount of Each Receipt this Period
 25.00

Memo Item

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee: C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee: C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	25.00
TOTAL This Period (last page this line number only)..... ▶	25.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 43
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
DARRELL DAY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DAY, DARRELL, , ,

Mailing Address 1303 Chickasaw Dr.

City Richardson State TX Zip Code 75080

FEC ID number of contributing federal political committee. **C** H2TX32182

Name of Employer Architect Search Occupation CEO

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
58000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 24 / 2025

Transaction ID : SA13A.5138

Amount of Each Receipt this Period
18000.00

Memo Item
Campaign Loan

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	18000.00
TOTAL This Period (last page this line number only).....▶	18000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 43
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
DARRELL DAY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Cash, Miscellaneous, , ,

Mailing Address 1143 Rockingham Dr.

City Richardson State TX Zip Code 75080

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
225.01

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 08 / 2025

Transaction ID : SA15.5171

Amount of Each Receipt this Period
75.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Cash, Miscellaneous, , ,

Mailing Address 1143 Rockingham Dr.

City Richardson State TX Zip Code 75080

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
242.01

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 19 / 2025

Transaction ID : SA15.5176

Amount of Each Receipt this Period
17.00

Memo Item

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	92.00
TOTAL This Period (last page this line number only).....▶	92.00

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 17 OF 43	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DARRELL DAY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Barrett, Jerry, , ,		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2025
Mailing Address 9118 Dusti Dr.		FEC Identification Number C
City Dallas	State TX	Zip Code 75243
Purpose of Disbursement		Amount of Each Disbursement this Period 150.00
Candidate Name	Category/ Type	Transaction ID : SB17.5043
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Bradford Inc.		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2025
Mailing Address 1143 Rockingham Blvd.		FEC Identification Number C
City Richardson	State TX	Zip Code 75080
Purpose of Disbursement		Amount of Each Disbursement this Period 300.00
Candidate Name	Category/ Type	Transaction ID : SB17.5110
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Browzed Sol Data Zapp.com		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2025
Mailing Address 555 W. Granada Blvd. Ste. G6		FEC Identification Number C
City Ormond Beach	State FL	Zip Code 32174
Purpose of Disbursement		Amount of Each Disbursement this Period 500.00
Candidate Name	Category/ Type	Transaction ID : SB17.5082
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	950.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 18 OF 43	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DARRELL DAY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Capital One		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2025
Mailing Address 2963 W 15th St. Suite 2981		FEC Identification Number C
City Plano	State TX	Zip Code 75075
Purpose of Disbursement		Amount of Each Disbursement this Period 2328.98
Candidate Name		Transaction ID : SB17.5112
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Capital One		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2025
Mailing Address 2963 W 15th St. Suite 2981		FEC Identification Number C
City Plano	State TX	Zip Code 75075
Purpose of Disbursement		Amount of Each Disbursement this Period 5351.04
Candidate Name		Transaction ID : SB17.5113
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. Capital One		Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2025
Mailing Address 2963 W 15th St. Suite 2981		FEC Identification Number C
City Plano	State TX	Zip Code 75075
Purpose of Disbursement		Amount of Each Disbursement this Period 59.00
Candidate Name		Transaction ID : SB17.5114
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....▶	7739.02
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 19 OF 43	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DARRELL DAY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Cate, Robyn, , ,		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2025
Mailing Address 17223 Hidden Glen		FEC Identification Number C
City Richardson	State TX	Zip Code 75080
Purpose of Disbursement		Amount of Each Disbursement this Period 450.00
Candidate Name		Transaction ID : SB17.5066
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Cate, Robyn, , ,		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2025
Mailing Address 17223 Hidden Glen		FEC Identification Number C
City Richardson	State TX	Zip Code 75080
Purpose of Disbursement		Amount of Each Disbursement this Period 450.00
Candidate Name		Transaction ID : SB17.5068
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. Cate, Robyn, , ,		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2025
Mailing Address 17223 Hidden Glen		FEC Identification Number C
City Richardson	State TX	Zip Code 75080
Purpose of Disbursement		Amount of Each Disbursement this Period 503.75
Candidate Name		Transaction ID : SB17.5069
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....▶	1403.75
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 20 OF 43	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DARRELL DAY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Cate, Robyn, , ,		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2025
Mailing Address 17223 Hidden Glen		FEC Identification Number C
City Richardson	State TX	Zip Code 75080
Purpose of Disbursement		Amount of Each Disbursement this Period 600.00
Candidate Name		Transaction ID : SB17.5070
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Cate, Robyn, , ,		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2025
Mailing Address 17223 Hidden Glen		FEC Identification Number C
City Richardson	State TX	Zip Code 75080
Purpose of Disbursement		Amount of Each Disbursement this Period 600.00
Candidate Name		Transaction ID : SB17.5072
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. Cate, Robyn, , ,		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2025
Mailing Address 17223 Hidden Glen		FEC Identification Number C
City Richardson	State TX	Zip Code 75080
Purpose of Disbursement		Amount of Each Disbursement this Period 766.00
Candidate Name		Transaction ID : SB17.5073
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....▶	1966.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 21 OF 43	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DARRELL DAY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Cate, Robyn, , ,		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2025
Mailing Address 17223 Hidden Glen		FEC Identification Number C
City Richardson	State TX	Zip Code 75080
Purpose of Disbursement		Amount of Each Disbursement this Period 555.00
Candidate Name		Transaction ID : SB17.5074
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Cate, Robyn, , ,		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2025
Mailing Address 17223 Hidden Glen		FEC Identification Number C
City Richardson	State TX	Zip Code 75080
Purpose of Disbursement		Amount of Each Disbursement this Period 490.00
Candidate Name		Transaction ID : SB17.5075
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Cate, Robyn, , ,		Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2025
Mailing Address 17223 Hidden Glen		FEC Identification Number C
City Richardson	State TX	Zip Code 75080
Purpose of Disbursement		Amount of Each Disbursement this Period 600.00
Candidate Name		Transaction ID : SB17.5076
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	1645.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 43			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DARRELL DAY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Cate, Robyn, , ,			Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2025		
Mailing Address 17223 Hidden Glen					
City Richardson	State TX	Zip Code 75080	FEC Identification Number C		
Purpose of Disbursement			Amount of Each Disbursement this Period 450.00		
Candidate Name			Transaction ID : SB17.5077		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>		
State: _____	District: _____				

Full Name (Last, First, Middle Initial) B. Cate, Robyn, , ,			Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2025		
Mailing Address 17223 Hidden Glen					
City Richardson	State TX	Zip Code 75080	FEC Identification Number C		
Purpose of Disbursement			Amount of Each Disbursement this Period 450.00		
Candidate Name			Transaction ID : SB17.5078		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>		
State: _____	District: _____				

Full Name (Last, First, Middle Initial) C. Cate, Robyn, , ,			Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2025		
Mailing Address 17223 Hidden Glen					
City Richardson	State TX	Zip Code 75080	FEC Identification Number C		
Purpose of Disbursement			Amount of Each Disbursement this Period 450.00		
Candidate Name			Transaction ID : SB17.5079		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>		
State: _____	District: _____				

SUBTOTAL of Disbursements This Page (optional).....▶	1350.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: (check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
DARRELL DAY FOR CONGRESS

A. Culpepper Steak House

Full Name (Last, First, Middle Initial)

Mailing Address 309B I-30 Frontage Rd.

City Rockwall State TX Zip Code 75087

Purpose of Disbursement Meals

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 08 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 3606.30

Transaction ID : SB17.5120

Memo Item

B. Dallas GOP

Full Name (Last, First, Middle Initial)

Mailing Address 11617 N. Central Expressway Suite 240

City Dallas State TX Zip Code 75225

Purpose of Disbursement Advertising

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 14 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 2249.66

Transaction ID : SB17.5080

Memo Item

C. DLX for Small Business

Full Name (Last, First, Middle Initial)

Mailing Address 801 S. Marquette Ave.

City Minneapolis State MN Zip Code 55401

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 23 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 239.50

Transaction ID : SB17.5099

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	6095.46
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 43			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DARRELL DAY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Jackson, Everett, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2025		
Mailing Address 132 Meadowcrest			FEC Identification Number C		
City Desoto	State TX	Zip Code 75115	Amount of Each Disbursement this Period 220.00		
Purpose of Disbursement Printing		Category/ Type	Transaction ID : SB17.5048		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Johnson, Amanda, , ,			Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2025		
Mailing Address 1515 N. Waterview Dr.			FEC Identification Number C		
City Richardson	State TX	Zip Code 75080	Amount of Each Disbursement this Period 120.00		
Purpose of Disbursement		Category/ Type	Transaction ID : SB17.5124		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. Johnson, Amanda, , ,			Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2025		
Mailing Address 1515 N. Waterview Dr.			FEC Identification Number C		
City Richardson	State TX	Zip Code 75080	Amount of Each Disbursement this Period 120.00		
Purpose of Disbursement		Category/ Type	Transaction ID : SB17.5125		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	460.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 25 OF 43	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DARRELL DAY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Johnson, Amanda, , ,			Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2025	
Mailing Address 1515 N. Waterview Dr.			FEC Identification Number C	
City Richardson	State TX	Zip Code 75080	Amount of Each Disbursement this Period 150.00	
Purpose of Disbursement			Transaction ID : SB17.5127	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Johnson, Amanda, , ,			Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2025	
Mailing Address 1515 N. Waterview Dr.			FEC Identification Number C	
City Richardson	State TX	Zip Code 75080	Amount of Each Disbursement this Period 300.00	
Purpose of Disbursement			Transaction ID : SB17.5128	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. Khan, Arman, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2025	
Mailing Address 9232 Chimney Corner Ln.			FEC Identification Number C	
City Dallas	State TX	Zip Code 75243	Amount of Each Disbursement this Period 480.00	
Purpose of Disbursement			Transaction ID : SB17.5084	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	930.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: (check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
DARRELL DAY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Khan, Arman, , ,		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2025
Mailing Address 9232 Chimney Corner Ln.		FEC Identification Number C
City Dallas	State TX	Zip Code 75243
Purpose of Disbursement		Amount of Each Disbursement this Period 388.18
Candidate Name		Transaction ID : SB17.5085
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Khan, Arman, , ,		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2025
Mailing Address 9232 Chimney Corner Ln.		FEC Identification Number C
City Dallas	State TX	Zip Code 75243
Purpose of Disbursement		Amount of Each Disbursement this Period 600.00
Candidate Name		Transaction ID : SB17.5086
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Khan, Arman, , ,		Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2025
Mailing Address 9232 Chimney Corner Ln.		FEC Identification Number C
City Dallas	State TX	Zip Code 75243
Purpose of Disbursement		Amount of Each Disbursement this Period 400.00
Candidate Name		Transaction ID : SB17.5087
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	1388.18
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 43	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DARRELL DAY FOR CONGRESS

Full Name (Last, First, Middle Initial)			Date of Disbursement	
A. Phoneburner			M M / D D / Y Y Y Y 10 / 17 / 2025	
Mailing Address 1968 S. Coast Hwy. Suite 1800			FEC Identification Number	
City Laguna Beach	State CA	Zip Code 92651	C	
Purpose of Disbursement Marketing			Amount of Each Disbursement this Period	
Candidate Name			695.21	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Transaction ID : SB17.5090	
Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			<input type="checkbox"/> Memo Item	
State: District:				

Full Name (Last, First, Middle Initial)			Date of Disbursement	
B. Phoneburner			M M / D D / Y Y Y Y 10 / 21 / 2025	
Mailing Address 1968 S. Coast Hwy. Suite 1800			FEC Identification Number	
City Laguna Beach	State CA	Zip Code 92651	C	
Purpose of Disbursement			Amount of Each Disbursement this Period	
Candidate Name			9.59	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Transaction ID : SB17.5092	
Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			<input type="checkbox"/> Memo Item	
State: District:				

Full Name (Last, First, Middle Initial)			Date of Disbursement	
C. Rider, Dean, , ,			M M / D D / Y Y Y Y 10 / 03 / 2025	
Mailing Address 6050 N. Central Expressway #2208			FEC Identification Number	
City Dalllas	State TX	Zip Code 75206	C	
Purpose of Disbursement Outreach			Amount of Each Disbursement this Period	
Candidate Name			500.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Transaction ID : SB17.5052	
Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			<input type="checkbox"/> Memo Item	
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	1204.80
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 43	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DARRELL DAY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Rider, Dean, , ,		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2025
Mailing Address 6050 N. Central Expressway #2208		FEC Identification Number C
City Dalllas	State TX	Zip Code 75206
Purpose of Disbursement		Amount of Each Disbursement this Period 400.00
Candidate Name		Transaction ID : SB17.5053
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Rider, Dean, , ,		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2025
Mailing Address 6050 N. Central Expressway #2208		FEC Identification Number C
City Dalllas	State TX	Zip Code 75206
Purpose of Disbursement		Amount of Each Disbursement this Period 479.30
Candidate Name		Transaction ID : SB17.5054
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. Rider, Dean, , ,		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2025
Mailing Address 6050 N. Central Expressway #2208		FEC Identification Number C
City Dalllas	State TX	Zip Code 75206
Purpose of Disbursement		Amount of Each Disbursement this Period 400.00
Candidate Name		Transaction ID : SB17.5055
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....▶	1279.30
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 29 OF 43	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DARRELL DAY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Rider, Dean, , ,		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2025
Mailing Address 6050 N. Central Expressway #2208		FEC Identification Number C
City Dalllas	State TX	Zip Code 75206
Purpose of Disbursement		Amount of Each Disbursement this Period 350.00
Candidate Name		Transaction ID : SB17.5056
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Rider, Dean, , ,		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2025
Mailing Address 6050 N. Central Expressway #2208		FEC Identification Number C
City Dalllas	State TX	Zip Code 75206
Purpose of Disbursement		Amount of Each Disbursement this Period 350.00
Candidate Name		Transaction ID : SB17.5057
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Rider, Dean, , ,		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2025
Mailing Address 6050 N. Central Expressway #2208		FEC Identification Number C
City Dalllas	State TX	Zip Code 75206
Purpose of Disbursement		Amount of Each Disbursement this Period 350.00
Candidate Name		Transaction ID : SB17.5058
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	1050.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 30 OF 43	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DARRELL DAY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Rider, Dean, , ,		Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2025
Mailing Address 6050 N. Central Expressway #2208		FEC Identification Number C
City Dallahs	State TX	Zip Code 75206
Purpose of Disbursement		Amount of Each Disbursement this Period 400.00
Candidate Name	Category/Type	Transaction ID : SB17.5059
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Rider, Dean, , ,		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2025
Mailing Address 6050 N. Central Expressway #2208		FEC Identification Number C
City Dallahs	State TX	Zip Code 75206
Purpose of Disbursement		Amount of Each Disbursement this Period 350.00
Candidate Name	Category/Type	Transaction ID : SB17.5060
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Rider, Dean, , ,		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2025
Mailing Address 6050 N. Central Expressway #2208		FEC Identification Number C
City Dallahs	State TX	Zip Code 75206
Purpose of Disbursement		Amount of Each Disbursement this Period 350.00
Candidate Name	Category/Type	Transaction ID : SB17.5061
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	1100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 31 OF 43	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DARRELL DAY FOR CONGRESS

A. Rider, Dean, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 6050 N. Central Expressway #2208

City Dalllas State TX Zip Code 75206

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 19 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 350.00

Transaction ID : SB17.5062

Memo Item

B. Rockwall County Republicans

Full Name (Last, First, Middle Initial)

Mailing Address 112 Kenway St.

City Rockwall State TX Zip Code 75087

Purpose of Disbursement Advertising

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 10 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 900.00

Transaction ID : SB17.5047

Memo Item

C. Texas GOP

Full Name (Last, First, Middle Initial)

Mailing Address 807 Brazos

City Austin State TX Zip Code 78701

Purpose of Disbursement Filing Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 11 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 3125.00

Transaction ID : SB17.5122

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 4375.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 43			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DARRELL DAY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. The Pizza Dude		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2025
Mailing Address 17390 Preston Rd. Suite 263		FEC Identification Number C
City Dallas	State TX	Zip Code 75252
Purpose of Disbursement		Amount of Each Disbursement this Period 386.50
Candidate Name		Transaction ID : SB17.5105
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Vistaprint		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2025
Mailing Address Logistics Dr.		FEC Identification Number C
City Dallas	State TX	Zip Code 75241
Purpose of Disbursement		Amount of Each Disbursement this Period 255.66
Candidate Name		Transaction ID : SB17.5101
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Wix.com		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2025
Mailing Address 100 Main St.		FEC Identification Number C
City Tel Aviv	State NY	Zip Code 10001
Purpose of Disbursement		Amount of Each Disbursement this Period 202.31
Candidate Name		Transaction ID : SB17.5103
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	844.47
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 33 OF 43	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DARRELL DAY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Wix.com			Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2025	
Mailing Address 100 Main St.			FEC Identification Number C	
City Tel Aviv	State NY	Zip Code 10001	Amount of Each Disbursement this Period 136.39	
Purpose of Disbursement			Transaction ID : SB17.5109	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B.			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement			<input type="checkbox"/> Memo Item	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement			<input type="checkbox"/> Memo Item	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	136.39
TOTAL This Period (last page this line number only).....▶	33917.37

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **DARRELL DAY FOR CONGRESS** Transaction ID : **SC/10.4281**

LOAN SOURCE Full Name (Last, First, Middle Initial) DARRELL DAY FOR CONGRESS		<input type="checkbox"/> Memo Item	Election: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1303 CHICKASAW			
City RICHARDSON	State TX	ZIP Code 75080	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 15000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 15000.00
-------------------------------------	------------------------------------	---

TERMS	Date Incurred M M / D D / Y Y Y Y 12 / 19 / 2023	Date Due M M / D D / Y Y Y Y 12/31/2099	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	15000.00
TOTALS This Period (last page in this line only).....▶	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **DARRELL DAY FOR CONGRESS** Transaction ID : **SC/10.4160**

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item DAY, DARRELL, , ,		Election: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1303 Chickasaw Dr.		<input checked="" type="checkbox"/> Personal Funds of the Candidate
City Richardson	State TX	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
10000.00	0.00	10000.00

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 12 / 22 / 2022	M M / D D / Y Y Y Y 12/31/2028	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	10000.00
TOTALS This Period (last page in this line only).....▶	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **DARRELL DAY FOR CONGRESS** Transaction ID : **SC/10.4161**

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item DAY, DARRELL, , ,		Election: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1303 Chickasaw Dr.		<input type="checkbox"/> Personal Funds of the Candidate
City Richardson	State TX	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
10000.00	0.00	10000.00

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 01 / 21 / 2023	M M / D D / Y Y Y Y / / 12/31/2028	0.00 % (apr)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional).....▶	10000.00
TOTALS This Period (last page in this line only).....▶	<input type="text"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **DARRELL DAY FOR CONGRESS** Transaction ID : **SC/10.4162**

LOAN SOURCE Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2022
DAY, DARRELL, , ,			<input checked="" type="checkbox"/> Primary
Mailing Address 1303 Chickasaw Dr.			<input type="checkbox"/> General
City Richardson		State TX	ZIP Code 75080
			<input checked="" type="checkbox"/> Personal Funds of the Candidate
Original Amount of Loan		Cumulative Payment To Date	Balance Outstanding at Close of This Period
10802.32		0.00	10802.32

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 02 / 10 / 2023	M M / D D / Y Y Y Y 12/31/2028	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	10802.32
TOTALS This Period (last page in this line only).....▶	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **DARRELL DAY FOR CONGRESS** Transaction ID : **SC/10.4163**

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2024
DAY, DARRELL, , ,		<input checked="" type="checkbox"/> Primary
Mailing Address 1303 Chickasaw Dr.		<input type="checkbox"/> General
City Richardson		<input type="checkbox"/> Other (specify) ▼
State TX	ZIP Code 75080	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 40000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 40000.00
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TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	06 / 29 / 2023	12/31/2028	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....▶	40000.00
TOTALS This Period (last page in this line only).....▶	[]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **DARRELL DAY FOR CONGRESS** Transaction ID : **SC/10.4175**

LOAN SOURCE Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2024
DAY, DARRELL, , ,			<input checked="" type="checkbox"/> Primary
Mailing Address 1303 Chickasaw Dr.			<input type="checkbox"/> General
City Richardson		State TX	<input type="checkbox"/> Other (specify) ▼
ZIP Code 75080		<input checked="" type="checkbox"/> Personal Funds of the Candidate	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
55000.00	0.00	55000.00

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	09 / 28 / 2023	1/1/2099	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	55000.00
TOTALS This Period (last page in this line only).....▶	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **DARRELL DAY FOR CONGRESS** Transaction ID : **SC/10.4546**

LOAN SOURCE Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2024
DAY, DARRELL, , ,			<input type="checkbox"/> Primary
Mailing Address 1303 Chickasaw Dr.			<input checked="" type="checkbox"/> General
			<input type="checkbox"/> Other (specify) ▼
City Richardson	State TX	ZIP Code 75080	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 8000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 8000.00
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TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 05 / 20 / 2024	M M / D D / Y Y Y Y 12/31/2099	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	8000.00
TOTALS This Period (last page in this line only).....▶	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **DARRELL DAY FOR CONGRESS** Transaction ID : **SC/10.4547**

LOAN SOURCE Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2024
DAY, DARRELL, , ,			<input type="checkbox"/> Primary
Mailing Address 1303 Chickasaw Dr.			<input checked="" type="checkbox"/> General
			<input type="checkbox"/> Other (specify) ▼
City Richardson	State TX	ZIP Code 75080	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 3000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 3000.00
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TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	06 / 25 / 2024	12/31/2099	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	3000.00
TOTALS This Period (last page in this line only).....▶	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **DARRELL DAY FOR CONGRESS** Transaction ID : **SC/10.5028**

LOAN SOURCE Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2026
DAY, DARRELL, , ,			<input checked="" type="checkbox"/> Primary
Mailing Address 1303 Chickasaw Dr.			<input type="checkbox"/> General
City Richardson		State TX	ZIP Code 75080
			<input checked="" type="checkbox"/> Personal Funds of the Candidate
			<input type="checkbox"/> Other (specify) ▼

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
40000.00	0.00	40000.00

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	09 / 11 / 2025	12/31/2099	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	40000.00
TOTALS This Period (last page in this line only).....▶	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **DARRELL DAY FOR CONGRESS** Transaction ID : **SC/10.5138**

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item DAY, DARRELL, , ,		Election: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1303 Chickasaw Dr.		<input checked="" type="checkbox"/> Personal Funds of the Candidate
City Richardson	State TX	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
18000.00	0.00	18000.00

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 11 / 24 / 2025	M M / D D / Y Y Y Y 12/31/99	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	18000.00
TOTALS This Period (last page in this line only).....▶	209802.32

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.