

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**FORM C/OH
COVER SHEET PG 2**

15 C/OH NAME Delia Parker-Mims		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)	\$ \$0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ \$5,507.11
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ \$0
	4. TOTAL POLITICAL EXPENDITURES	\$ \$2,933.26
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ \$2,573.85
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.

Delia Parker-Mims

Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP / SEAL

Sworn to and subscribed before me by Delia Parker-Mims this the 1st day of April

2021, to certify which, witness my hand and seal of office.

Julie Worster

Julie Worster

Notary Public

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 Delia Parker-Mims	20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 5,407.11
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	\$ 100.00
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 2,428.26
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 checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 505.00
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: 1 of 16
2 FILER NAME Delia Parker-Mims		3 Filer ID (Ethics Commission Filers)
4 Date 2/9/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cathy Snyder	7 Amount of contribution (\$) \$75.00
6 Contributor address; City; State; Zip Code 2005 Pembroke Place Denton TX 76205		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/9/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Angela Brewer for Texas	Amount of contribution (\$) \$250.00
Contributor address; City; State; Zip Code 624 W University Dr #207 Denton TX 76201		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/9/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amy Taylor	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code 2026 Sauls Ln Denton TX 76209		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/9/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alison Maguire-Powell	Amount of contribution (\$) \$50.00
Contributor address; City; State; Zip Code 2208 Miranda Pl Denton TX 76210		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 2 of 16
2 FILER NAME Delia Parker-Mims		3 Filer ID (Ethics Commission Filers)
4 Date 2/9/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lucas Holl	7 Amount of contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code 815 Crestoak Place Denton TX 76209		
Date 2/10/2021		Amount of contribution (\$) \$25.00
Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raquel Gaines		
Contributor address; City; State; Zip Code 1301 Scripture Street Apt N130 Denton TX 76201		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/10/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bethanie Weston	Amount of contribution (\$) \$25.00
Contributor address; City; State; Zip Code 934 Silverstone Drive Lewisville TX 75067		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/10/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Emile Kue	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code 1601 Princess Ln Frisco TX 75036		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 3 of 16
2 FILER NAME Delia Parker-Mims		3 Filer ID (Ethics Commission Filers)
4 Date 2/10/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael Hunn	7 Amount of contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code 2216 Carriage Hill Denton TX 76207		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/10/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jordan Villarreal	Amount of contribution (\$) \$25.00
Contributor address; City; State; Zip Code 5500 Del Rey Dr Denton TX 76208		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/10/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pat Cheek	Amount of contribution (\$) \$50.00
Contributor address; City; State; Zip Code 1220 Tulane Dr Denton TX 76201		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/10/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deanna Burns	Amount of contribution (\$) \$25.00
Contributor address; City; State; Zip Code 1402 Elkhart Ave Lubbock TX 79416		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 4 of 16
2 FILER NAME Delia Parker-Mims		3 Filer ID (Ethics Commission Filers)
4 Date 2/11/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barbara Palcewski 6 Contributor address; City; State; Zip Code 3605 Fritz Ln Corinth, TX 76208	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 2/11/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jim Williams Contributor address; City; State; Zip Code 5201 Tartan Cir Denton, TX 76208	Amount of contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/11/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patrick McGehearty Contributor address; City; State; Zip Code 420 Red Castle Dr Lewisville, TX 75056	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/12/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Debbie Prescher Contributor address; City; State; Zip Code 916 Highland Village Rd, Highland Village, TX 75077	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 5 of 16
Delia Parker-Mims		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michelle Beckley	7 Amount of contribution (\$)
	6 Contributor address; City; State; Zip Code 1845 E Frankford Road, Carrollton, TX 75007	\$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Juanita Jones	Amount of contribution (\$)
	Contributor address; City; State; Zip Code 1525 Mission Ridge, Carrollton, TX 75007	\$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prudence Sanchez	Amount of contribution (\$)
	Contributor address; City; State; Zip Code 711 Jackson Street, Denton, TX 76205	\$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberta Stavely	Amount of contribution (\$)
	Contributor address; City; State; Zip Code 2707 Spyglass Dr, Carrollton, TX 75007	\$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 6 of 16
2 FILER NAME Delia Parker-Mims		3 Filer ID (Ethics Commission Filers)
4 Date 2/26/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Derrick Gay 6 Contributor address; City; State; Zip Code 2300 Westlake Court, Carrollton, TX 75010	7 Amount of contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 2/5/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas 1st PAC Contributor address; City; State; Zip Code P.O Box 842 Prosper TX 75078	Amount of contribution (\$) \$1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/08/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kathy Bratz Campaign Contributor address; City; State; Zip Code 5700 Bent Tree Ct. Colleyville TX 76034	Amount of contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/27/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mary Dabner Contributor address; City; State; Zip Code 625 E Vista Ridge Mall Dr. Apt 1412 Lewisville, TX 75067	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 7 of 16
2 FILER NAME Delia Parker-Mims		3 Filer ID (Ethics Commission Filers)
4 Date 2/27/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharon Gentry 6 Contributor address; City; State; Zip Code 2750 Bob White Lane Flower Mound, TX 75022	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 2/27/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robyn Houston Contributor address; City; State; Zip Code 321 Pebble Knoll Highland Village, TX 75077	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/27/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cheri Kennedy Contributor address; City; State; Zip Code 10409 Murray S Johnson St Denton, TX 76207	Amount of contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/27/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tia Duncan Contributor address; City; State; Zip Code 1228 Denise Court Lewisville TX 75067	Amount of contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 8 of 16
2 FILER NAME Delia Parker-Mims		3 Filer ID (Ethics Commission Filers)
4 Date 2/28/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheila Taylor	7 Amount of contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code 913 Fenimore Drive Lewisville TX 75077	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/6/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Helen Munro	Amount of contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 1010 Olympic Ct Lewisville TX 75077	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/9/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amy Taylor	Amount of contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 2026 Sauls Ln Denton TX 76209	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/10/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bethanie Weston	Amount of contribution (\$) \$25.00
	Contributor address; City; State; Zip Code 934 Silverstone Drive Lewisville, TX 75067	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 9 of 16
2 FILER NAME Delia Parker-Mims		3 Filer ID (Ethics Commission Filers)
4 Date 3/11/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barbara Palcewski	7 Amount of contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code 3605 Fritz Ln Corinth TX 76208		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/11/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beth Hayes	Amount of contribution (\$) \$10.00
Contributor address; City; State; Zip Code 2034 Eagle Nest Pass Lewisville TX 75077		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/11/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Debra Simon	Amount of contribution (\$) \$75.00
Contributor address; City; State; Zip Code 4401 Manor Way Flower Mound, TX 75028		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/11/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Penny Apollaro	Amount of contribution (\$) \$25.00
Contributor address; City; State; Zip Code 3010 High Point Dr Flower Mound, TX 75022		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 10 of 16
2 FILER NAME Delia Parker-Mims		3 Filer ID (Ethics Commission Filers)
4 Date 3/11/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANIEL HOFFMAN	7 Amount of contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code 3400 Hasland Flower Mound TX 75022		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/11/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phyllis Wolper	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code 1012 Bull Run Denton TX 76209		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/11/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fawn Munro	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code 3600 Lofty Pines Ln Flower Mound, TX 75028		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/11/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherry Stewart	Amount of contribution (\$) \$25.00
Contributor address; City; State; Zip Code 50 Remington Terrace, Highland Village, TX 75077		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 11 of 16
2 FILER NAME Delia Parker-Mims		3 Filer ID (Ethics Commission Filers)
4 Date 3/11/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jef Pfeiffer	7 Amount of contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code 2006 Aspen Drive Lewisville TX 75077		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/11/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Antoinette Adkins	Amount of contribution (\$) \$20.00
Contributor address; City; State; Zip Code 509 Valley View Drive Lewisville TX 75067		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/11/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matt Brumley	Amount of contribution (\$) \$50.00
Contributor address; City; State; Zip Code 201 Lavaca St #204 Austin TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/11/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linda Settles	Amount of contribution (\$) \$20.00
Contributor address; City; State; Zip Code 1109 Taylor Lane Lewisville TX 75077		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 12 of 16
2 FILER NAME Delia Parker-Mims		3 Filer ID (Ethics Commission Filers)
4 Date 3/11/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Candace Pruett	7 Amount of contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code 18255 E Alabama PI Unit B Aurora, CO 80017	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/12/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charles Carlton	Amount of contribution (\$) \$20.00
	Contributor address; City; State; Zip Code 125 E Church St Lewisville TX 75057	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/12/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elizabeth Chamberlain	Amount of contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 901 Brittany Drive Lewisville TX 75067	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/12/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniel Nichols	Amount of contribution (\$) \$20.00
	Contributor address; City; State; Zip Code 401 N Old Orchard Ln Apt 327 Lewisville, TX 75067	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 13 of 16
2 FILER NAME Delia Parker-Mims		3 Filer ID (Ethics Commission Filers)
4 Date 3/14/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael Selman	7 Amount of contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code 2101 Lucerne Cove Richardson TX 75080		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/14/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tony Montez	Amount of contribution (\$) \$20.00
Contributor address; City; State; Zip Code 1101 Apache Lake DR. Carrollton TX 75010		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/15/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nancy Baier	Amount of contribution (\$) \$25.00
Contributor address; City; State; Zip Code 2006 Postwood Court Corinth TX 76210		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/15/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olivia Aguirre	Amount of contribution (\$) \$50.00
Contributor address; City; State; Zip Code 164 Lakeland Dr Highland Village TX 75077		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 14 of 16
2 FILER NAME Delia Parker-Mims		3 Filer ID (Ethics Commission Filers)
4 Date 3/15/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sonya Pickens	7 Amount of contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code 5570 FM 423 Suite 250-139 FriscoTX 75034		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/16/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barbara Rucker	Amount of contribution (\$) \$50.00
Contributor address; City; State; Zip Code 2301 Suntree Lane Flower Mound, TX 75022		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/18/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lindsay Van meter	Amount of contribution (\$) \$25.00
Contributor address; City; State; Zip Code 1947 Pin Oak Dr Flower Mound TX 75028		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/18/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mary Ellen Leconte	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code 212 Sugar Mill Rd Greer, SC 29650		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 15 of 16
2 FILER NAME Delia Parker-Mims		3 Filer ID (Ethics Commission Filers)
4 Date 3/19/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deborah O'Reilly 6 Contributor address; City; State; Zip Code 1963 Fox Glen Dr. Allen, TX 75013	7 Amount of contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/20/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Courtney Hitt Contributor address; City; State; Zip Code 6840 Rochelle Drive, Plano, TX 75023	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/20/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diana Rashed Contributor address; City; State; Zip Code 250 Carrington Lane, Lewisville, TX 75067	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/21/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ken Tysell Contributor address; City; State; Zip Code 1213 Gladewater Trail , Frisco, TX 75033	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 16 of 16
2 FILER NAME Delia Parker-Mims		3 Filer ID (Ethics Commission Filers)
4 Date 3/21/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jim Owen	7 Amount of contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code 2007 Teasley Lane apt 109 Denton, TX 76205	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/22/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kasey Francis-Eusea	Amount of contribution (\$) \$17.11
	Contributor address; City; State; Zip Code 1601 Meadow Oak Denton TX 76209	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/22/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prudence Sanchez	Amount of contribution (\$) \$25.00
	Contributor address; City; State; Zip Code 711 Jackson Street Denton TX 76205	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/22/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Georgia Locker	Amount of contribution (\$) \$20.00
	Contributor address; City; State; Zip Code 713 Duke Sq Fort Collins CO 80525-1524	
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.

LOANS

SCHEDULE E

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 E: 1
2 FILER NAME Delia Parker-Mims		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 2/5/2021	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Delia Parker-Mims	9 Loan Amount (\$) 100.00
6 Is lender a financial Institution? N	8 Lender address; City; State; Zip Code 1079 W. Roundgrove Rd. Suite 300, #214, Lewisville, TX 75067	10 Interest rate 0
		11 Maturity date N/A
12 Principal occupation / Job title (See Instructions) Attorney		13 Employer (See Instructions) Self
14 Description of Collateral <input checked="" type="checkbox"/> none		15 <input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)
Date of loan	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	Loan Amount (\$)
Is lender a financial Institution? Y N	Lender address; City; State; Zip Code	Interest rate
		Maturity date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral <input type="checkbox"/> none		<input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION <input type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal Occupation (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 1 of 2	2 FILER NAME Delia Parker-Mims	3 Filer ID (Ethics Commission Filers)
4 Date 2/5/2021	5 Payee name Point Bank	
6 Amount (\$) \$25.75	7 Payee address; City; State; Zip Code 915 W Main St, Lewisville, TX 75067	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description Ordered campaign checks
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 3/17/2021	Payee name Prodigi	
Amount (\$) \$1,948.69	Payee address; City; State; Zip Code 700 Parker Square Ste 195, Flower Mound, TX 75028	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Large signs, door hangers, shirts, business cards
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 2/22/2021	Payee name Squarespace	
Amount (\$) \$233.82	Payee address; City; State; Zip Code 8 Clarkson St, New York, NY 10014	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Annual Payment
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 2 of 2	2 FILER NAME Delia Parker-Mims	3 Filer ID (Ethics Commission Filers)
4 Date 2/25/2021	5 Payee name YouTube Ad Service / Political YT Ad Services	
6 Amount (\$) \$200.00	7 Payee address; City; State; Zip Code 2340 E. Trinity Mills Rd. Suite 300, Carrollton, TX 75006	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Campaign YouTube Commerical
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 3/11/2021	Payee name Squarespace	
Amount (\$) \$20.00	Payee address; City; State; Zip Code 8 Clarkson St, New York, NY 10014	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Domain Name
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: 1	2 FILER NAME Delia Parker-Mims	3 Filer ID (Ethics Commission Filers)
4 Date 2/5/2021	5 Payee name Voter Access Network	
6 Amount (\$) 505.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 655 15th St. NW, Suite 650, Washington, DC 20005	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description Access to the Voter Access Network
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Delia Parker-Mims	Office sought Lewisville Mayor
Date	Payee name	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
Date	Payee name	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought