

# 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: 5								
3 CANDIDATE / OFFICEHOLDER NAME	<div style="display: flex; justify-content: space-between;"> <span>MS / MRS / MR</span> <span>FIRST</span> <span>MI</span> </div> <div style="text-align: center; margin-top: 5px;">Dynette</div> <hr style="border: 0.5px dotted black;"/> <div style="display: flex; justify-content: space-between;"> <span>NICKNAME</span> <span>LAST</span> <span>SUFFIX</span> </div> <div style="text-align: center; margin-top: 5px;">Davis</div>	<b>OFFICE USE ONLY</b>  <div style="font-size: 1.2em; margin-top: 10px;">Date Received</div> <div style="font-size: 2em; margin-top: 10px;">1/24/26</div>									
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	<div style="display: flex; justify-content: space-between;"> <span>ADDRESS / PO BOX;</span> <span>APT / SUITE #;</span> <span>CITY;</span> <span>STATE;</span> <span>ZIP CODE</span> </div> <div style="margin-top: 5px;"> <span>3401 Paradise Valley Dr.</span> <span>Plano</span> <span>TX</span> <span>75025</span> </div>	<div style="font-size: 1.2em; margin-top: 10px;">Date Hand-delivered or Date Postmarked</div> <div style="font-size: 2em; margin-top: 10px;">1/24/26</div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <span>Receipt #</span> <span>Amount \$</span> </div> <div style="margin-top: 10px;"> <span>Date Processed</span> <span>1/30/26</span> </div> <div style="margin-top: 10px;"> <span>Date Imaged</span> <span>1/30/26</span> </div>									
5 CANDIDATE / OFFICEHOLDER PHONE	<div style="display: flex; justify-content: space-between;"> <span>AREA CODE</span> <span>PHONE NUMBER</span> <span>EXTENSION</span> </div> <div style="margin-top: 5px;"> <span>( 773 )</span> <span>575-8001</span> </div>										
6 CAMPAIGN TREASURER NAME	<div style="display: flex; justify-content: space-between;"> <span>MS / MRS / MR</span> <span>FIRST</span> <span>MI</span> </div> <div style="text-align: center; margin-top: 5px;">Kimberly</div> <hr style="border: 0.5px dotted black;"/> <div style="display: flex; justify-content: space-between;"> <span>NICKNAME</span> <span>LAST</span> <span>SUFFIX</span> </div> <div style="text-align: center; margin-top: 5px;">Evans</div>										
7 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	<div style="display: flex; justify-content: space-between;"> <span>STREET ADDRESS (NO PO BOX PLEASE);</span> <span>APT / SUITE #;</span> <span>CITY;</span> <span>STATE;</span> <span>ZIP CODE</span> </div> <div style="margin-top: 5px;"> <span>12702 Winding Creek Dr.</span> <span>Frisco</span> <span>TX</span> <span>75035</span> </div>										
8 CAMPAIGN TREASURER PHONE	<div style="display: flex; justify-content: space-between;"> <span>AREA CODE</span> <span>PHONE NUMBER</span> <span>EXTENSION</span> </div> <div style="margin-top: 5px;"> <span>( 972 )</span> <span>938-6350</span> </div>										
9 REPORT TYPE	<div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"><input checked="" type="checkbox"/> January 15</div> <div style="width: 50%;"><input type="checkbox"/> 30th day before election</div> <div style="width: 50%;"><input type="checkbox"/> Runoff</div> <div style="width: 50%;"><input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)</div> <div style="width: 50%;"><input type="checkbox"/> July 15</div> <div style="width: 50%;"><input type="checkbox"/> 8th day before election</div> <div style="width: 50%;"><input type="checkbox"/> Exceeded Modified Reporting Limit</div> <div style="width: 50%;"><input type="checkbox"/> Final Report (Attach C/OH - FR)</div> </div>										
10 PERIOD COVERED	<div style="display: flex; justify-content: space-between;"> <div> Month    Day    Year  07    01    2025 </div> <div>THROUGH</div> <div> Month    Day    Year  12    31    2025 </div> </div>										
11 ELECTION	<div style="display: flex; justify-content: space-between;"> <div> ELECTION DATE  Month    Day    Year  05    02    2026 </div> <div> ELECTION TYPE  <input type="checkbox"/> Primary    <input type="checkbox"/> Runoff    <input type="checkbox"/> Other Description  <input checked="" type="checkbox"/> General    <input type="checkbox"/> Special </div> </div>										
12 OFFICE	OFFICE HELD (if any)  Frisco ISD Place #4	13 OFFICE SOUGHT (if known)  Same									
14 NOTICE FROM POLITICAL COMMITTEE(S)  <input type="checkbox"/> Additional Pages	<div style="font-size: 0.8em;">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.</div> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <tr> <td style="width: 15%; padding: 5px;">COMMITTEE TYPE</td> <td style="padding: 5px;">COMMITTEE NAME</td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> GENERAL</td> <td style="padding: 5px;">COMMITTEE ADDRESS</td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> SPECIFIC</td> <td style="padding: 5px;">COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td style="padding: 5px;"></td> <td style="padding: 5px;">COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table>			COMMITTEE TYPE	COMMITTEE NAME	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME		COMMITTEE CAMPAIGN TREASURER ADDRESS
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

15 C/OH NAME

Davis, Dynette

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)

\$ 1325.00

2. TOTAL POLITICAL CONTRIBUTIONS  
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 0

EXPENDITURE  
TOTALS

3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.

\$ 0

4. TOTAL POLITICAL EXPENDITURES

\$ 0

CONTRIBUTION  
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY  
OF REPORTING PERIOD

\$ 5,595.45

OUTSTANDING  
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE  
LAST DAY OF THE REPORTING PERIOD

\$ 0

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.

*Dynette A. Davis*

Signature of Candidate or Officeholder

Please complete either option below:



(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Dynette Davis this the 24th day of January.

20 26 to certify which, witness my hand and seal of office.

*Michelle Arellano*

Michelle Arellano

Notary

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

19 FILER NAME

Davis, Dynette

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS  
NAME OF SCHEDULE

SUBTOTAL  
AMOUNT

1.	<input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 1325.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A1: 2	
2 FILER NAME Davis, Dynette				3 Filer ID (Ethics Commission Filers)	
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cindy Hons			7 Amount of contribution (\$) \$250.00	
	6 Contributor address; City; State; Zip Code 7145 Yellowstone Drive Frisco TX 75033				
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chad Rudy			Amount of contribution (\$) \$500.00	
	Contributor address; City; State; Zip Code 12186 Kennedale Dr. Frisco TX 75033				
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jamell Meeks			Amount of contribution (\$) \$100.00	
	Contributor address; City; State; Zip Code 11824 South Indiana Chicago IL 60628				
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mica Coleman			Amount of contribution (\$) \$	
	Contributor address; City; State; Zip Code 5800 Allemong Drive Matteson IL 60443				
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.					



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Davis, Dynette

3 Filer ID (Ethics Commission Filers)

4 Date

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Melissa Trezza

7 Amount of contribution (\$)

\$25.00

6 Contributor address;

City;

State;

Zip Code

3204 Duval Dr

Plano

TX

75024

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Keith Shipman

Amount of contribution (\$)

\$150.00

Contributor address;

City;

State;

Zip Code

10141 Calvery Court

Frisco

TX

75035

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Dana Burns

Amount of contribution (\$)

\$150.00

Contributor address;

City;

State;

Zip Code

6018 Wallis Dr.

Frisco

TX

75033

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.