

**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	2 Total pages filed: 20		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Carleen	MI	OFFICE USE ONLY Date Received		
	NICKNAME	LAST Dark-Bays	SUFFIX	RECEIVED		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; P.O. Box 6206			ZIP CODE		
	Tyler, TX 75711			Date Hand-delivered or Date Postmarked JAN 14 2026		
				Receipt # <input type="text"/> Amount CITY CLERK'S OFFICE Date Processed City of Tyler		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Ray	MI			
	NICKNAME	LAST McKinney	SUFFIX			
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 1350 Dominion Plaza		APT / SUITE #;	CITY;	STATE;	ZIP CODE
	Tyler, TX 75703					
7 CAMPAIGN TREASURER PHONE	AREA CODE (903)	PHONE NUMBER 283-8643	EXTENSION			
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)		
	<input type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded modified reporting limit	<input type="checkbox"/> Final Report (Attach C/OH-FR)		
9 PERIOD COVERED	Month 07/01/2025	Day	Year	Month 12/31/2025	Day	Year
10 ELECTION	ELECTION DATE Month 05/02/2026		ELECTION TYPE <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Runoff <input type="checkbox"/> Special		<input type="checkbox"/> Other	
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT (if known) Tyler City Council District 6		

GO TO PAGE 2

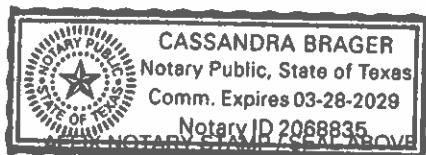
**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

FORM C/OH
COVER SHEET PG 2
2 of 21

13 C / OH NAME	Dark-Bays, Carleen		14 Filer ID															
15 NOTICE FROM POLITICAL COMMITTEE(S)	<p>This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.</p> <table border="1"> <tr> <td><input type="checkbox"/> Additional Pages</td> <td>COMMITTEE TYPE</td> <td>COMMITTEE NAME</td> </tr> <tr> <td></td> <td><input type="checkbox"/> GENERAL</td> <td></td> </tr> <tr> <td></td> <td><input type="checkbox"/> SPECIFIC</td> <td>COMMITTEE ADDRESS</td> </tr> <tr> <td></td> <td></td> <td>COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td></td> <td></td> <td>COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table>			<input type="checkbox"/> Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		<input type="checkbox"/> GENERAL			<input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS			COMMITTEE CAMPAIGN TREASURER NAME			COMMITTEE CAMPAIGN TREASURER ADDRESS
<input type="checkbox"/> Additional Pages	COMMITTEE TYPE	COMMITTEE NAME																
	<input type="checkbox"/> GENERAL																	
	<input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS																
		COMMITTEE CAMPAIGN TREASURER NAME																
		COMMITTEE CAMPAIGN TREASURER ADDRESS																
16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)		\$ 0.00															
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 10,504.00															
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		\$ 0.00															
	4. TOTAL POLITICAL EXPENDITURES		\$ 12,681.20															
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 2,397.60															
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 200.00															

17 AFFIDAVIT

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.



Carleen Dark-Bays

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Carleen Dark Bays, this the 14th day of January, 2026, to certify which, witness my hand and seal of office.

Cassandra Brager

Signature of officer administering

Cassandra Brager

Printed name of officer administering

Notary

Title of officer administering oath

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3**

3 of 21

18 FILER NAME Dark-Bays, Carleen	19 Filer ID
20 SCHEDULE SUBTOTALS	
NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 10,504.00
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. <input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 200.00
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 8,306.40
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9. <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 4,374.80
10. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/6 Rpt: 4/20
2 FILER NAME Dark-Bays, Carleen		3 Filer ID
4 Date 10/04/2025	5 Full name of contributor Baker, Hank 6 Contributor address; City; State; Zip Code 17730 Southpoint Rd. Whitehouse, TX 75791	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/29/2025	Full name of contributor Bays, Glenda Contributor address; City; State; Zip Code 21218 Metallic Blue Dr. Cypress, TX 77433	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/08/2025	Full name of contributor Bejcek, Keith Contributor address; City; State; Zip Code 5431 Andover Dr. Tyler, TX 75707	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2025	Full name of contributor Brookshire, Bruce Contributor address; City; State; Zip Code 220 Glenhaven Dr. Tyler, TX 75701	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/07/2025	Full name of contributor Carmichael, Mike Contributor address; City; State; Zip Code 2728 Old Bullard Rd. Tyler, TX 75701	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/6 Rpt: 5/20
2 FILER NAME Dark-Bays, Carleen		3 Filer ID
4 Date 09/30/2025	5 Full name of contributor Conover, Ted 6 Contributor address; City; State; Zip Code 6603 Gleneagles Dr. Tyler, TX 75703	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/29/2025	Full name of contributor Curtis, Brad Contributor address; City; State; Zip Code 3117 Dinah Lane Tyler, TX 75701	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/12/2025	Full name of contributor Dacus, Shannon Contributor address; City; State; Zip Code 18654 CR 418 Tyler, TX 75704	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/27/2025	Full name of contributor Dark, Joe Contributor address; City; State; Zip Code 18065 CR 122 Tyler, TX 75703	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/16/2025	Full name of contributor Don Warren for Mayor Contributor address; City; State; Zip Code P.O. Box 6007 Tyler, TX 75711	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>		<p>1 Total pages Schedule A1: Sch: 3/6 Rpt: 6/20</p>
<p>2 FILER NAME Dark-Bays, Carleen</p>		<p>3 Filer ID</p>
<p>4 Date 08/20/2025</p>	<p>5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Durkin, Mark</p> <p>6 Contributor address; City; State; Zip Code 1448 N Rochester Dr.</p> <p>Gilbert, AZ 85234</p>	<p>7 Amount of Contribution (\$) \$100.00</p>
<p>8 Principal occupation / Job title (See Instructions)</p>		<p>9 Employer (See Instructions)</p>
<p>Date 09/30/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Hood, Renee</p> <p>Contributor address; City; State; Zip Code 1410 Woodlands Dr.</p> <p>Tyler, TX 75703</p>	<p>Amount of Contribution (\$) \$250.00</p>
<p>Principal occupation / Job title (See Instructions)</p>		<p>Employer (See Instructions)</p>
<p>Date 12/30/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Jackson, Laura</p> <p>Contributor address; City; State; Zip Code 1700 Rose Rd.</p> <p>Tyler, TX 75701</p>	<p>Amount of Contribution (\$) \$100.00</p>
<p>Principal occupation / Job title (See Instructions)</p>		<p>Employer (See Instructions)</p>
<p>Date 10/15/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Johnson, Joshua</p> <p>Contributor address; City; State; Zip Code 402 Bluebonnet Dr.</p> <p>Tyler, TX 75701</p>	<p>Amount of Contribution (\$) \$250.00</p>
<p>Principal occupation / Job title (See Instructions)</p>		<p>Employer (See Instructions)</p>
<p>Date 12/26/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Leatherwood, Dawn</p> <p>Contributor address; City; State; Zip Code 229 S Bonner</p> <p>Tyler, TX 75702</p>	<p>Amount of Contribution (\$) \$1,000.00</p>
<p>Principal occupation / Job title (See Instructions)</p>		<p>Employer (See Instructions)</p>

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>		<p>1 Total pages Schedule A1: Sch: 4/6 Rpt: 7/20</p>
<p>2 FILER NAME Dark-Bays, Carleen</p>		<p>3 Filer ID</p>
<p>4 Date 09/30/2025</p>	<p>5 Full name of contributor Morris, Steven</p> <p>6 Contributor address; City; State; Zip Code 12917 CR 1139 Tyler, TX 75709</p>	<p>7 Amount of Contribution (\$) \$600.00</p>
<p>8 Principal occupation / Job title (See Instructions)</p>		<p>9 Employer (See Instructions)</p>
<p>Date 10/01/2025</p>	<p>Full name of contributor PABS Management Inc.</p> <p>Contributor address; City; State; Zip Code 110 N College Ave. Suite 1404 Tyler, TX 75702</p>	<p>Amount of Contribution (\$) \$1,004.00</p>
<p>Principal occupation / Job title (See Instructions)</p>		<p>Employer (See Instructions)</p>
<p>Date 09/23/2025</p>	<p>Full name of contributor Patterson, Russell</p> <p>Contributor address; City; State; Zip Code 100 E Ferguson St. Tyler, TX 75702</p>	<p>Amount of Contribution (\$) \$500.00</p>
<p>Principal occupation / Job title (See Instructions)</p>		<p>Employer (See Instructions)</p>
<p>Date 10/01/2025</p>	<p>Full name of contributor Perry, Stephanie</p> <p>Contributor address; City; State; Zip Code 19272 Hidden Lake Dr. Tyler, TX 75703</p>	<p>Amount of Contribution (\$) \$100.00</p>
<p>Principal occupation / Job title (See Instructions)</p>		<p>Employer (See Instructions)</p>
<p>Date 10/06/2025</p>	<p>Full name of contributor Perry, Stephanie</p> <p>Contributor address; City; State; Zip Code 19272 Hidden Lake Dr. Tyler, TX 75703</p>	<p>Amount of Contribution (\$) \$100.00</p>
<p>Principal occupation / Job title (See Instructions)</p>		<p>Employer (See Instructions)</p>

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>		<p>1 Total pages Schedule A1: Sch: 5/6 Rpt: 8/20</p>
<p>2 FILER NAME Dark-Bays, Carleen</p>		<p>3 Filer ID</p>
<p>4 Date 10/04/2025</p>	<p>5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Ream, Marji</p> <p>6 Contributor address; City; State; Zip Code 3920 Chester Dr. Tyler, TX 75701</p>	<p>7 Amount of Contribution (\$) \$250.00</p>
<p>8 Principal occupation / Job title (See Instructions)</p>		<p>9 Employer (See Instructions)</p>
<p>Date 10/23/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Root, Brad</p> <p>Contributor address; City; State; Zip Code 12510 CR 495 Tyler, TX 75706</p>	<p>Amount of Contribution (\$) \$100.00</p>
<p>Principal occupation / Job title (See Instructions)</p>		<p>Employer (See Instructions)</p>
<p>Date 07/31/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Stokes, Julie</p> <p>Contributor address; City; State; Zip Code 7250 Crosswater Ave. Tyler, TX 75703</p>	<p>Amount of Contribution (\$) \$100.00</p>
<p>Principal occupation / Job title (See Instructions)</p>		<p>Employer (See Instructions)</p>
<p>Date 10/08/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Westbrook, Bob</p> <p>Contributor address; City; State; Zip Code 4116 Pinecreek Dr. Tyler, TX 75707</p>	<p>Amount of Contribution (\$) \$100.00</p>
<p>Principal occupation / Job title (See Instructions)</p>		<p>Employer (See Instructions)</p>
<p>Date 09/11/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Wilhelmi, Walter</p> <p>Contributor address; City; State; Zip Code 9045 Old Hickory Rd. Tyler, TX 75703</p>	<p>Amount of Contribution (\$) \$500.00</p>
<p>Principal occupation / Job title (See Instructions)</p>		<p>Employer (See Instructions)</p>

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/6 Rpt: 9/20
2 FILER NAME Dark-Bays, Carleen		3 Filer ID
4 Date 10/06/2025	5 Full name of contributor Wynne, James 6 Contributor address; City; State; Zip Code 2024 Republic Dr. Tyler, TX 75701	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 10/20
2 FILER NAME Dark-Bays, Carleen		3 Filer ID
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 07/08/2025	7 Name of lender Dark-Bays, Carleen	8 out-of-state PAC (ID#: 9 Loan Amount (\$) \$200.00
6 Is lender a financial institution? No	8 Lent address; 3910 Chester Dr. Tyler, TX 75701	10 Interest Rate 11 Maturity Date
12 Principal occupation / Job title (See Instructions) Senior Consultant		13 Employer (See Instructions) CDB Consulting
14 Description of Collateral <input checked="" type="checkbox"/> None		15 Check if personal funds were deposited into political account <input checked="" type="checkbox"/> (See Instructions)
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	18 Guarantor address; City; State; Zip Code 19 Amount Guaranteed (\$)
20 Principal occupation		21 Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Sch: 1/9 Rpt: 11/20	3 Filer ID
4 Date 08/05/2025	5 Payee name Anedot	
6 Amount (\$) \$4.30	7 Payee address; City; State; Zip Code 5555 Hilton Ave. Ste. 106 Baton Rouge, LA 70808	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name DARK BAYS, CARLEEN	Office sought CITY COUNCIL
Date 08/25/2025	Payee name Anedot	
Amount (\$) \$4.30	Payee address; City; State; Zip Code 5555 Hilton Ave. Ste. 106 Baton Rouge, LA 70808	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name DARK BAYS, CARLEEN	Office sought CITY COUNCIL
Date 09/17/2025	Payee name Anedot	
Amount (\$) \$30.60	Payee address; City; State; Zip Code 5555 Hilton Ave. Ste. 106 Baton Rouge, LA 70808	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name DARK BAYS, CARLEEN	Office sought CITY COUNCIL

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/9 Rpt: 12/20	2 FILER NAME Dark-Bays, Carleen	3 Filer ID	
4 Date 09/26/2025	5 Payee name Anedot		
6 Amount (\$) \$20.30	7 Payee address; City; State; Zip Code 5555 Hilton Ave. Ste. 106 Baton Rouge, LA 70808		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Fees	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name DARK BAYS, CARLEEN	Office sought CITY COUNCIL	Office held
Date 10/02/2025	Payee name Anedot		
Amount (\$) \$60.60	Payee address; City; State; Zip Code 5555 Hilton Ave. Ste. 106 Baton Rouge, LA 70808		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name DARK BAYS, CARLEEN	Office sought CITY COUNCIL	Office held
Date 10/06/2025	Payee name Anedot		
Amount (\$) \$4.30	Payee address; City; State; Zip Code 5555 Hilton Ave. Ste. 106 Baton Rouge, LA 70808		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name DARK BAYS, CARLEEN	Office sought CITY COUNCIL	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/9 Rpt: 13/20	2 FILER NAME Dark-Bays, Carleen	3 Filer ID	
4 Date 10/08/2025	5 Payee name Anedot		
6 Amount (\$) \$4.30	7 Payee address; City; State; Zip Code 5555 Hilton Ave. Ste. 106 Baton Rouge, LA 70808		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Fees	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name DARK BAYS, CARLEEN	Office sought CITY COUNCIL	Office held
Date 10/08/2025	Payee name Anedot		
Amount (\$) \$30.60	Payee address; City; State; Zip Code 5555 Hilton Ave. Ste. 106 Baton Rouge, LA 70808		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Fees	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name DARK BAYS, CARLEEN	Office sought CITY COUNCIL	Office held
Date 10/10/2025	Payee name Anedot		
Amount (\$) \$24.60	Payee address; City; State; Zip Code 5555 Hilton Ave. Ste. 106 Baton Rouge, LA 70808		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Fees	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name DARK BAYS, CARLEEN	Office sought CITY COUNCIL	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Sch: 4/9 Rpt: 14/20 Dark-Bays, Carleen	3 Filer ID	
4 Date 10/16/2025	5 Payee name Anedot		
6 Amount (\$) \$10.30	7 Payee address; City; State; Zip Code 5555 Hilton Ave. Ste. 106 Baton Rouge, LA 70808		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Fees	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name DARK BAYS, CARLEEN	Office sought CITY COUNCIL	Office held
Date 10/28/2025	Payee name Anedot		
Amount (\$) \$4.30	Payee address; City; State; Zip Code 5555 Hilton Ave. Ste. 106 Baton Rouge, LA 70808		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Fees	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name DARK BAYS, CARLEEN	Office sought CITY COUNCIL	Office held
Date 11/12/2025	Payee name Anedot		
Amount (\$) \$4.30	Payee address; City; State; Zip Code 5555 Hilton Ave. Ste. 106 Baton Rouge, LA 70808		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Fees	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name DARK BAYS, CARLEEN	Office sought CITY COUNCIL	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/9 Rpt: 15/20	2 FILER NAME Dark-Bays, Carleen	3 Filer ID	
4 Date 12/30/2025	5 Payee name Anedot		
6 Amount (\$) \$40.30	7 Payee address; City; State; Zip Code 5555 Hilton Ave. Ste. 106 Baton Rouge, LA 70808		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Fees	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name DARK BAYS, CARLEEN	Office sought CITY COUNCIL	Office held
Date 12/30/2025	Payee name Anedot		
Amount (\$) \$4.30	Payee address; City; State; Zip Code 5555 Hilton Ave. Ste. 106 Baton Rouge, LA 70808		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Fees	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/31/2025	Payee name Anedot		
Amount (\$) \$40.30	Payee address; City; State; Zip Code 5555 Hilton Ave. Ste. 106 Baton Rouge, LA 70808		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Fee	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/9 Rpt: 16/20	2 FILER NAME Dark-Bays, Carleen	3 Filer ID	
4 Date 09/30/2025	5 Payee name Brookshires		
6 Amount (\$) \$35.69	7 Payee address; City; State; Zip Code 100 Rice Road Tyler, TX 75703		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food for event	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name DARK BAYS, CARLEEN	Office sought CITY COUNCIL	Office held
Date 10/03/2025	Payee name CWJ Strategies		
Amount (\$) \$2,256.67	Payee address; City; State; Zip Code 314 S Broadway Ave. Tyler, TX 75702		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Services, Print Work	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name DARK BAYS, CARLEEN	Office sought CITY COUNCIL	Office held
Date 10/23/2025	Payee name CWJ Strategies		
Amount (\$) \$2,285.54	Payee address; City; State; Zip Code 314 S Broadway Ave. Tyler, TX 75702		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Services, Print Work	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name DARK BAYS, CARLEEN	Office sought CITY COUNCIL	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Sch: 7/9 Rpt: 17/20 Dark-Bays, Carleen	3 Filer ID	
4 Date 12/19/2025	5 Payee name CWJ Strategies		
6 Amount (\$) \$2,014.92	7 Payee address; City; 314 S Broadway Ave. Tyler, TX 75702		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Services, Print Work	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name DARK BAYS, CARLEEN	Office sought CITY COUNCIL	Office held
Date 09/30/2025	Payee name Glover, Emily		
Amount (\$) \$200.00	Payee address; City; 428 Maggie Circle Flint, TX 75762		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Music for event	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name DARK BAYS, CARLEEN	Office sought CITY COUNCIL	Office held
Date 09/30/2025	Payee name Sam's Club		
Amount (\$) \$396.46	Payee address; City; 2025 SSW Loop 323 Tyler, TX 75701		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food for event	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name DARK BAYS, CARLEEN	Office sought CITY COUNCIL	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/9 Rpt: 18/20	2 FILER NAME Dark-Bays, Carleen	3 Filer ID	
4 Date 09/30/2025	5 Payee name Twelve		
6 Amount (\$) \$381.94	7 Payee address; City; State; Zip Code 405 WSW Loop 323 Tyler, TX 75701		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food for event	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name DARK BAYS, CARLEEN	Office sought CITY COUNCIL	Office held
Date 09/30/2025	Payee name Tyler Tents and Events		
Amount (\$) \$221.48	Payee address; City; State; Zip Code 5515 State Hwy 31 W #9731 Tyler, TX 75709		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rentals for event	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name DARK BAYS, CARLEEN	Office sought CITY COUNCIL	Office held
Date 07/09/2025	Payee name USPS		
Amount (\$) \$113.00	Payee address; City; State; Zip Code 2627 S Broadway Ave. Tyler, TX 75701		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PO Box	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name DARK BAYS, CARLEEN	Office sought CITY COUNCIL	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/9 Rpt: 19/20	2 FILER NAME Dark-Bays, Carleen	3 Filer ID	
4 Date 12/29/2025	5 Payee name USPS		
6 Amount (\$) \$113.00	7 Payee address; City; State; Zip Code 2627 S Broadway Ave. Tyler, TX 75701		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense P.O. Box	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 1/2 Rpt: 20/21	2 FILER NAME Dark-Bays, Carleen	3 Filer ID	
4 Date 09/30/2025	5 Payee name Brookshires		
6 Amount (\$) \$255.90 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 100 Rice Road Tyler, TX 75703		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food for announcement event	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 07/28/2025	Payee name CWJ Strategies		
Amount (\$) \$2,000.00 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 314 S Broadway Ave. Tyler, TX 75702		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 09/02/2025	Payee name CWJ Strategies		
Amount (\$) \$2,003.69 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 314 S Broadway Ave. Tyler, TX 75702		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting & Marketing Expenses	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 2/2 Rpt: 21/21	2 FILER NAME Dark-Bays, Carleen	3 Filer ID	
4 Date 07/09/2025	5 Payee name Deluxe Checks		
6 Amount (\$) \$115.21	7 Payee address; City; State; Zip Code 801 S Marquette Ave. Minneapolis, MN 55402		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Checks	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held