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 Commi	ssion Filers)	2. Total page	es filed:
CANDIDATE/ OFFICEHOLDER NAME	MS/MRS/MR NICKNAME	FIRST Dexter Lorance-No LAST McCoy	avario	MI SUFFIX	Date Received	USE ONLY
CANDIDATE/ OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS /PO BOX: P.O. Box 1398	APT/SUITE # CITY Richmond		ZIP CODE 77406		d or Date Postmarked
OFFICEHOLDER PHONE	AREA CODE PHO	ONE NUMBER	EXTENSIO	DN	Receipt #	Amount \$
CAMPAIGN TREASURER NAME	MS/MRS/MR NICKNAME STREET ADDRESS (NO PO BO	FIRST Joseph LAST Killebrew	# CITY	MI SUFFIX STATE:	Date Processed Date Imaged ZIP CODE	
TREASURER ADDRESS (Residence or Business)	8835 Arch Rock Dr.	WILD GO, MI WOUTE	Cypress	TX	77433	
CAMPAIGN TREASURER PHONE	AREA CODE P (407) 376-0	HONE NUMBER 352	EXTENSIO	DN		
REPORT TYPE	January 15 July 15	30th day before election		anoff ceeded Modified eporting limit	appointme Final repo	ofter campaign tresurer ent (officeholder only) rt (Attach- COH-FR)
10 PERIOD COVERED	Month Day Ye 09/30/2022	ear TH	ROUGH	Month	Day You 10/29/2022	ear
11 ELECTION	ELECTION DATE Month Day 11/8/2022	Year ELECTION Primal	y 🔲	Special	Other	
12 OFFICE	OFFICE HELD (if any)		1	3 OFFICE SOUGH Fort Bend C	IT (if known) ounty Commission	ner Pct. 4
NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF PO SUPPORT THE CANDIDATE / OF KNOWLEDGE OR CONSENT. CA OF SUCH EXPENDITURES.	FICEHOLDER. THESE EXPEND	ITURES MAY HAVE	BEEN MADE WITHOU	IT THE CANDIDATE'S C	OR OFFICEHOLDER'S
additional pages	COMMITTEE TYPE GENERAL SPECIFIC	COMMITTEE NAME The Texas Gulf C COMMITTEE ADDRESS 2506 Sutherland COMMITTEE CAMPAIGN COMMITTEE CAMPAIGN	St., Houston, T	X 77023 ME	PAC	
	COMMITTEE TYPE GENERAL SPECIFIC	COMMITTEE NAME Texas Organizing COMMITTEE ADDRESS PO Box 120296, COMMITTEE CAMPAIGN	San Antonio, T			
		COMMITTEE CAMPAIGN			,	

COMMITTEE NAME TREPAC/Texas Association of Realtors Political Act				
COMMITTEE ADDRESS PO Box 2246, Austin, TX 78768				
COMMITTEE CAMPAIGN TREASURER NAME				
COMMITTEE CAMPAIGN TREASURER ADDRESS				
GO TO PAGE 2				
	TREPAC/Texas Association of Realtors Political Act COMMITTEE ADDRESS PO Box 2246, Austin, TX 78768 COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS			

Forms provided by Texas Ethics Commission

www.ethics.state.tx.us

Revised 8/17/2020

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

45 C/OLLNIANT	Dantas I ammas Noverio McCov		16 File	er ID (Ethics Commission Filers)
15 C/OH NAME	Dexter Lorance-Navario McCoy			
17 CONTRIBUTION TOTALS	1 TOTAL UNITEMIZED POLITICAL COI OR GUARANTEES OF LOANS OR CO			\$0.00
	2 TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, C			\$57,071.00
EXPENDITURE TOTALS	3 TOTAL UNITEMIZED POLITICAL EXP	PENDITURES		\$0.00
	4 TOTAL POLITICAL EXPENDITURES			\$74,716.81
CONTRIBUTION BALANCE	5 TOTAL POLITICAL CONTRIBUTIONS OF REPORTING PERIOD	MAINTAINED AS OF THE LAST	DAY	\$124,683.57
OUTSTANDING LOAN TOTALS	6 TOTAL PRINCIPAL AMOUNT OF ALL LAST DAY OF THE REPORTING PER		THE	\$6,000.00
18 SIGNATURE	I swear, or affirm, under penalty of perjury, required to be reported by me under Title 1	that the accompanying repo	ort is true and corre	ct and includes all information
	.,	1	Litu	
		Signati	ure of Candidate or	Officeholder
	Please comple	te either option below:		
(1) Affidavit	SEDRICK WALKER	te either option below.		
100	Notary Public, State of Texas Comm. Expires 03-30-2026			
NOTARY STAM	Notary ID 7431068			
Sworn to and subscribed	before me, by the said DEXTE	R L. McCoy	this the	31sT
4	to certify which, witness my hand an			
_/. /			+ :/:	D / /
Signature of officer admin	SEDELCK K	VALKER cer administering oath	Texas Notar	y Pvb l.c.
Signature of officer admin	Stering Gath	OR		
(2) Unsworn Declaration				
My name is		, and my date o	of birth is	
My address is				
	(street)	(city)	(state)	(zip code) (country)
Executed in	County, State of	on the	day of (month	20 (year)
			(iii)	, (you)
		Signati	ure of Candidate/Of	fficeholder (Declarant)

FORM C/OH COVER SHEET PG 3

19.	FILER NAME Dexter Lorance-Navario McCoy	20. FILER ID (Ethic	s Commission Filers)
21.	SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTALS AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$48,935.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$8,136.00
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$0.00
4.	SCHEDULE E: LOANS		\$6,000.00
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CON	TRIBUTIONS	\$74,716.81
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$0.00
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CO	ONTRIBUTIONS	\$0.00
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$0.00
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUND	s	\$0.00
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A	BUSINESS OF C/OH	\$0.00
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO	ONTRIBUTIONS	\$0.00
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS AND CONTRIBUTION TO FILER	NS RETURNED	\$6.73

SCHEDULE A1

The	Instruction Guide explains how to complete this form.	Total pages Schedule A1: not available	
2. FILER NAM Dexter Lorar	ME nce-Navario McCoy	3. Filer ID (Ethics Commission Filers)	
4. Date	Full name of contributorout-of-state PAC	7. Amount of contribution (\$)	
10/20/2022	CWA-COPE	\$1,500.00	
	6. Contributor address; City; State; ZIP Code	41,000.00	
	501 3rd St NW Washington, DC 20001-2760		
8. Principal oc	ccupation / Job title (See Instructions) 9 Emplo	yer (See Instructions)	
4. Date	Full name of contributorout-of-state PAC	7. Amount of contribution (\$)	
10/07/2022	Don Aaron	\$1,000.00	
	6. Contributor address; City; State; ZIP Code		
	2250 Holly Hall St Houston, TX 77054-4025		
8. Principal oc	cupation / Job title (See Instructions) 9 Emplo	yer (See Instructions)	
Owner		O.R. Aaron & Assoc.	
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)	
10/22/2022	Mohammad Aijaz	\$100.00	
	6. Contributor address; City; State; ZIP Code		
	12323 Ashford Hollow Dr Sugar Land, TX 77478-6177		
8. Principal oc Not Emplo		yer (See Instructions) lot Employed	
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)	
10/29/2022	Mir Ali	\$500.00	
	6. Contributor address; City; State; ZIP Code		
	1110 Mulberry Farm Ln Richmond, TX 77469-7382		
8. Principal oc Not Emplo		yer (See Instructions) fot Employed	
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)	
10/05/2022	Portia Amofa	\$100.00	
	6. Contributor address; City; State; ZIP Code		
	6029 Goshawk St New Market, MD 21774-6897		
8. Principal oc	cupation / Job title (See Instructions) 9 Employ	yer (See Instructions)	

SCHEDULE A1

The In	struction Guide explains how	to complete this fo	rm.	Total pages Schedule A1: not available
FILER NAME Dexter Lorance	e-Navario McCoy			3. Filer ID (Ethics Commission Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)
10/12/2022	Keysha Anderson			\$50.00
	6. Contributor address;	City; State;	ZIP Code	
	14726 Mesita Dr Houston, TX 77	7083-3229		
8. Principal occu	upation / Job title (See Instruction	s)	9 Emplo	yer (See Instructions)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)
10/12/2022	Keysha Anderson			\$50.00
	6. Contributor address;	City; State;	ZIP Code	
	14726 Mesita Dr Houston, TX 77	7083-3229		
8. Principal occu	upation / Job title (See Instruction	s)	9 Emplo	yer (See Instructions)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)
10/26/2022	Ardurra Group PAC			\$2,000.00
	6. Contributor address;	City; State;	ZIP Code	\$2,000.00
	5851 San Felipe St Ste 425 Houst	ton, TX 77057-8018		
8. Principal occu	upation / Job title (See Instruction	s)	9 Emplo	yer (See Instructions)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)
10/04/2022	Chadwick & Estella Bailey			\$50.00
	6. Contributor address;	City; State;	ZIP Code	
	12218 Shelwick Dr Houston, TX	77031-3046		
8. Principal occu	pation / Job title (See Instruction	s)	9 Emplo	yer (See Instructions)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)
10/20/2022	Danielle Keys Bess			\$250.00
	6. Contributor address;	City; State;	ZIP Code	
	3244 Wentworth St Houston, TX	77004-6204		
8. Principal occu	pation / Job title (See Instruction	s)	9 Emplo	yer (See Instructions)

SCHEDULE A1

The	Instruction Guide explains how	to complete this fo	rm.	Total pages Schedule A1: not available	
2. FILER NAN Dexter Lora	ME nce-Navario McCoy			3. Filer ID (Ethics Commission Filers)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
10/12/2022	Eric Blackwell			\$250.00	
	6. Contributor address;	City; State;	ZIP Code		
	2120 Kipling St Houston, TX 770	098-2300			
	ccupation / Job title (See Instruction ent Relations	is)		yer (See Instructions) RG Energy	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
10/20/2022	Phyllis Blue			\$250,00	
	6. Contributor address;	City; State;	ZIP Code		
	10303 Knoboak Dr Houston, TX	77043-2911			
8. Principal od	ccupation / Job title (See Instruction	s)	9 Employ	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
10/12/2022	Vicky Boone			\$100.00	
	6. Contributor address;	City; State;	ZIP Code		
	601 Carolyn Ave Austin, TX 787	05-1709			
8. Principal oc	ccupation / Job title (See Instruction	s)	9 Employ	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
10/12/2022	Bracewell PAC			\$1,000.00	
	Contributor address;	City; State;	ZIP Code	2 7711	
	711 Louisiana St Ste 2300 Housto	on, TX 77002-2770			
8. Principal oc	ccupation / Job title (See Instruction	s)	9 Employ	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
10/14/2022	Adrian Brown			\$50.00	
	6. Contributor address;	City; State;	ZIP Code		
	4817 York St Apt 176 Metairie, L	A 70001-1143			
8. Principal oc	cupation / Job title (See Instruction	s)	9 Employ	ver (See Instructions)	

SCHEDULE A1

The	Instruction Guide explains how to co	mplete this for	m.	Total pages Schedule A1: not available	
2. FILER NAM Dexter Lora	ME nce-Navario McCoy			3. Filer ID (Ethics Commission F	ilers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
10/06/2022	Elizabeth Brown				\$100.00
	6. Contributor address; C	City; State;	ZIP Code		**********
	1314 Mill Stream Ct Sugar Land, TX 7	77479-6151			
8. Principal oc	ccupation / Job title (See Instructions)		9 Emplo	yer (See Instructions)	**************************************
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
10/05/2022	Sarah Brown				\$50.00
	6. Contributor address; C	City; State;	ZIP Code		Ψ50.00
	1815 Hackberry Heights Dr Richmond				
8. Principal oc	ccupation / Job title (See Instructions)		9 Employ	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
10/12/2022	Larry Weiss Buck				\$50.00
	6. Contributor address; C	City; State;	ZIP Code		******
	121 N Post Oak Ln Apt 2304 Houston,	TX 77024-7782			
8. Principal oc	cupation / Job title (See Instructions)		9 Employ	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
10/08/2022	Linda Burkley				\$100.00
	6. Contributor address; C	city; State;	ZIP Code		Ψ100.00
	8026 Duffield Ln Houston, TX 77071-	2017			
8. Principal oc	cupation / Job title (See Instructions)		9 Employ	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
10/28/2022	Darryl Carter				\$1,500.00
	6. Contributor address; C	city; State;	ZIP Code		,
	5651 Willers Way Houston, TX 77056-	-2608			
8. Principal oc	cupation / Job title (See Instructions)			yer (See Instructions)	
Attorney			Se	elf	

SCHEDULE A1

The I	nstruction Guide explains how	to complete this fo	rm.	Total pages Schedule A1: not available	
2. FILER NAM Dexter Loran	E ce-Navario McCoy			3. Filer ID (Ethics Commission F	ilers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
10/07/2022	Chris Cheetham-West				\$100.00
	6. Contributor address;	City; State;	ZIP Code		4100.00
	6110 Birchwood San Antonio, T	X 77493			
8. Principal occ	cupation / Job title (See Instruction	is)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
10/07/2022	Vanessa Cole				\$250.00
	6. Contributor address;	City; State;	ZIP Code		4-20.00
	21810 Treemont Hollow Ct Rich	mond, TX 77469-7250)		
8. Principal occ	cupation / Job title (See Instruction	s)	9 Employ	yer (See Instructions)	
Developer			C	ole Klein Builders	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
10/01/2022	Eric Curley				\$500.00
	Contributor address;	City; State;	ZIP Code		
	12163 Sunny St Frisco, TX 7503:	3-2681			
8. Principal occ Physician	cupation / Job title (See Instruction	s)		yer (See Instructions) otalCare	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
10/21/2022	Marthea Davis				\$200.00
	6. Contributor address;	City; State;	ZIP Code		
	4014 Glen Cove Dr Houston, TX	77021-2249			
8. Principal occ	cupation / Job title (See Instruction	s)	9 Employ	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
10/20/2022	Pernell Davis				\$100.00
	6. Contributor address;	City; State;	ZIP Code		
	2031 Westcreek Ln Apt 2007 Ho	uston, TX 77027-3062	!		
8. Principal occ	upation / Job title (See Instruction	s)	9 Employ	yer (See Instructions)	

SCHEDULE A1

The	Instruction Guide explains how to complete this form.	Total pages Schedule A1: not available
FILER NAM Dexter Loran	E ice-Navario McCoy	3. Filer ID (Ethics Commission Filers)
4. Date	Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
10/02/2022	James Dixon	\$25.00
	6. Contributor address; City; State; ZIP Code	
	35 Charleston St N Sugar Land, TX 77478-3655	
8. Principal occ	cupation / Job title (See Instructions) 9 Emp	oloyer (See Instructions)
4. Date	Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
10/20/2022	Rita Earlz	\$30.00
	6. Contributor address; City; State; ZIP Code	
	9114 Lakes At 610 Dr Houston, TX 77054-2403	
8. Principal occ	cupation / Job title (See Instructions) 9 Emp	oloyer (See Instructions)
4. Date	Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
10/14/2022	Sandy Edwards	\$50.00
	6. Contributor address; City; State; ZIP Code	
	23303 Millcross Ln Katy, TX 77494-2165	
8. Principal occ	cupation / Job title (See Instructions) 9 Emp	ployer (See Instructions)
4. Date	Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
10/24/2022	Yvonne Edwards	\$100,00
	6. Contributor address; City; State; ZIP Code	
	16218 Waiting Spring Cir Houston, TX 77095-4548	
8. Principal occ	cupation / Job title (See Instructions) 9 Emp	oloyer (See Instructions)
sales consu		sears
4. Date	Full name of contributor	7. Amount of contribution (\$)
09/30/2022	Nikolas Ellis	\$40.00
	6. Contributor address; City; State; ZIP Code	
	23535 Mcnabb Spur Ln Richmond, TX 77469-2541	
8. Principal occ	cupation / Job title (See Instructions) 9 Emp	oloyer (See Instructions)

SCHEDULE A1

The In	nstruction Guide explains how to complete this form.	Total pages Schedule A1: not available
FILER NAME Dexter Lorance	E e-Navario McCoy	Filer ID (Ethics Commission Filers)
4. Date	Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
10/23/2022	Peggy Ann Engram	\$100.00
	6. Contributor address; City; State; ZIP (
	3900 Fernwood Dr Houston, TX 77021-1522	
8. Principal occu	upation / Job title (See Instructions) 9	Employer (See Instructions)
4. Date	Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
10/03/2022	Lois Essells	\$25.00
V -	6. Contributor address; City; State; ZIP (Code
	902 Chateau Pl Richmond, TX 77469-5108	
8. Principal occu	upation / Job title (See Instructions) 9	Employer (See Instructions)
4. Date	Full name of contributor	7. Amount of contribution (\$)
10/10/2022	Noe Farias	\$100.00
	6. Contributor address; City; State; ZIP C	Code
	10004 Capistrano Ave South Gate, CA 90280-5708	
8. Principal occu	upation / Job title (See Instructions) 9	Employer (See Instructions)
4. Date	Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
10/07/2022	Trevor Fisher	\$100.00
	6. Contributor address; City; State; ZIP C	Code
	2026 Hays Ranch Dr Richmond, TX 77469-2487	
8. Principal occu	upation / Job title (See Instructions) 9	Employer (See Instructions)
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
10/06/2022	David Flanagan	\$100.00
	6. Contributor address; City; State; ZIP C	Code
	6522 Emerald Canyon Rd Katy, TX 77450-8749	
8. Principal occu	upation / Job title (See Instructions) 9	Employer (See Instructions)

SCHEDULE A1

The Ir	nstruction Guide explains how to complete this fo	rm.	Total pages Schedule A1: not available
FILER NAME Dexter Lorance	e-Navario McCoy		3. Filer ID (Ethics Commission Filers)
4. Date	Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
10/20/2022	Anthony Gage		\$100.00
	6. Contributor address; City; State;	ZIP Code	
	1614 Garden Glen Ln Pearland, TX 77581-6559		
8. Principal occi	upation / Job title (See Instructions)	9 Emplo	yer (See Instructions)
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
10/02/2022	Byron Gautier		\$250.00
	6. Contributor address; City; State;	ZIP Code	
	2606 Atlas Dr Missouri City, TX 77459-6743		
8. Principal occi	upation / Job title (See Instructions)	9 Emplo	yer (See Instructions)
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
10/02/2022	Alferma Giles		\$100.00
	6. Contributor address; City; State;	ZIP Code	
	16107 Kensington Dr Sugar Land, TX 77479-4224		
8. Principal occi	upation / Job title (See Instructions)	9 Emplo	yer (See Instructions)
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
10/13/2022	Kendall Grant		\$100.00
	6. Contributor address; City; State;	ZIP Code	
	4024 Southern Ave SE Washington, DC 20020-1026		
8. Principal occi	upation / Job title (See Instructions)	9 Emplo	yer (See Instructions)
4. Date	5. Full name of contributorout-of-state PAC _		7. Amount of contribution (\$)
10/20/2022	Karen Grays-Gray		\$100.00
_	6. Contributor address; City; State;	ZIP Code	
	3434 Binz St Houston, TX 77004-7816		
8. Principal occi	upation / Job title (See Instructions)	9 Emplo	yer (See Instructions)

SCHEDULE A1

The Instruction Guide explains how to complete this form.	Total pages Schedule A1: not available
FILER NAME Dexter Lorance-Navario McCoy	3. Filer ID (Ethics Commission Filers)
4. Date 5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
10/04/2022 Jacqueline Guillory	\$100.00
6. Contributor address; City; State; ZIP Code	\$100.00
18951 Harbor Side Blvd Montgomery, TX 77356-3224	
8. Principal occupation / Job title (See Instructions) 9 Employ	yer (See Instructions)
4. Date 5. Full name of contributor Out-of-state PAC	7. Amount of contribution (\$)
10/07/2022 Francisca Hennes	\$20.00
6. Contributor address; City; State; ZIP Code	\$20.00
5903 Sage Hollow Ct Sugar Land, TX 77479-8978	
	J yer (See Instructions)
4. Date 5. Full name of contributor out-of-state PAC	7. Amount of contribution (\$)
10/12/2022 Mary Horne	\$250.00
6. Contributor address; City; State; ZIP Code	
1119 Catalpa Dr Richmond, TX 77469-2008	
8. Principal occupation / Job title (See Instructions) 9 Employ	yer (See Instructions)
4. Date 5. Full name of contributor out-of-state PAC	7. Amount of contribution (\$)
09/30/2022 Yolanda Humphrey	\$250.00
6. Contributor address; City; State; ZIP Code	\$250.00
1235 North Loop W Ste 600 Houston, TX 77008-1772	
•	yer (See Instructions)
4. Date 5. Full name of contributor Out-of-state PAC	7. Amount of contribution (\$)
10/08/2022 DeAndre' Hutchison	\$50.00
6. Contributor address; City; State; ZIP Code	\$50.00
8819 Seguin Cove Ln Richmond, TX 77407-5504	
	yer (See Instructions)
o. This part occupation / occup	

SCHEDULE A1

The	Instruction Guide explains how to complete this form.		Total pages Schedule A1: not available
2. FILER NAM Dexter Lorar	ME nce-Navario McCoy		3. Filer ID (Ethics Commission Filers)
4. Date	Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
10/02/2022	Erica Jackson		\$25.00
	6. Contributor address; City; State; Z	iP Code	
	10810 Barbadense Ct Richmond, TX 77469-3734		
8. Principal oc	ccupation / Job title (See Instructions)	9 Employ	yer (See Instructions)
4. Date	Full name of contributor		7. Amount of contribution (\$)
10/17/2022	Garbriel Johnson		\$2,000.00
	6. Contributor address; City; State; Z	IP Code	\$2,000.00
	9407 Reston Grove Ln Houston, TX 77095-2258		
8. Principal oc Engineer	cupation / Job title (See Instructions)		yer (See Instructions) IG Tech
4. Date	Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
10/01/2022	Charmaine Jones		\$25.00
	6. Contributor address; City; State; Z	IP Code	-
	20718 Pine Rain Ct Katy, TX 77449-1840		
3. Principal oc	cupation / Job title (See Instructions)	9 Employ	yer (See Instructions)
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
10/14/2022	Juanita Jean Political Action Committee		\$500.00
	6. Contributor address; City; State; Zi	P Code	\$300.00
	8014 Prairie Sage Dr Richmond, TX 77406-7039		
3. Principal oc	cupation / Job title (See Instructions)	9 Employ	I yer (See Instructions)
1. Date	5. Full name of contributor Out-of-state PAC	L	7. Amount of contribution (\$)
09/30/2022	Sudhakar Kalaga		\$2,500.00
		P Code	52,300.00
	10 Ellicott Way Sugar Land, TX 77479-2870		
8. Principal oc	cupation / Job title (See Instructions)	9 Employ	/er (See Instructions)
President		K	IT Professionals, Inc.

SCHEDULE A1

The	Instruction Guide explains how to comp	olete this form.		Total pages Schedule A1: not available	
2. FILER NAN Dexter Lorar	ME nce-Navario McCoy			3. Filer ID (Ethics Commission File	ers)
4. Date	Full name of contributor Out-	-of-state PAC		7. Amount of contribution (\$)	
10/27/2022	Leila Keyhari				\$40.00
	6. Contributor address; City;	; State; ZI	P Code		
	2131 Wisteria Cove Dr Fulshear, TX 7742	23-3077			
8. Principal oc	ccupation / Job title (See Instructions)		9 Employ	yer (See Instructions)	
4. Date	5. Full name of contributor out-	-of-state PAC		7. Amount of contribution (\$)	
10/17/2022	April Kyle Nassi				\$500.00
	6. Contributor address; City	; State; ZI	P Code		Ψ300.00
	2829 E Kyne St Unit 2301 San Mateo, CA				
8. Principal oc Mrs	ccupation / Job title (See Instructions)			l yer (See Instructions) alesforce	
4. Date	5. Full name of contributor out-	of-state PAC		7. Amount of contribution (\$)	
10/12/2022	LAN PAC				\$1,000.00
	6. Contributor address; City	; State; ZI	P Code		,
	2925 Briarpark Dr Fl 4 Houston, TX 7704	2-3720			
8. Principal oc	ocupation / Job title (See Instructions)		9 Employ	yer (See Instructions)	
4. Date	5. Full name of contributor Out	-of-state PAC		7. Amount of contribution (\$)	
10/22/2022	Tijuana Latham				\$100.00
	6. Contributor address; City	; State; ZI	P Code		
	16646 Chinn Ridge Ln Houston, TX 7708	3-5855			
8. Principal od	ccupation / Job title (See Instructions)		9 Employ	yer (See Instructions)	
4. Date	5. Full name of contributor out	-of-state PAC		7. Amount of contribution (\$)	
10/20/2022	Zenobia Love				\$25.00
	6. Contributor address; City	; State; ZI	IP Code		
	138 W 11th St # 2A New York, NY 1001				
8 Principal or	ocupation / Job title (See Instructions)		9 Emplo	yer (See Instructions)	
o. I morpai oc	(350 1101 201 110)				

SCHEDULE A1

The Instruction Guide explains how to complete this form.			Total pages Schedule A1: not available		
2. FILER NAME Dexter Lorance	e-Navario McCoy			3. Filer ID (Ethics Commission Filers)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
10/23/2022	Virginia McBride			\$25.00	
	6. Contributor address;	City; State;	ZIP Code		
	3107 Dandelion Dr Richmond, TX	77469-1971			
8. Principal occi	upation / Job title (See Instructions	3)	9 Employ	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
10/24/2022	Jason McCay			\$35.00	
	6. Contributor address;	City; State;	ZIP Code		
	20122 Moonlight Falls Ct Richmo	nd, TX 77407-3161			
8. Principal occi	upation / Job title (See Instructions	3)	9 Employ	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
10/23/2022	Boris Miles			\$1,000.00	
	6. Contributor address;	City; State;	ZIP Code		
	5302 Almeda Rd Houston, TX 770	004-7440			
8. Principal occi State Senato	upation / Job title (See Instructions	3)		yer (See Instructions) tate of Texas	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
10/10/2022	Derrick Mitchell			\$500.00	
	6. Contributor address;	City; State;	ZIP Code		
	811 Main St Ste 2500 Houston, T	X 77002-6129			
8. Principal occi	upation / Job title (See Instructions	5)		yer (See Instructions) IOLLAND	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
10/27/2022	Merci Mohagheghi			\$40.00	
	6. Contributor address;	City; State;	ZIP Code		
	1010 Rosine St Apt 25 Houston, T	X 77019-3871			
8. Principal occi	upation / Job title (See Instructions	s)	9 Emplo	yer (See Instructions)	

SCHEDULE A1

nedule A1:
Commission Filers)
ribution (\$)
\$500.00
5)
ribution (\$)
\$25.00
4
3)
ibution (\$)
\$500.00
3)
ibution (\$)
\$2,000.00
3)
ibution (\$)
\$200.00

SCHEDULE A1

The	Instruction Guide explains how to complete this fo	rm.	Total pages Schedule A1: not available
2. FILER NAM Dexter Loran	IE ace-Navario McCoy		3. Filer ID (Ethics Commission Filers)
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
09/30/2022	Raymond Oglesby		\$250.00
	6. Contributor address; City; State;	ZIP Code	
	1922 Hays Ranch Dr Richmond, TX 77469-2695		
8. Principal oc	cupation / Job title (See Instructions)	9 Emplo	yer (See Instructions)
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
10/14/2022	Mukhtar Owais		\$1,000.00
	6. Contributor address; City; State;	ZIP Code	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	10506 Tripp Ln Richmond, TX 77407-2121		
8. Principal oc Owner	cupation / Job title (See Instructions)		yer (See Instructions) wais Developments
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
10/19/2022	Randal Perkins		\$2,500.00
	6. Contributor address; City; State;	ZIP Code	
	565 E Hillsboro Blvd Deerfield Beach, FL 33441-3543		
	cupation / Job title (See Instructions) nd Chairman		yer (See Instructions) shBritt
4. Date	5. Full name of contributorout-of-state PAC _		7. Amount of contribution (\$)
10/29/2022	Lester Petitt		\$50.00
	6. Contributor address; City; State;	ZIP Code	
	8215 Sighting Park Dr Richmond, TX 77406-4315		
8. Principal oc	cupation / Job title (See Instructions)	9 Employ	yer (See Instructions)
4. Date	5. Full name of contributorout-of-state PAC _		7. Amount of contribution (\$)
10/13/2022	Albert Price		\$500.00
	6. Contributor address; City; State;	ZIP Code	
	5318 Darling St Unit C Houston, TX 77007-1963		
8. Principal occ	cupation / Job title (See Instructions)		yer (See Instructions) inder Morgan Inc.

SCHEDULE A1

The I	Instruction Guide explains how	to complete this fo	rm.	Total pages Schedule A1: not available
FILER NAMI Dexter Lorance	E ce-Navario McCoy			3. Filer ID (Ethics Commission Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)
10/20/2022	Linda Ragland			\$100.00
	6. Contributor address;	City; State;	ZIP Code	
	2407 Calumet St Houston, TX 77	7004-7505		
8. Principal occ	cupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)
10/12/2022	Ashton Remo			\$50.00
	6. Contributor address;	City; State;	ZIP Code	
	33 Supiro Dr Manvel, TX 77578	-3378		
8. Principal occ	cupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)
10/02/2022	Mona Rhodes			\$25.00
	6. Contributor address;	City; State;	ZIP Code	
	2011 Winged Foot Dr Missouri C	City, TX 77459-3625		
8. Principal occ	cupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)
10/09/2022	Tony Rice			\$1,000.00
	6. Contributor address;	City; State;	ZIP Code	
	4518 11th Ave Los Angeles, CA	90043-5408		
8. Principal occ Consultant	cupation / Job title (See Instruction	ns)		yer (See Instructions) urcher Street
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)
09/30/2022	Mark Ross			\$25.00
	6. Contributor address;	City; State;	ZIP Code	
	3338 Paddock Landing St Richm	ond, TX 77406-1035		
8. Principal occ	cupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)

SCHEDULE A1

The	Instruction Guide explains how	to complete this fo	rm.	Total pages Schedule A1: not available
2. FILER NAM Dexter Lorar	ME nce-Navario McCoy			3. Filer ID (Ethics Commission Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)
09/30/2022	Judy Rowland			\$25,00
	6. Contributor address;	City; State;	ZIP Code	
	1825 Laurel Oaks Dr Richmond,	TX 77469-4836		
8. Principal oc	cupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)
10/20/2022	Anthony Shepherd			\$175.00
	6. Contributor address;	City; State;	ZIP Code	
	3807 Bellfort St Houston, TX 77	051-1434		
8. Principal oc	ccupation / Job title (See Instruction	าร)	9 Emplo	yer (See Instructions)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)
10/02/2022	Benjamin Sheridan			\$50.00
	6. Contributor address;	City; State;	ZIP Code	
	16723 Cold Harbor Ln Houston,	TX 77083-7207		
8. Principal oc	ccupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)
10/26/2022	Juanita Shihadeh			\$2,500.00
	6. Contributor address;	City; State;	ZIP Code	
	11907 Arcadia Bend Ln Houston	, TX 77041-6219		
8. Principal oc Administr	ccupation / Job title (See Instruction ator	ns)		yer (See Instructions) Earth engineering Inc
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)
10/19/2022	Bobby Singh			\$5,000.00
	6. Contributor address;	City; State;	ZIP Code	
	12511 Still Harbour Dr Houston,	TX 77041-6634		
8. Principal oc Engineer	cupation / Job title (See Instruction	ns)		yer (See Instructions) sani Consultants

SCHEDULE A1

The	Instruction Guide explains how	to complete this fo	rm.	Total pages Schedule A1: not available
FILER NAM Dexter Lorar	ME nce-Navario McCoy			3. Filer ID (Ethics Commission Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)
10/21/2022	Priti Singh			\$1,000.00
	6. Contributor address;	City; State;	ZIP Code	
	28 Whitworth Way Sugar Land,	TX 77479-2531		
8. Principal oc CEO	cupation / Job title (See Instruction	ns)	1	yer (See Instructions) associated Testing Laboratories, Inc.
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)
10/14/2022	Pete Stavinoha			\$100.00
	6. Contributor address;	City; State;	ZIP Code	
	503 Bayou Dr Richmond, TX 77	469-5002		
8. Principal oc	cupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)
09/30/2022	Jacqui Stump			\$500.00
	6. Contributor address;	City; State;	ZIP Code	
	2800 Kirby Dr Houston, TX 770	98-1273		
8. Principal oc Attorney	cupation / Job title (See Instruction	ns)		yer (See Instructions) rmstrong Lee Baker
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)
10/20/2022	Team Plus Build, LLC			\$3,000.00
	Contributor address;	City; State;	ZIP Code	
	13105 Northwest Fwy Ste 1110 I	Houston, TX 77040-63	20	
8. Principal oc	cupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)
10/07/2022	Haddis Tewolde			\$500.00
	6. Contributor address;	City; State;	ZIP Code	
	16522 Teak Dr Missouri City, T	X 77489-3928		
8. Principal oc engineer	cupation / Job title (See Instruction	ns)	1	yer (See Instructions) II-Terra

SCHEDULE A1

The Instruction Guide explains how to complete this form.			Total pages Schedule A1: not available		
2. FILER NAME Dexter Lorance	-Navario McCoy		3. Filer ID (Ethics Commission Filers)		
4. Date	5. Full name of contributorout-of-state PAC _		7. Amount of contribution (\$)		
10/16/2022	Kenneth Thomas		\$100.00		
	6. Contributor address; City; State;	ZIP Code			
	16707 Wilsons Creek Ln Houston, TX 77083-7219				
8. Principal occul Analyst	pation / Job title (See Instructions)		yer (See Instructions) hevron		
4. Date	5. Full name of contributorout-of-state PAC _		7. Amount of contribution (\$)		
10/18/2022	Resha Thomas		\$150.00		
	6. Contributor address; City; State;	ZIP Code			
	7638 Caddo Rd Houston, TX 77016-3922				
8. Principal occu	pation / Job title (See Instructions)	9 Employ	yer (See Instructions)		
4. Date	5. Full name of contributorout-of-state PAC _		7. Amount of contribution (\$)		
10/02/2022	John Vanison		\$100.00		
	6. Contributor address; City; State;	ZIP Code			
	22206 Auburn Canyon Ln Richmond, TX 77469-5638				
Principal occup Not Employe	pation / Job title (See Instructions)		ver (See Instructions) ot Employed		
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)		
10/20/2022	Swati Verma		\$5,000.00		
	6. Contributor address; City; State;	ZIP Code			
	2601 Hewn Rock Way Pearland, TX 77584-3286				
	pation / Job title (See Instructions)		ver (See Instructions)		
CEO	C. C. II	Di	isha Services, Inc.		
4. Date	5. Full name of contributorout-of-state PAC _		7. Amount of contribution (\$)		
10/05/2022	Tricia Vincent		\$150.00		
	6. Contributor address; City; State;	ZIP Code			
	8038 Stoneyway Dr Houston, TX 77040-5156				
8. Principal occup	pation / Job title (See Instructions)	9 Employ	yer (See Instructions)		

SCHEDULE A1

The	Instruction Guide explains how	to complete this for	m.	Total pages Schedule A1: not available
2. FILER NAM Dexter Lora	ME nce-Navario McCoy			3. Filer ID (Ethics Commission Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)
10/04/2022	Laran Vondo			\$250,00
	6. Contributor address;	City; State;	ZIP Code	425 6166
	1703 Lake Quitman Dr Richmon	id, TX 77406-8081		
8. Principal oc	ccupation / Job title (See Instruction	ns)	9 Emplo	oyer (See Instructions)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)
09/30/2022	Danielle Watkins			\$40.00
	6. Contributor address;	City; State;	ZIP Code	
	150 W Sam Houston Pkwy N Ho	ouston, TX 77024-4733		
8. Principal oc	ccupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)
10/03/2022	Kim Watkins			\$40.00
	6. Contributor address;	City; State;	ZIP Code	
	16218 Waiting Spring Cir Houst	on, TX 77095-4548		
8. Principal oc Retired	ccupation / Job title (See Instruction	ns)		yer (See Instructions) Retired
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)
10/02/2022	Lisa White			\$25.00
	6. Contributor address;	City; State;	ZIP Code	
	427 Indian Summer Dr Sugar La	nd, TX 77479-5179		
8. Principal oc	cupation / Job title (See Instruction	ns)	9 Emplo	oyer (See Instructions)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)
10/23/2022	Gerald Womack	_		\$1,000.00
	6. Contributor address;	City; State;	ZIP Code	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	4412 Almeda Rd Houston, TX 7			
	ccupation / Job title (See Instruction		1	byer (See Instructions) Vomack Development
Real Estat			1	Womack Development

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form. 2. FILER NAME Dexter Lorance-Navario McCoy			Total pages Schedule A2: not available		
			3. Filer ID (Ethics Commission Filers)		
4. TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIBUTION	ONS			\$0.00
5 Date 6 Full name of contributor out-of-state PAC The Texas Gulf Coast AFL-CIO Working People PAC 7 Contributor address; City; State; Zip Code 2506 Sutherland St Houston, TX 77023-5305				8 Amount of contribution (\$) \$8,136.00 Check if travel outside	9 In-Kind contribution description Direct voter contact e of Texas, complete Schedule T
10 Principal occ	supation / Job Title (FOR NON-JUDICIAL) (See Instructions)	11 Employer (FOR	NON-J	UDICIAL) (See Instruction	ons)
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)			
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of cont	tributor's	s spouse (if any) (FOR J	UDICIAL)
16 If contributor	is a child, law firm of parents (if any) (FOR JUDICIAL)				

LOANS

SCHEDULE E

The Ins	struction Guide explains how to complete this f	orm.	Total pages Schedenot available	ule E:
FILER NAME Dexter Lorance	-Navario McCoy		3. Filer ID (Ethics Con	nmission Filers)
4. TOTAL OF U	INITEMIZED LOANS			\$0.00
5. Date of loan 12/25/2021	7. Name of lenderout-of-state PAC Dexter L. McCoy			9. Loan Amount \$6,000.00
6 Is lender a financial Institution?	8. Lender address; City; State 23534 Mcnabb Spur Ln Richmond, TX 77469-2540	te; ZIP	Code	10. Interest rate 0.00% 11. Maturity date 01/01/2023
12. Principal occ Public Service	upation / Job title (See Instructions)		(See Instructions) elf-Employed	
14. Description of ✓ none	of Collateral	15 Check if po	ersonal funds were depo	osited into political account
16 GUARANTOR INFORMATION	17 Name of guarantor		19	Amount Guaranteed (\$)
not applicable	18 Guarantor address; City; Sta	te; ZIP	Code	
20 Principal Occ	upation (See Instructions)	21 Emple	oyer (See Instructions)	

	EXPENDITUR	RE CATEGORIES FOR	BOX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Fees Po Food/Beverage Expense Pri		Transportation Expense bor Travel In Dist Travel Out of Other (enter a	
1. Total pages Schedule F1:	2. FILER NAME			Commission Filers)
	Dexter Lorance-Navario McCoy		, , , , , , , , , , , , , , , , , , , ,	,
4 Date	5 Payee name			
09/30/2022	ActBlue			
6 Amount	7 Payee address;	City;	State:	Zip Code
\$34.77	, , , , , , , , , , , , , , , , , , , ,	,.		
	366 Summer St Somerville, MA 02	2144-3132		
8	(a) Category (See categories listed at the	ne top of this schedule) (b)	Description	
PURPOSE	Fees		ervice Fee	
OF EXPENDITURE				Control of the contro
	Check if travel outside of Texas, comple	te Schedule T	Check if Austin, TX, of	ficeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Offic	e sought	Office held
4 Date	5 Payee name			
10/02/2022	ActBlue			
6 Amount	7 Payee address;	City;	State:	Zip Code
\$44.46	366 Summer St Somerville, MA 02	2144-3132		
8	(a) Category (See categories listed at the	e top of this schedule) (b)	Description	
PURPOSE OF	Fees		ervice Fee	
EXPENDITURE				
	Check if travel outside of Texas, comple		Check if Austin, TX, off	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office	e sought	Office held
4 Date	5 Payee name			
10/04/2022	ActBlue			
6 Amount	7 Payee address;	City;	State:	Zip Code
\$16.80	366 Summer St Somerville, MA 02	2144-3132		
8	(a) Category (See categories listed at th	e top of this schedule) (b)	Description	
PURPOSE OF	Fees		ervice Fee	
EXPENDITURE				
	Check if travel outside of Texas, complete			iceholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office	e sought	Office held
	ATTACH ADDITIONAL COPIE	S OF THIS SCHEDU	LE AS NEEDED	ay a tangga a ga a ga a ga a ga a ga a ga

	EXPENDITURE CATEGORIE	S FOR BOX	8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Office Overhead/Rer Fees Polling Expense Food/Beverage Expense Printing Expense Gift/Awards/Memorials Expense Salaries/Wages/Cont Legal Services The Instruction Guide explains how to describe the services	tract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.		
1. Total pages Schedule F1:	FILER NAME Dexter Lorance-Navario McCoy	3. F	iler ID (Ethics Commission Filers)		
4 Date 10/06/2022 6 Amount \$19.76	5 Payee name ActBlue 7 Payee address; City;	State:	Zip Code		
366 Summer St Somerville, MA 02144-3132					
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule Fees	Service F	ee		
9 Complete ONLY if direct expenditure to benefit C/OH	Check if travel outside of Texas, complete Schedule T Candidate/Officeholder name	Office soug	ck if Austin, TX, officeholder living expense ht Office held		
4 Date 10/09/2022	5 Payee name ActBlue				
6 Amount \$83.75	7 Payee address; City; 366 Summer St Somerville, MA 02144-3132	State:	Zip Code		
PURPOSE OF	(a) Category (See categories listed at the top of this schedule Fees	(b) Descr Service F	-		
EXPENDITURE	Check if travel outside of Texas, complete Schedule T	Che	ck if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office soug	ht Office held		
4 Date 10/11/2022	5 Payee name ActBlue				
6 Amount \$23.70	7 Payee address; City; 366 Summer St Somerville, MA 02144-3132	State:	Zip Code		
8 PURPOSE OF	(a) Category (See categories listed at the top of this schedule Fees	(b) Desci Service F			
EXPENDITURE	Check if travel outside of Texas, complete Schedule T	Che	ck if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office soug	ht Office held		
	ATTACH ADDITIONAL COPIES OF THIS SC	HEDULE A	S NEEDED		

	EXPENDITURE CATEGORIES I	FOR BOX 8	(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Office Overhead/Rental Fees Polling Expense Printing Expense Gift/Awards/Memorials Expense Salaries/Wages/Contract Legal Services The Instruction Guide explains how to contract the services	ct Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) orm.
1. Total pages Schedule F1:	2. FILER NAME	3. File	er ID (Ethics Commission Filers)
	Dexter Lorance-Navario McCoy		
4 Date	5 Payee name		
10/16/2022	ActBlue		
6 Amount \$143.23	7 Payee address; City; 366 Summer St Somerville, MA 02144-3132	State:	Zip Code
8	(a) Category (See categories listed at the top of this schedule)	(b) Descrip	tion
PURPOSE OF	Fees	Service Fee	
EXPENDITURE			
·	Check if travel outside of Texas, complete Schedule T		if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4 Date	5 Payee name		
10/23/2022	ActBlue		
6 Amount \$67.38	7 Payee address; City; 366 Summer St Somerville, MA 02144-3132	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed at the top of this schedule) Fees	(b) Descript Service Fee	tion .
EXPENDITURE	Check if travel outside of Texas, complete Schedule T	Check	if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4 Date	5 Payee name		
10/03/2022	Allied Signs		
6 Amount \$237.96	7 Payee address; City; 6820 Harwin Dr Houston, TX 77036-2210	State:	Zip Code
8	(a) Category (See categories listed at the top of this schedule)	(b) Descript	tion
PURPOSE OF	Advertising Expense	Campaign m	aterials
EXPENDITURE	Check if travel outside of Texas, complete Schedule T	Check	if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS SCHE	DULE AS	NEEDED

	EXPENDITURE	CATEGORIES FOR	BOX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Fees Pollii		Transportation E Expense or Travel In District Travel Out of Dis Other (enter a ca	
1. Total pages Schedule F1:	2. FILER NAME		3. Filer ID (Ethics Co	ommission Filers)
	Dexter Lorance-Navario McCoy		,	,
4 Date	5 Payee name			
10/18/2022	Allied Signs			
6 Amount \$903.89	7 Payee address; C 6820 Harwin Dr Houston, TX 77036	•	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the Advertising Expense	Can	Description mpaign signs	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Check if Austin, TX, office sought	Office held
4 Date 10/11/2022	5 Payee name Amazon			
6 Amount \$44.56	7 Payee address; C 410 Terry Ave N Seattle, WA 98109	•	State:	Zip Code
8	(a) Category (See categories listed at the	top of this schedule) (b) [Description	
PURPOSE OF	Office Overhead/Rental Expense		npaign supplies	
EXPENDITURE	Check if travel outside of Texas, complete	Schedule T	Check if Austin, TX, office	holder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office	sought	Office held
4 Date	5 Payee name			
10/04/2022	Ampersand Consulting		· Argentina -	
6 Amount \$18,295.25	7 Payee address; Ci 4105 Penn Ave Pittsburgh, PA 15224		State:	Zip Code
PURPOSE OF	(a) Category (See categories listed at the Advertising Expense		Description ect mail	
EXPENDITURE	Check if travel outside of Texas, complete	Schedule T	Check if Austin, TX, office	holder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office	sought	Office held
	ATTACH ADDITIONAL COPIES	OF THIS SCHEDUL	E AS NEEDED	

	EXPENDITURE CATEGORIES	FOR BOX 8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made E Candidate/Officeholder/Political Committee Credit Card Payment	Legal Services	Transportation Equipment & Related Expense act Labor Travel In District Travel Out of District Other (enter a category not listed above)
	The Instruction Guide explains how to co	The state of the s
Total pages Schedule F1:	2. FILER NAME Dexter Lorance-Navario McCoy	3. Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	
10/11/2022	Ampersand Consulting	
6 Amount	7 Payee address; City;	State: Zip Code
\$14,987.29	4105 Penn Ave Pittsburgh, PA 15224-1305	
8	(a) Category (See categories listed at the top of this schedule)	(b) Description
PURPOSE OF	Advertising Expense	Direct mail
EXPENDITURE	Check if travel outside of Texas, complete Schedule T	Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date	5 Payee name	
10/18/2022	Ampersand Consulting	
6 Amount \$12,988.24	7 Payee address; City; 4105 Penn Ave Pittsburgh, PA 15224-1305	State: Zip Code
8	(a) Category (See categories listed at the top of this schedule)	(b) Description
PURPOSE OF	Advertising Expense	Direct mail
EXPENDITURE	Check if travel outside of Texas, complete Schedule T	Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date	5 Payee name	
10/13/2022	James Cardona	
6 Amount \$2,500.00	7 Payee address; City;	State: Zip Code
	5216 Leeland St Houston, TX 77023-2022	
8	(a) Category (See categories listed at the top of this schedule)	(b) Description
PURPOSE OF	Consulting Expense	Consulting fee
EXPENDITURE	Check if travel outside of Texas, complete Schedule T	Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
expenditure to benefit C/OH	Candidate/Officeholder name ATTACH ADDITIONAL COPIES OF THIS SCH	

	EXPENDITUR	RE CATEGORIES FOR	R BOX 8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee	Fees Pol	ice Overhead/Rental lling Expense nting Expense laries/Wages/Contract La	Tr Ex abor Tr Tr	olicitation/Fundraising Expense ansportation Equipment & Related spense avel In District avel Out of District ther (enter a category not listed above)
Credit Card Payment	The Instruction Guide e	explains how to comple	ete this for	m.
Total pages Schedule F1:	FILER NAME Dexter Lorance-Navario McCoy		3. Filer	ID (Ethics Commission Filers)
4 Date	5 Payee name			
10/23/2022	Chevron			
6 Amount \$39.41	7 Payee address;	City;	State:	Zip Code
	1010 Jackson St Richmond, TX 77	469-3423		
8 PURPOSE OF	(a) Category (See categories listed at the		Description	on
EXPENDITURE	Check if travel outside of Texas, comple			Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Offic	ce sought	Office held
4 Date	5 Payee name			
10/15/2022	Circle K			
6 Amount \$70.24	7 Payee address; 207 E Highway 90 Alt Richmond,	City; TX 77406	State:	Zip Code
8	(a) Category (See categories listed at th	the of this actual (b)	Description	on
PURPOSE OF	Food/Beverage Expense	- top -:	lock walking	
EXPENDITURE	Check if travel outside of Texas, complete	te Schedule T	Check if	Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Offic	ce sought	Office held
4 Date	5 Payee name			
10/03/2022	Fort Bend County Fair Association			
6 Amount \$30.00	7 Payee address; 4310 TX-36 Rosenberg, TX 77471	City;	State:	Zip Code
8	(a) Category (See categories listed at th	e top of this schedule) (b)	Description	on
PURPOSE OF	Contributions/Donations Made By Candidate/Officeholder/Political Committee	D	Oonation	
EXPENDITURE	Check if travel outside of Texas, comple	te Schedule T	Check if	Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Offic	e sought	Office held
	ATTACH ADDITIONAL COPIE	S OF THIS SCHEDU	JLE AS N	EEDED

	EXPENDIT	URE CATEGORIES I	FOR BOX 8	3(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contract de explains how to con	ct Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above)
	2. FILER NAME	o explaine new to con		er ID (Ethics Commission Filers)
1. Total pages ochedule 11.	Dexter Lorance-Navario McCo	v	J. 1 II	El 1D (Ethics Commission Filers)
4 Date		,		
10/25/2022	5 Payee name Fort Bend Democratic Party			
6 Amount	7 Payee address;	City;	State:	Zip Code
\$200.00	3515 SOUTHWEST Fwy # 204			Zip Gode
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descrip	otion
PURPOSE	Contributions/Donations Made By	at the top of the defication	Donation	
OF EXPENDITURE	Candidate/Officeholder/Political Co	mmittee	<u> </u>	
EXI ENDITORE	Check if travel outside of Texas, cor	mplete Schedule T	Check	k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held
4 Date	5 Payee name			
09/30/2022	Frost Bank			
6 Amount \$15.00	7 Payee address; PO Box 1600 San Antonio, TX	City; 78296-1600	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed a Fees	at the top of this schedule)	(b) Descrip	
EXPENDITURE	Check if travel outside of Texas, con	nplete Schedule T	Check	r if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	(Office sough	t Office held
4 Date	5 Payee name			
10/03/2022	Frost Bank			
3 Amount \$15.00	7 Payee address; PO Box 1600 San Antonio, TX	City; 78296-1600	State:	Zip Code
8	(a) Category (See categories listed a	at the top of this schedule)	(b) Descrip	otion
PURPOSE OF	Fees		wire transfe	
EXPENDITURE	Check if travel outside of Texas, con	nplete Schedule T	Check	r if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	(Office sough	t Office held
	ATTACH ADDITIONAL COP	PIES OF THIS SCHE	DULE AS	NEEDED

	EXPENDITUR	E CATEGORIES FOR	BOX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Fees Pol		Transportation Expense bor Travel In Distravel Out of Other (enter a	
Total pages Schedule F1:	2. FILER NAME			Commission Filers)
The second pages of the second	Dexter Lorance-Navario McCoy		0. 1 1101 12 (2111100	
4 Date	5 Payee name			
10/03/2022	Frost Bank			
6 Amount \$15.00	7 Payee address;	City;	State:	Zip Code
	PO Box 1600 San Antonio, TX 782	296-1600		
8	(a) Category (See categories listed at the	e top of this schedule) (b)	Description	
PURPOSE OF	Fees wire transfer fee			
EXPENDITURE	Check if travel outside of Texas, complete	te Schedule T	Check if Austin, TX, off	iceholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office	e sought	Office held
4 Date	5 Payee name			
10/05/2022	Frost Bank			
6 Amount \$15.00	7 Payee address; PO Box 1600 San Antonio, TX 782		State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed at the Fees		Description re transfer fee	
EXPENDITURE	Check if travel outside of Texas, complet	te Schedule T	Check if Austin, TX, off	iceholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office	e sought	Office held
4 Date	5 Payee name			
10/07/2022	Frost Bank			
6 Amount \$15.00	7 Payee address; O PO Box 1600 San Antonio, TX 782		State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed at the Fees		Description re transfer fee	
EXPENDITURE	Check if travel outside of Texas, complet	te Schedule T	Check if Austin, TX, off	iceholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office	e sought	Office held
	ATTACH ADDITIONAL COPIES	S OF THIS SCHEDU	LE AS NEEDED	

	EXPENDITURE CATEGORIE	S FOR B	Ox 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Office Overhead/Rer Fees Polling Expense Food/Beverage Expense Printing Expense Gift/Awards/Memorials Expense Legal Services Salaries/Wages/Con Legal Services	tract Labor	Transporta Expense Travel In I Travel Out Other (ent	
Total pages Schedule F1:	2. FILER NAME			cs Commission Filers)
pages contains	Dexter Lorance-Navario McCoy		•	,
4 Date	5 Payee name			
10/11/2022	Frost Bank			
6 Amount	7 Payee address; City;	Sta	ate:	Zip Code
\$15.00	PO Box 1600 San Antonio, TX 78296-1600			
8	(a) Category (See categories listed at the top of this schedule	(b) De	escription	
PURPOSE	Fees		transfer fee	
OF EXPENDITURE				
EXI ENDITORE	Check if travel outside of Texas, complete Schedule T		Check if Austin, TX	, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office s	ought	Office held
4 Date	5 Payee name			
10/12/2022	Frost Bank			
6 Amount \$15.00	7 Payee address; City; PO Box 1600 San Antonio, TX 78296-1600	Sta	ate:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed at the top of this schedule Fees	,	escription transfer fee	
EXPENDITURE	Check if travel outside of Texas, complete Schedule T		Check if Austin, TX	, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office s	ought	Office held
4 Date	5 Payee name			
10/17/2022	Frost Bank			
6 Amount \$15.00	7 Payee address; City, PO Box 1600 San Antonio, TX 78296-1600	Sta	ate:	Zip Code
8	(a) Category (See categories listed at the top of this schedule	(b) De	escription	· · · · · · · · · · · · · · · · · · ·
PURPOSE OF	Fees	,	transfer fee	
EXPENDITURE	Check if travel outside of Texas, complete Schedule T		Check if Austin, TX	, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office s	ought	Office held
	ATTACH ADDITIONAL COPIES OF THIS SC	HEDULE	AS NEEDE)

	EXPENDITU	IRE CATEGORIES F	OR BOX 8(a))
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Fees P Food/Beverage Expense P		Tra Ex t Labor Tra Tra Ot	dicitation/Fundraising Expense ansportation Equipment & Related pense avel In District avel Out of District her (enter a category not listed above)
Total pages Schedule F1:	2. FILER NAME		3. Filer	D (Ethics Commission Filers)
	Dexter Lorance-Navario McCoy			
4 Date	5 Payee name			
10/24/2022	Frost Bank			
6 Amount \$15.00	7 Payee address; PO Box 1600 San Antonio, TX 7	City; 78296-1600	State:	Zip Code
8	(a) Category (See categories listed at	the top of this schedule)	(b) Description	n
PURPOSE OF	Fees		wire transfer fo	ee
EXPENDITURE	Check if travel outside of Texas, comp	plete Schedule T	Check if /	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	C	Office sought	Office held
4 Date	5 Payee name			
10/23/2022	Н-Е-В			
6 Amount \$46.64	7 Payee address; 19988 Southwest Fwy Sugar Lan	City; ad, TX 77479-6505	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed at Travel In District	the top of this schedule)	(b) Description	n
EXPENDITURE	Check if travel outside of Texas, comp	plete Schedule T	Check if A	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	C	Office sought	Office held
4 Date	5 Payee name			
10/27/2022	Н-Е-В			
6 Amount \$46.65	7 Payee address; 19988 Southwest Fwy Sugar Lan	City; ad, TX 77479-6505	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed at Travel In District	the top of this schedule)	(b) Description	n
EXPENDITURE	Check if travel outside of Texas, comp	plete Schedule T	Check if	Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	C	Office sought	Office held
	ATTACH ADDITIONAL COPI	ES OF THIS SCHE	DULE AS N	EEDED

	EXPENDITURE C	ATEGORIES FOR I	BOX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Fees Polling I		Transportation Expense or Travel In Distr Travel Out of Other (enter a	
1. Total pages Schedule F1:	2. FILER NAME		3. Filer ID (Ethics	Commission Filers)
	Dexter Lorance-Navario McCoy			
4 Date	5 Payee name			
10/11/2022	Home Depot			
6 Amount	7 Payee address; City;	S	tate:	Zip Code
\$237.55	24400 Commercial Dr Rosenberg, TX 7	77471-6175		
8	(a) Category (See categories listed at the top	of this schedule) (b) D	escription	
PURPOSE OF	Advertising Expense		plies for signs	
EXPENDITURE				
	Check if travel outside of Texas, complete Scr			iceholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office	sought	Office held
4 Date	5 Payee name			
10/17/2022	Home Depot			
6 Amount \$399.92	7 Payee address; City; 24400 Commercial Dr Rosenberg, TX 7		tate:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top- Advertising Expense		Description plies for signs	
EXI ENDITORE	Check if travel outside of Texas, complete Sch	edule T	Check if Austin, TX, off	iceholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office	sought	Office held
4 Date	5 Payee name			
10/06/2022	Human Age Digital			
6 Amount \$10,000.00	7 Payee address; City; 2700 Post Oak Blvd Fl 21 Houston, TX		tate:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed at the top Consulting Expense		Description ital Services	
EXPENDITURE	Check if travel outside of Texas, complete Sch	nedule T	Check if Austin, TX, off	iceholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office	sought	Office held
	ATTACH ADDITIONAL COPIES O	F THIS SCHEDUL	E AS NEEDED	

	EXPENDITU	JRE CATEGORIES F	OR BOX 8	B(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Fees P Food/Beverage Expense P			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) orm.
1. Total pages Schedule F1:	2. FILER NAME		3. File	er ID (Ethics Commission Filers)
	Dexter Lorance-Navario McCoy			
4 Date	5 Payee name			
10/25/2022	J&N Enterprises			
6 Amount \$227.33	7 Payee address; 2519 Fairway Park Dr Houston,	City;	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed at Printing Expense	a) Category (See categories listed at the top of this schedule) Printing Expense (b) Description Thank you cards		
EXPENDITURE	Check if travel outside of Texas, comp	plete Schedule T	Check	if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	
4 Date 10/27/2022	5 Payee name Dexter L. McCoy			
6 Amount \$92.01	7 Payee address; 23534 Mcnabb Spur Ln Richmon	City; nd, TX 77469-2540	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed at Loan Repayment/Reimbursement	the top of this schedule)	(b) Descrip Reimburser	otion ment for printer ink
EXPENDITURE	Check if travel outside of Texas, comp	plete Schedule T	Check	if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	C	Office sough	t Office held
4 Date	5 Payee name			
10/05/2022	McDonalds			
6 Amount \$15.11	7 Payee address; 24501 SOUTHWEST Fwy Roser	City; nberg, TX 77469	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed at Food/Beverage Expense	the top of this schedule)	(b) Descrip Campaign	
EXPENDITURE	Check if travel outside of Texas, comp	plete Schedule T	Check	t if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	(Office sough	t Office held
	ATTACH ADDITIONAL COPI	ES OF THIS SCHE	EDULE AS	NEEDED

<u> </u>	EXPENDITURE CATEGORIE	FOR BOX 8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Office Overhead/Ren Fees Polling Expense Food/Beverage Expense Printing Expense Gift/Awards/Memorials Expense Salaries/Wages/Cont Legal Services The Instruction Guide explains how to office Overhead/Ren Polling Expense Printing Expense Printing Expense Salaries/Wages/Cont	Transportation Equipment & Related Expense act Labor Travel In District Travel Out of District Other (enter a category not listed above)
Total pages Schedule F1:	FILER NAME Dexter Lorance-Navario McCoy	3. Filer ID (Ethics Commission Filers)
4 Date 10/22/2022 6 Amount	5 Payee name McDonalds 7 Payee address; City;	State: Zip Code
\$15.65	24501 SOUTHWEST Fwy Rosenberg, TX 77469	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule Food/Beverage Expense	(b) Description Campaign meeting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Check if Austin, TX, officeholder living expense Office sought Office held
4 Date 10/04/2022	5 Payee name Merci Mohagheghi	
6 Amount \$2,000.00	7 Payee address; City; 1010 Rosine St Apt 25 Houston, TX 77019-3871	State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule, Consulting Expense	(b) Description Consulting fee
9 Complete ONLY if direct expenditure to benefit C/OH	Check if travel outside of Texas, complete Schedule T Candidate/Officeholder name	Check if Austin, TX, officeholder living expense Office sought Office held
4 Date 10/04/2022	5 Payee name Merci Mohagheghi	
6 Amount \$4,000.00	7 Payee address; City; 1010 Rosine St Apt 25 Houston, TX 77019-3871	State: Zip Code
PURPOSE OF	(a) Category (See categories listed at the top of this schedule Consulting Expense	(b) Description Consulting fee
9 Complete ONLY if direct expenditure to benefit C/OH	Check if travel outside of Texas, complete Schedule T Candidate/Officeholder name	Check if Austin, TX, officeholder living expense Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS SCI	HEDULE AS NEEDED

	EXPENDITURE CATEGORIES	FOR BOX 8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Office Overhead/Renta Fees Polling Expense Food/Beverage Expense Printing Expense Gift/Awards/Memorials Expense Salaries/Wages/Contra Legal Services The Instruction Guide explains how to co	Transportation Equipment & Related Expense act Labor Travel In District Travel Out of District Other (enter a category not listed above)
Total pages Schedule F1:	FILER NAME Dexter Lorance-Navario McCoy	3. Filer ID (Ethics Commission Filers)
4 Date 10/14/2022	5 Payee name Merci Mohagheghi	
6 Amount \$2,000.00	7 Payee address; City; 1010 Rosine St Apt 25 Houston, TX 77019-3871	State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Consulting Expense	(b) Description Consulting fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Check if Austin, TX, officeholder living expense Office sought Office held
4 Date 10/14/2022	5 Payee name Merci Mohagheghi	
6 Amount \$2,000.00	7 Payee address; City; 1010 Rosine St Apt 25 Houston, TX 77019-3871	State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Consulting Expense	(b) Description Consulting fee
Complete ONLY if direct expenditure to benefit C/OH	Check if travel outside of Texas, complete Schedule T Candidate/Officeholder name	Check if Austin, TX, officeholder living expense Office sought Office held
4 Date 10/25/2022	5 Payee name Danish Nelson	
6 Amount \$1,020.00	7 Payee address; City; 9900 S Mason Rd Apt 5312 Richmond, TX 77406-586	State: Zip Code
PURPOSE OF	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Photo/Video service
9 Complete ONLY if direct expenditure to benefit C/OH	Check if travel outside of Texas, complete Schedule T Candidate/Officeholder name	Check if Austin, TX, officeholder living expense Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS SCH	IEDULE AS NEEDED

	EXPENDIT	URE CATEGORIES	FOR BOX 8	B(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contract e explains how to con	ct Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
Total pages Schedule F1:	2. FILER NAME			er ID (Ethics Commission Filers)
1. Total pages contodule 1 1.	Dexter Lorance-Navario McCoy	/	0. 11	Crib (Ediso Commission Files)
4 Date	5 Payee name			
10/14/2022	NGP VAN			
3 Amount	7 Payee address;	City;	State:	Zip Code
\$195.00	1445 New York Ave NW Ste 20		005-2158	
8	(a) Category (See categories listed a	at the top of this schedule)	(b) Descrip	otion
PURPOSE OF	Office Overhead/Rental Expense		Database	
EXPENDITURE	Check if travel outside of Texas, com	nolete Schedule T	Check	if Austin, TX, officeholder living expense
9 Complete ONLY if direct	Candidate/Officeholder name		Office sough	
expenditure to benefit C/OH	Candidate/Officeriolder flame		omoo dodg	Sillo IIsla
1 Date	5 Payee name			
10/17/2022	NGP VAN			
8 Amount \$85.82	7 Payee address; 1445 New York Ave NW Ste 20	City; 00 Washington, DC 200	State: 005-2158	Zip Code
В	(a) Category (See categories listed a	at the top of this schedule)	(b) Descrip	otion
PURPOSE OF	Office Overhead/Rental Expense	t the up of this schodulo)	Database	
EXPENDITURE	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense			
Omplete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	d Office held
1 Date	5 Payee name			
10/24/2022	NGP VAN			
\$ Amount \$218.94	7 Payee address; 1445 New York Ave NW Ste 20	City; 00 Washington, DC 200	State: 005-2158	Zip Code
PURPOSE OF	(a) Category (See categories listed a Office Overhead/Rental Expense	nt the top of this schedule)	(b) Descrip Database	otion
EXPENDITURE	Check if travel outside of Texas, com	plete Schedule T	Check	if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				

	EXPENDITURE CATEGO	RIES FOR I	BOX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Office Overhead Fees Polling Expense Food/Beverage Expense Printing Expense Gift/Awards/Memorials Expense Salaries/Wages Legal Services The Instruction Guide explains how	e Contract Labo	Transportati Expense or Travel In Dis Travel Out o Other (enter	
1. Total pages Schedule F1:	2. FILER NAME		3. Filer ID (Ethic	s Commission Filers)
	Dexter Lorance-Navario McCoy			
4 Date	5 Payee name			
10/21/2022	Office Depot			
6 Amount \$27.05	7 Payee address; City; 5400 FM 1640 Rd Richmond, TX 77469-5431	S	itate:	Zip Code
8	(a) Category (See categories listed at the top of this sci	edule) (b) D	Description	
PURPOSE	Office Overhead/Rental Expense		ice supplies	
OF EXPENDITURE	Office of this day and the point			
EXI ENDITORE	Check if travel outside of Texas, complete Schedule T		Check if Austin, TX,	officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office	sought	Office held
4 Date	5 Payee name			
10/03/2022	Paragon Solutions			
6 Amount \$114.75	7 Payee address; City; 1505 N HYDIN Rd Ste 110 Pittsburgh, PA 152:		tate:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed at the top of this sch Fees	,	Description chant account fees	
EXPENDITURE	Check if travel outside of Texas, complete Schedule T	Г	Check if Austin, TX,	officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office	sought	Office held
4 Date	5 Payee name			
10/24/2022	ReStream Inc.			
6 Amount \$19.00	7 Payee address; City; 515 Congress Ave Ste 1050 Austin, TX 78701-3		tate:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed at the top of this sch Office Overhead/Rental Expense		escription streaming service	
EXPENDITURE	Check if travel outside of Texas, complete Schedule T	Г	Check if Austin, TX,	officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office	sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDUL	E AS NEEDED	

L.				
EXPENDITURE CATEGORIES FOR BOX 8(a)				
Candidate/Officeholder/Political Committee	y Gift/Awards/Memorials Expense Legal Services		ct Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above)
Credit Card Payment	per la company de la company d	de explains how to co		THE PARTY OF THE P
Total pages Schedule F1:	FILER NAME Dexter Lorance-Navario McCog	y	3. Fi	ler ID (Ethics Commission Filers)
4 Date	5 Payee name			
10/23/2022	Shipley Do-nuts			
6 Amount \$9.60	7 Payee address; 4519 Reading Rd Rosenberg, T	City; X 77471-2144	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed a Food/Beverage Expense	at the top of this schedule)	(b) Descri Food for V	
EXPENDITURE	Check if travel outside of Texas, cor	mplete Schedule T	Chec	k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	
4 Date	5 Payee name			
10/18/2022	Sprint to Print			
6 Amount \$667.36	7 Payee address; 8748 Clay Rd Houston, TX 770	City; 980-8109	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed and Advertising Expense	at the top of this schedule)	(b) Descri T-shirts	ption
EXPENDITURE	Check if travel outside of Texas, con	mplete Schedule T	Chec	k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	nt Office held
4 Date	5 Payee name			
10/11/2022	Starbucks			
6 Amount \$25.00	7 Payee address; 28211 Southwest Fwy Rosenber	City; rg, TX 77471-9630	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed a Food/Beverage Expense	at the top of this schedule)	(b) Descri Beverages	ption for volunteers
EXPENDITURE	Check if travel outside of Texas, con	nplete Schedule T	Chec	k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	nt Office held
	ATTACH ADDITIONAL COP	PIES OF THIS SCH	EDULE AS	SNEEDED

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Event Expense Office Overhead/Rental Solicitation/Fundraising Expense Transportation Equipment & Related Expense Consulting Expense Food/Beverage Expense Printing Expense Expense Expense Contributions/Donations Made By Gift/Awards/Memorials Expense Salaries/Wages/Contract Labor Candidate/Officeholder/Political Committee Credit Card Payment The Instruction Guide explains how to complete this form.				
Total pages Schedule F1:		3. Filer ID (Ethics Commission Filers)		
	Dexter Lorance-Navario McCoy	(
4 Date 10/19/2022	5 Payee name USPS			
6 Amount	7 Payee address; City;	State: Zip Code		
\$240.00	5560 FM 1640 Rd Richmond, TX 77469-5424			
8	(a) Category (See categories listed at the top of this schedule)	(b) Description		
PURPOSE OF	Office Overhead/Rental Expense	Postage		
EXPENDITURE	Check if travel outside of Texas, complete Schedule T	Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		
4 Date	5 Payee name			
10/25/2022	USPS			
6 Amount \$132.00	7 Payee address; City; 5560 FM 1640 Rd Richmond, TX 77469-5424	State: Zip Code		
8	(a) Category (See categories listed at the top of this schedule)	(b) Description		
PURPOSE OF	Office Overhead/Rental Expense	Postage		
EXPENDITURE	Check if travel outside of Texas, complete Schedule T	Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct		Office sought Office held		
expenditure to benefit C/OH	Candidate/Oniceriolder name	5 5		
4 Date	5 Payee name			
10/05/2022	Zoom			
6 Amount \$15.74	7 Payee address; City; 6601 College Blvd Leawood, KS 66211-1504	State: Zip Code		
8 PURPOSE OF (a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Video conferencing softward		(b) Description Video conferencing software		
EXPENDITURE	Check if travel outside of Texas, complete Schedule T	Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		
	ATTACH ADDITIONAL COPIES OF THIS SCH	EDULE AS NEEDED		