

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers)

2 Total pages filed:

43

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR

FIRST

MI

NICKNAME

LAST

SUFFIX

James Grady
Prestage

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

36 Big Trail Missouri City TX 77459

☐ Change of Address

5 CANDIDATE/
OFFICEHOLDER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(281) 433-4444

6 CAMPAIGN
TREASURER
NAME

MS / MRS / MR

FIRST

MI

NICKNAME

LAST

SUFFIX

Samuel L
Stewart

7 CAMPAIGN
TREASURER
ADDRESS

STREET ADDRESS (NO PO BOX PLEASE);

APT / SUITE #;

CITY;

STATE;

ZIP CODE

15526 Winter Briar Missouri City

TX 77489

(Residence or Business)

8 CAMPAIGN
TREASURER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(713) 729-5761

9 REPORT TYPE

☐

January 15

☐

30th day before election

☐

Runoff

☐

15th day after campaign
treasurer appointment
(Officeholder Only)

☐

July 15

☒

8th day before election

☐

Exceeded Modified
Reporting Limit

☐

Final Report (Attach C/OH - FR)

10 PERIOD
COVERED

Month

Day

Year

09/30/22

THROUGH

Month

Day

Year

10/29/22

11 ELECTION

ELECTION DATE

Month

Day

Year

11/8/22

ELECTION TYPE

☐

Primary

☐

Runoff

☐

Other
Description

☒

General

☐

Special

12 OFFICE

OFFICE HELD (if any)

County Commissioner

Precinct 2 Fort Bend County

13 OFFICE SOUGHT (if known)

County Commissioner

Precinct 2 Fort Bend County

14 NOTICE FROM
POLITICAL
COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE

COMMITTEE NAME

☐

GENERAL

COMMITTEE ADDRESS

☐

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ Additional Pages

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME <u>James Grady Prestage</u>		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)	\$ 166,950.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 13,156.37
	4. TOTAL POLITICAL EXPENDITURES	\$ 124,979.42
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 262,321.13
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.

Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by _____ this the _____ day of _____, 20 _____, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

OR

(2) Unsworn Declaration

My name is James Grady Prestage, and my date of birth is July 30, 1958.

My address is 36 Big Trail, Missouri City, TX, 77459, Fort Bend.
(street) (city) (state) (zip code) (country)

Executed in Fort Bend County, State of Texas, on the 31st day of October, 20 22.
(month) (year)

James Grady Prestage
Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME

James Grady Prestage

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE

SUBTOTAL
AMOUNT

1.	<input checked="" type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 160,950.00
2.	<input type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/>	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/>	SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 124,979.42
6.	<input type="checkbox"/>	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/>	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/>	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/>	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/>	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/>	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/>	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 20
2 FILER NAME James Grady Prestage		3 Filer ID (Ethics Commission Filers)
4 Date 9/30/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lyle E Henkel	7 Amount of contribution (\$) 2,500⁰⁰
6 Contributor address; City; State; Zip Code 8630 Wyndham Village Dr. Jersey Village, TX 77040		
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Terra Associates
Date 9/30/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Darryl B Carter	Amount of contribution (\$) 2,500⁰⁰
Contributor address; City; State; Zip Code 5651 Wilkerson Way Houston, TX 77056		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Law office of Darryl Carter
Date 9/30/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brad Crain	Amount of contribution (\$) 2,500⁰⁰
Contributor address; City; State; Zip Code 3812 Buckholt Street Pearland, TX 77581		
Principal occupation / Job title (See Instructions) Contractor		Employer (See Instructions) The Crain Group
Date 9/30/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniel K Signorelli	Amount of contribution (\$) 2,500⁰⁰
Contributor address; City; State; Zip Code 1401 Woodlands Parkway The Woodlands, TX 77380		
Principal occupation / Job title (See Instructions) Developer		Employer (See Instructions) Signorelli Companies
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: 20
2 FILER NAME James Grady Prestage		3 Filer ID (Ethics Commission Filers)
4 Date 9/30/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fort Bend Business Coalition	7 Amount of contribution (\$) 1,000⁰⁰
6 Contributor address; City; State; Zip Code 2333 Town Center Drive, suite 100 Sugar Land, TX 77478		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/11/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larry Janak	Amount of contribution (\$) 2,500⁰⁰
Contributor address; City; State; Zip Code 15915 Katy Freeway, suite 300 Houston, TX 77094		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) IDCUS, Inc
Date 10/11/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ben McMillan	Amount of contribution (\$) 2,500⁰⁰
Contributor address; City; State; Zip Code 5931 Desert Oak Way Spring, TX 77379		
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) IDG Architects
Date 10/11/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jim Russ	Amount of contribution (\$) 2,500⁰⁰
Contributor address; City; State; Zip Code 10011 Meadowglen Ln Houston, TX 77042		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) EHRA,
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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2 FILER NAME James Grady Prestage		3 Filer ID (Ethics Commission Filers)
4 Date 10/11/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Derrick Vaughn	7 Amount of contribution (\$) 2,500⁰⁰
6 Contributor address; City; State; Zip Code 19251 Purus Dr Porter, TX 77365		
8 Principal occupation / Job title (See Instructions) Architect		9 Employer (See Instructions) VCS Architects
Date 10/11/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Satya Pilla	Amount of contribution (\$) 5,000⁰⁰
Contributor address; City; State; Zip Code 4103 Oak Blossom Ct Houston, TX 77059		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) i Get Engineering
Date 10/11/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santiago Castaneda	Amount of contribution (\$) 10,000⁰⁰
Contributor address; City; State; Zip Code 2426 Mills Creek Dr. Kingwood, TX 77339		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Omega Engineering
Date 10/11/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D.E.C. PAC	Amount of contribution (\$) 2,500⁰⁰
Contributor address; City; State; Zip Code 1 Greenway Plaza, ste 225 Houston, TX 77046		
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: 20
2 FILER NAME James Grody Prestage		3 Filer ID (Ethics Commission Filers)
4 Date 10/11/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HVJ Political Action Committee	7 Amount of contribution (\$) 2,500⁰⁰
6 Contributor address; City; State; Zip Code 6120 S. Dairy Ashford Rd Houston, TX 77072		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/11/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Balmos	Amount of contribution (\$) 2,500⁰⁰
Contributor address; City; State; Zip Code 13623 Waverly Crest Ct. Cypress, TX 77429		
Principal occupation / Job title (See Instructions) Engineer ✓		Employer (See Instructions) WSB
Date 10/11/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gabriel Johnson	Amount of contribution (\$) 2,500⁰⁰
Contributor address; City; State; Zip Code 9407 Reston Grove Lane Houston, TX 77095		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) ATG Tech
Date 10/11/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Hamilton	Amount of contribution (\$) 2,500⁰⁰
Contributor address; City; State; Zip Code 12315 Woodthorpe Ln Houston, TX 77024		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) BBT

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME James Grady Prestage		3 Filer ID (Ethics Commission Filers)
4 Date 10/11/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harold Reddish	7 Amount of contribution (\$) 2,500⁰⁰
6 Contributor address; City; State; Zip Code 1302 Cedar Terrace Court Sugar Land, TX 77479		
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) BBI
Date 10/11/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ranney W. McDonough	Amount of contribution (\$) 2,500⁰⁰
Contributor address; City; State; Zip Code 3 Pin Oak Estates Dr Bellaire, TX 77401		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) McDonough Engineering
Date 10/11/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lavarance Turner	Amount of contribution (\$) 2,500⁰⁰
Contributor address; City; State; Zip Code P.O. BOX 481 Stafford, TX 77545		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Kaluza Associates
Date 10/11/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donald W. Middleton	Amount of contribution (\$) 2,500⁰⁰
Contributor address; City; State; Zip Code 7118 Pinehook Ln Houston, TX 77016		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Middleton-Brown
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

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2 FILER NAME James Grady Prestage		3 Filer ID (Ethics Commission Filers)
4 Date 10/11/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ovidio N Alanis	7 Amount of contribution (\$) 2,500⁰⁰
6 Contributor address; City; State; Zip Code 8519 Woods Hollow Trl Fulshear, TX 77406		
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Entech
Date 10/11/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Responsible Government PAC	Amount of contribution (\$) 2,500⁰⁰
Contributor address; City; State; Zip Code 5005 Riverway, suite 500 Houston, TX 77056		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/11/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kim Sachtleben	Amount of contribution (\$) 2,500⁰⁰
Contributor address; City; State; Zip Code 2107 City West Blvd Houston, TX 77042		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Costello, Inc
Date 10/11/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nino Corbett	Amount of contribution (\$) 2,500⁰⁰
Contributor address; City; State; Zip Code 27101 Westheimer Pkwy Katy, TX 77494		
Principal occupation / Job title (See Instructions) Developer		Employer (See Instructions) Compass Land Development
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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2 FILER NAME James Grady Prestage		3 Filer ID (Ethics Commission Filers)
4 Date 10/11/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John Calhoun	7 Amount of contribution (\$) 2,500⁰⁰
6 Contributor address; City; State; Zip Code 126 East Amite Jackson, MS 39201		
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) IMS Engineers
Date 10/11/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kamal Aniss	Amount of contribution (\$) 500⁰⁰
Contributor address; City; State; Zip Code 6902 Chantilly Ct. Dallas, TX 75214		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Vanir
Date 10/11/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donald Middleton	Amount of contribution (\$) 2,500⁰⁰
Contributor address; City; State; Zip Code 416 Pickering St Houston, TX 77091		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Brown Middleton
Date 10/11/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James Smith	Amount of contribution (\$) 2,500⁰⁰
Contributor address; City; State; Zip Code 104 Lyndsey Ct Boyd, TX 76023		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Vanir
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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: **20**

2 FILER NAME

James Grady Prestage

3 Filer ID (Ethics Commission Filers)

4 Date

10/11/22

5 Full name of contributor

Anwar Zahid

☐ out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

2,500⁰⁰

6 Contributor address;

City;

State;

Zip Code

**19 Lake Como Dr
Missouri City, TX 77459**

8 Principal occupation / Job title (See Instructions)

Engineer

9 Employer (See Instructions)

Infra Tech Engineers

Date

10/12/22

Full name of contributor

Huitt-Zollars Texas PAC

☐ out-of-state PAC (ID#: _____)

Amount of contribution (\$)

2,500⁰⁰

Contributor address;

City;

State;

Zip Code

**5430 LBJ Freeway, suite 1500
Dallas, TX 75240**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/12/22

Full name of contributor

TSVC PAC

☐ out-of-state PAC (ID#: _____)

Amount of contribution (\$)

2,500⁰⁰

Contributor address;

City;

State;

Zip Code

**10841 S. Ridgeway Road
Olathe, KS 66061**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/12/22

Full name of contributor

Glenn Graham

☐ out-of-state PAC (ID#: _____)

Amount of contribution (\$)

1,200⁰⁰

Contributor address;

City;

State;

Zip Code

**15706 Blanco Trails Ln
Cypress, TX 77429**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Engineer

KCI

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME <u>James Grady Prestage</u>		3 Filer ID (Ethics Commission Filers)
4 Date <u>10/12/22</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>KCI Texas PAC</u>	7 Amount of contribution (\$) <u>1,500⁰⁰</u>
6 Contributor address; City; State; Zip Code <u>11550 W Interstate 10, Ste. 395</u> <u>San Antonio, TX 78230</u>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <u>10/12/22</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Annette C Schatte</u>	Amount of contribution (\$) <u>2,500⁰⁰</u>
Contributor address; City; State; Zip Code <u>5330 Montrose Blvd</u> <u>Houston, TX 77005</u>		
Principal occupation / Job title (See Instructions) <u>Developer</u>		Employer (See Instructions) <u>Americus Holdings</u>
Date <u>10/12/22</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Hemachandra P. Kolluru</u>	Amount of contribution (\$) <u>5,000⁰⁰</u>
Contributor address; City; State; Zip Code <u>94 Heathrow Lane</u> <u>Sugar Land, TX 77479</u>		
Principal occupation / Job title (See Instructions) <u>Engineer</u>		Employer (See Instructions) <u>Amani Engineering</u>
Date <u>10/12/22</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Plumbers Local Union No. 68 PAZ</u>	Amount of contribution (\$) <u>1,000⁰⁰</u>
Contributor address; City; State; Zip Code <u>P.O Box 8746</u> <u>Houston, TX 77249</u>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME <u>James Grady Prestage</u>		3 Filer ID (Ethics Commission Filers)
4 Date <u>10/12/22</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Charles Mgbeike</u>	7 Amount of contribution (\$) <u>1,000⁰⁰</u>
6 Contributor address; City; State; Zip Code <u>6511 Broad Oaks Dr</u> <u>Richmond, TX 77406</u>		
8 Principal occupation / Job title (See Instructions) <u>Engineer</u>		9 Employer (See Instructions) <u>Apex Engineering</u>
Date <u>10/12/22</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Cobb Fendley PAC</u>	Amount of contribution (\$) <u>1,000⁰⁰</u>
Contributor address; City; State; Zip Code <u>13430 Northwest Freeway, Ste 1100</u> <u>Houston, TX 77040</u>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <u>10/12/22</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Gary Gehbauer</u>	Amount of contribution (\$) <u>500⁰⁰</u>
Contributor address; City; State; Zip Code <u>454 W 18th St.</u> <u>Houston, TX 77008</u>		
Principal occupation / Job title (See Instructions) <u>Engineer</u>		Employer (See Instructions) <u>BGE</u>
Date <u>10/12/22</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Jervome D. Love</u>	Amount of contribution (\$) <u>1,500⁰⁰</u>
Contributor address; City; State; Zip Code <u>13609 Fountain Mist Dr</u> <u>Pearland, TX 77584</u>		
Principal occupation / Job title (See Instructions) <u>President CEO</u>		Employer (See Instructions) <u>Texas Black Expo</u>
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

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2 FILER NAME James Grady Prestage		3 Filer ID (Ethics Commission Filers)
4 Date 10/12/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keli M Schroeder	7 Amount of contribution (\$) 500⁰⁰ -
6 Contributor address; City; State; Zip Code 23431 Crimson Star Terrace Katy, TX 77494		
8 Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions) BGE
Date 10/12/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ron Reynolds	Amount of contribution (\$) 500⁰⁰ -
Contributor address; City; State; Zip Code 6140 Highway 6 South #233 Missouri City, TX 77459		
Principal occupation / Job title (See Instructions) State Representative		Employer (See Instructions) State of Texas
Date 10/12/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Randy Randermann	Amount of contribution (\$) 1,000⁰⁰ -
Contributor address; City; State; Zip Code 4860 James Lane Fulshear, TX 77441		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) BGE
Date 10/12/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curtis Lampley	Amount of contribution (\$) 500⁰⁰ -
Contributor address; City; State; Zip Code 3233 Prospect St Houston, TX 77004		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) H.T.S. Inc
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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: 20
2 FILER NAME James Grady Prestage		3 Filer ID (Ethics Commission Filers)
4 Date 10/12/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matthew Froehlich	7 Amount of contribution (\$) 500⁰⁰
6 Contributor address; City; State; Zip Code 22943 Provincial Blvd Katy, TX 77450		
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) BGE
Date 10/12/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John Doucet	Amount of contribution (\$) 2,500⁰⁰
Contributor address; City; State; Zip Code 2300 Gatlin Creek Rd Dripping Springs, TX 78620		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Doucet & Associates
Date 10/12/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Egri Cumminge	Amount of contribution (\$) 2,500⁰⁰
Contributor address; City; State; Zip Code 25 Miramar Heights Circle Sugar Land, TX 77479		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) The BTS Team
Date 10/12/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anthony W Hall, Jr	Amount of contribution (\$) 500⁰⁰
Contributor address; City; State; Zip Code P.O. Box 61228 Houston, TX 77208		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Anthony W Hall
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: 20
2 FILER NAME James Grady Prestage		3 Filer ID (Ethics Commission Filers)
4 Date 10/12/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacqueline Wilson Pope	7 Amount of contribution (\$) 100⁰⁰
6 Contributor address; City; State; Zip Code 2315 Hutchins St. Houston, TX 77004		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 10/12/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linebarger Guggan Blair & Sampson LLP	Amount of contribution (\$) 2,500⁰⁰
Contributor address; City; State; Zip Code P.O. Box 17428 Austin, TX 78760		
Principal occupation / Job title (See Instructions) Attorneys		Employer (See Instructions) Linebarger Law Firm
Date 10/12/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrew Schatte	Amount of contribution (\$) 2,500⁰⁰
Contributor address; City; State; Zip Code 5330 Montrose Blvd Houston, TX 77005		
Principal occupation / Job title (See Instructions) Developer		Employer (See Instructions) Americus Holdings
Date 10/12/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kevin J. Matochs	Amount of contribution (\$) 2,500⁰⁰
Contributor address; City; State; Zip Code 1600 Hwy 6 South, Ste 245 Sugar Land, TX 77478		
Principal occupation / Job title (See Instructions) Developer		Employer (See Instructions) Stonehenge Company

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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: 20
2 FILER NAME James Grady Prestage		3 Filer ID (Ethics Commission Filers)
4 Date 10/12/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) A. Mahendra Rodrigo	7 Amount of contribution (\$) 5,000⁰⁰
6 Contributor address; City; State; Zip Code 15514 Turtle Oak Court Houston, TX 77059		
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) GC Engineering
Date 10/21/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prati Singh	Amount of contribution (\$) 2,500⁰⁰
Contributor address; City; State; Zip Code 3143 Yellowstone Houston, TX 77054		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Associated Testing Laboratories
Date 10/21/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Majed Agha	Amount of contribution (\$) 5,000⁰⁰
Contributor address; City; State; Zip Code 19311 N. Cottonwood Green Ln Cypress, TX 77433		
Principal occupation / Job title (See Instructions) Engineer/CEO		Employer (See Instructions) Agha Engineering
Date 10/21/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leslie A. Holloway	Amount of contribution (\$) 3,000⁰⁰
Contributor address; City; State; Zip Code 404 Oxford St. #1425 Houston, TX 77007		
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Holloway Environmental
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

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: 20
2 FILER NAME James Grady Prestage		3 Filer ID (Ethics Commission Filers)
4 Date 10/21/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bonnie Moss	7 Amount of contribution (\$) 3,000⁰⁰
6 Contributor address; City; State; Zip Code 12418 Westella Dr Houston, TX 77077		
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) MBCO
Date 10/21/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RPS Infrastructure PAC	Amount of contribution (\$) 5,000⁰⁰
Contributor address; City; State; Zip Code 1160 Dairy Ashford Rd, Ste 500 Houston, TX 77079		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/21/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larry W Harrison	Amount of contribution (\$) 250⁰⁰
Contributor address; City; State; Zip Code One Sugar Creek Center Blvd, #1020 Sugar Land, TX 77478		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Harrison Law Firm
Date 10/21/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dave Eastwood	Amount of contribution (\$) 1,000⁰⁰
Contributor address; City; State; Zip Code 17407 Highway 59 N Humble, TX 77396		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Geotech Engineering
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: 20

2 FILER NAME

James Grady Prestage

3 Filer ID (Ethics Commission Filers)

4 Date

10/21/22

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Howard L. Katz

6 Contributor address;

City;

State; Zip Code

1118 Deerfield Rd
Richmond, TX 77406

7 Amount of contribution (\$)

100⁰⁰

8 Principal occupation / Job title (See Instructions)

Attorney

9 Employer (See Instructions)

Howard Katz Firm

Date

11/21/22

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Varinder Singh

Contributor address;

City;

State; Zip Code

12511 Still Harbour Dr
Houston, TX 77041

Amount of contribution (\$)

2,500⁰⁰

Principal occupation / Job title (See Instructions)

President

Employer (See Instructions)

iSani Engineering

Date

10/21/22

Full name of contributor

☐ out-of-state PAC (ID#: _____)

David Collins

Contributor address;

City;

State; Zip Code

7719 Chasewood Dr
Missouri City, TX 77489

Amount of contribution (\$)

-1,500⁰⁰

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Date

10/21/22

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Tavis Zakra

Contributor address;

City;

State; Zip Code

11218 Balmullo Ct.
Richmond, TX 77407

Amount of contribution (\$)

100⁰⁰

Principal occupation / Job title (See Instructions)

President

Employer (See Instructions)

Luxor Builders & Developers

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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: <u>20</u>
2 FILER NAME <u>James Grady Prestage</u>		3 Filer ID (Ethics Commission Filers)
4 Date <u>10/21/22</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Vijaya Rapola</u>	7 Amount of contribution (\$) <u>2,500⁰⁰</u>
6 Contributor address; City; State; Zip Code <u>27822 Azacia Glen Ln</u> <u>Katy, TX 77494</u>		
8 Principal occupation / Job title (See Instructions) <u>Engineer</u>		9 Employer (See Instructions) <u>Kavi Consulting</u>
Date <u>10/21/22</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Asim Tufail</u>	Amount of contribution (\$) <u>2,500⁰⁰</u>
Contributor address; City; State; Zip Code <u>5447 Lavkin St.</u> <u>Houston, TX 77007</u>		
Principal occupation / Job title (See Instructions) <u>Engineer</u>		Employer (See Instructions) <u>Blackline Engineering</u>
Date <u>10/21/22</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Tommy Ruykendall</u>	Amount of contribution (\$) <u>2,500⁰⁰</u>
Contributor address; City; State; Zip Code <u>4216 Penn Lane</u> <u>Richmond, TX 77406</u>		
Principal occupation / Job title (See Instructions) <u>Engineer</u>		Employer (See Instructions) <u>Civil Corp</u>
Date <u>10/21/22</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Sterling Carter</u>	Amount of contribution (\$) <u>500⁰⁰</u>
Contributor address; City; State; Zip Code <u>42 Napoli Way Dr.</u> <u>Missouri City, TX 77459</u>		
Principal occupation / Job title (See Instructions) <u>CEO</u>		Employer (See Instructions) <u>Sterling PT & Wellness</u>
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

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: **20**

2 FILER NAME

James Grady Prestage

3 Filer ID (Ethics Commission Filers)

4 Date

10/21/22

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Spurgeon Robinson

6 Contributor address;

City;

State;

Zip Code

**3209 Drake Springs Ln
Pearland, TX 77584**

7 Amount of contribution (\$)

2,500⁰⁰

8 Principal occupation / Job title (See Instructions)

Consultant

9 Employer (See Instructions)

IMPACT Strategic Consulting, LLC

Date

10/21/22

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jerry Sowell

Contributor address;

City;

State;

Zip Code

**18022 Blueridge Shores.
Cypress, TX 77433**

Amount of contribution (\$)

2,500⁰⁰

Principal occupation / Job title (See Instructions)

Engineer

Employer (See Instructions)

Sowell Construction Management

Date

10/21/22

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Giti Zarinkel

Contributor address;

City;

State;

Zip Code

**18 Berry Blossom Dr.
Spring, TX 77380**

Amount of contribution (\$)

2,500⁰⁰

Principal occupation / Job title (See Instructions)

Engineer

Employer (See Instructions)

Zarinkel Engineering

Date

10/21/22

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Courtney Rose

Contributor address;

City;

State;

Zip Code

**4326 Creek Point Ln
Missouri City, TX 77459**

Amount of contribution (\$)

300⁰⁰

Principal occupation / Job title (See Instructions)

Broker

Employer (See Instructions)

George E Johnson Properties

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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: 20
2 FILER NAME James Grady Prestage		3 Filer ID (Ethics Commission Filers)
4 Date 10/25/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Juanita Shihadeh	7 Amount of contribution (\$) 2,500⁰⁰
6 Contributor address; City; State; Zip Code 11907 Arcadia Bend Lane Houston, TX 77041		
8 Principal occupation / Job title (See Instructions) Administrator		9 Employer (See Instructions) Earth Engineering
Date 10/25/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matthew Gordon	Amount of contribution (\$) 1,000⁰⁰
Contributor address; City; State; Zip Code 4900 Woodway Dr. Ste 1125 Houston, TX 77056		
Principal occupation / Job title (See Instructions) Administrator/Realtor		Employer (See Instructions) Gordon Partners
Date 10/25/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haddis Tewelde	Amount of contribution (\$) 2,500⁰⁰
Contributor address; City; State; Zip Code 16522 Teak Drive Missouri City, TX 77489		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) All-Terra Engineering
Date 10/28/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sakina Lanig	Amount of contribution (\$) 100⁰⁰
Contributor address; City; State; Zip Code 4906 Grapenue Lake Ct. Richmond, TX 77407		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Exodus Advisors

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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: <u>20</u>
2 FILER NAME <u>James Grady Prestage</u>		3 Filer ID (Ethics Commission Filers)
4 Date <u>10/4/22</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Mohan Ballagere</u>	7 Amount of contribution (\$) <u>1,000⁰⁰</u>
6 Contributor address; City; State; Zip Code <u>5600 Bintliff Dr</u> <u>Houston, TX 77036</u>		
8 Principal occupation / Job title (See Instructions) <u>Engineer</u>		9 Employer (See Instructions) <u>Geotest Engineering</u>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 20		2 FILER NAME James Grady Prestage		3 Filer ID (Ethics Commission Filers)	
4 Date 10/3/22		5 Payee name Carolyn Brown			
6 Amount (\$) 300⁰⁰		7 Payee address; City; State; Zip Code 7714 Chasewood Missouri City, TX 77489			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor		(b) Description Phone banking		
	(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 10/3/22		Payee name Dustin Prestage			
Amount (\$) 1,250⁰⁰		Payee address; City; State; Zip Code 1357 Flatbush Ave #1-G Brooklyn, NY 11210			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting		Description Campaign Manager		
	<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 10/3/22		Payee name Willowridge Wall of Honor			
Amount (\$) 1,000⁰⁰		Payee address; City; State; Zip Code 16301 Chimney Rock Houston, TX 77053			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation		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					

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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: <u>20</u>		2 FILER NAME <u>James Grady Prestage</u>		3 Filer ID (Ethics Commission Filers)	
4 Date		5 Payee name <u>Aoede, LLC</u>			
6 Amount (\$) <u>533²²</u>		7 Payee address; <u>2440 Texas Parkway</u> <u>Missouri City, TX 77489</u>		City;	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <u>Office Rental</u>		(b) Description		
	(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 <u>10/3/22</u>		Payee name <u>Vashandra Edwards Campaign</u>			
Amount (\$) <u>1,000⁰⁰</u>		Payee address; <u>1406 New Tree</u> <u>Missouri City, TX 77489</u>		City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Donation</u>		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					
Date <u>10/3/22</u>		Payee name <u>Greta Blankenship</u>			
Amount (\$) <u>200⁰⁰</u>		Payee address; <u>16432 Chimney Rock # 424</u> <u>Houston, TX 77053</u>		City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Contract Labor</u>		Description <u>Phone banking</u>		
	<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		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					

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 20	2 FILER NAME James Grady Prestage	3 Filer ID (Ethics Commission Filers)
4 Date 10/3/22	5 Payee name Chad Arceneaux	
6 Amount (\$) 230⁰⁰	7 Payee address; City; State; Zip Code 2440 Texas Parkway #202 Missouri City, TX 77489	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor	(b) Description Sign Management
	(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 10/4/22	Payee name APRI Tidelands Chapter	
Amount (\$) 100⁰⁰	Payee address; City; State; Zip Code 4414 AKard Houston, TX 77047	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation	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

Date 10/4/22	Payee name Brenda Patton	
Amount (\$) 400⁰⁰	Payee address; City; State; Zip Code 1618 Dusty Ridge Missouri City, TX 77459	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Services	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

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 20		2 FILER NAME James Grady Prestage		3 Filer ID (Ethics Commission Filers)	
4 Date 10/5/22		5 Payee name Chad Arceneaux			
6 Amount (\$) 250⁰⁰		7 Payee address; 2440 Texas Parkway #202 Missouri City, TX 77489		City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor		(b) Description Sign Management		
	(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 10/5/22		Payee name American Storage			
Amount (\$) 1588⁰⁰		Payee address; 2347 Texas Parkway Missouri City, TX 77489		City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Storage Expense		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					
Date 10/7/22		Payee name Mimi's New Orleans Cafe			
Amount (\$) 698²⁰		Payee address; 1833 Richmond Parkway Unit 2100 Richmond, TX 77469		City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		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					

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 20		2 FILER NAME James Grady Prestage		3 Filer ID (Ethics Commission Filers)	
4 Date 10/11/22		5 Payee name APRI Tidelands Chapter			
6 Amount (\$) 350⁰⁰		7 Payee address; City; State; Zip Code 4414 Akard Houston, TX 77047			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Donation		(b) Description		
	(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 10/11/22		Payee name Dustin Prestage			
Amount (\$) 1,250⁰⁰		Payee address; City; State; Zip Code 1357 Flatbush Ave #1-G Brooklyn, NY 11210			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Services		Description Campaign Management		
	<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 10/11/22		Payee name T-Mobile			
Amount (\$) 588⁴³		Payee address; City; State; Zip Code 5684 Highway 6 Missouri City, TX 77459			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Phone Expense		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					

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 20		2 FILER NAME James Grady Prestage		3 Filer ID (Ethics Commission Filers)	
4 Date 10/11/22		5 Payee name Harland Clarke			
6 Amount (\$) 120³⁸		7 Payee address; City; State; Zip Code 15955 La Cantera Pkwy San Antonio, TX 78256			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees for Checks		(b) Description Office Supplies		
	(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 10/13/22		Payee name Cooper for Houston Campaign			
Amount (\$) 500⁰⁰		Payee address; City; State; Zip Code 5866 Schevers Houston, TX 77033			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation		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					
Date 10/13/22		Payee name KMW Business Solutions			
Amount (\$) 150⁰⁰		Payee address; City; State; Zip Code PO Box 1844 Richmond, TX 77406			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		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					
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					

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 20	2 FILER NAME James Grady Prestage	3 Filer ID (Ethics Commission Filers)
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4 Date 10/13/22	5 Payee name Office Depot
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6 Amount (\$) 159	7 Payee address; 5766 Highway 6 Missouri City, TX 77459	City;	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office supplies	(b) Description
	(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
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Date 10/13/22	Payee name Climmons Consulting
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Amount (\$) 2,000	Payee address; 2922 Bull Run Missouri City, TX 77459	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Services	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
------------------------------------------------------------	-------------------------------	---------------	-------------

Date 10/14/22	Payee name Missouri City & Vicinity NAACP
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Amount (\$) 850	Payee address; PO Box 1053 Missouri City, TX 77459	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation	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
------------------------------------------------------------	-------------------------------	---------------	-------------

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 20	2 FILER NAME James Grady Prestage	3 Filer ID (Ethics Commission Filers)
4 Date 10/14/22	5 Payee name Xi Kappa Lambda Foundation	
6 Amount (\$) 650⁰⁰	7 Payee address; City; State; Zip Code 7031 W. Fugua Missouri City, TX 77489	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Donation	
	(b) Description	
(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 10/17/22	Payee name Walmart	
Amount (\$) 161³⁸	Payee address; City; State; Zip Code 9929 Highway 6 Missouri City, TX 77459	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office equipment	
	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		
Date 10/17/22	Payee name Athena Bailey	
Amount (\$) 250⁰⁰	Payee address; City; State; Zip Code 4711 LJ Parkway #4208 Sugar Land, TX 77479	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	
	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		

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 20		2 FILER NAME James Grady Prestage		3 Filer ID (Ethics Commission Filers)	
4 Date 10/17/22		5 Payee name Kovetta Brown			
6 Amount (\$) 1,200⁰⁰		7 Payee address; City; State; Zip Code 5206 Madden Lane Houston, TX 77048			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor		(b) Description		
	(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 10/17/22		Payee name Dustin Prestage			
Amount (\$) 1,250⁰⁰		Payee address; City; State; Zip Code 1357 Flatbush Ave #1-G Brooklyn, NY 11210			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Services		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					
Date 10/17/22		Payee name The Greatest BBL			
Amount (\$) 600⁰⁰		Payee address; City; State; Zip Code 2358 Texas Parkway Missouri City, TX 77489			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		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					
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <div style="font-size: 1.5em;">20</div>	2 FILER NAME <div style="font-size: 1.2em;">James Grady Prestage</div>	3 Filer ID (Ethics Commission Filers)
4 Date <div style="font-size: 1.2em;">10/17/22</div>	5 Payee name <div style="font-size: 1.2em;">Brenda Patton</div>	
6 Amount (\$) <div style="font-size: 1.5em;">400⁰⁰</div>	7 Payee address; City; State; Zip Code <div style="font-size: 1.2em;">1618 Dusty Ridge Missouri City, TX 77459</div>	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <div style="font-size: 1.2em;">Consulting Expense</div>	(b) Description
	(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 <div style="font-size: 1.2em;">10/17/22</div>	Payee name <div style="font-size: 1.2em;">Butler Wiseman Company</div>	
Amount (\$) <div style="font-size: 1.5em;">1,500⁰⁰</div>	Payee address; City; State; Zip Code <div style="font-size: 1.2em;">4107 Inkberry Valley Lane Houston, TX 77045</div>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <div style="font-size: 1.2em;">Advertising Expense</div>	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		

Date <div style="font-size: 1.2em;">10/17/22</div>	Payee name <div style="font-size: 1.2em;">Fort Bend County Parks</div>	
Amount (\$) <div style="font-size: 1.5em;">225⁰⁰</div>	Payee address; City; State; Zip Code <div style="font-size: 1.2em;">9555 Highway 6 Missouri City, TX 77459</div>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <div style="font-size: 1.2em;">Event Expense</div>	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		

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <u>20</u>		2 FILER NAME <u>James Grady Prestage</u>		3 Filer ID (Ethics Commission Filers)	
4 Date <u>10/18/22</u>		5 Payee name <u>M3 Graphics</u>			
6 Amount (\$) <u>540¹⁷</u>		7 Payee address; City; State; Zip Code <u>11730 S. Wilcrest Dr</u> <u>Houston, TX 77099</u>			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <u>Printing Expense</u>		(b) Description		
	(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 <u>10/18/22</u>		Payee name <u>M3 Graphics</u>			
Amount (\$) <u>17,536⁵⁰</u>		Payee address; City; State; Zip Code <u>11730 S. Wilcrest Dr</u> <u>Houston, TX 77099</u>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Printing Expense</u>		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					
Date <u>10/18/22</u>		Payee name <u>Go Fund Me % La Shaun Bougere</u>			
Amount (\$) <u>113⁰⁰</u>		Payee address; City; State; Zip Code <u>8231 Tombstone Dr</u> <u>Arlington, TX 76001</u>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Donation</u>		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					

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <div style="text-align: center;">20</div>	2 FILER NAME <div style="text-align: center;">James Grady Prestage</div>	3 Filer ID (Ethics Commission Filers)
4 Date <div style="text-align: center;">10/18/22</div>	5 Payee name <div style="text-align: center;">Fort Bend Democratic Party</div>	
6 Amount (\$) <div style="text-align: center;">25,000⁰⁰</div>	7 Payee address; City; State; Zip Code <div style="text-align: center;">13515 Southwest Freeway # 204 Sugar Land, TX 77478</div>	
8 <div style="text-align: center;">PURPOSE OF EXPENDITURE</div>	(a) Category (See Categories listed at the top of this schedule) <div style="text-align: center;">Donation</div>	(b) Description
	<div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense </div>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
<div style="display: flex; justify-content: space-between;"> <div>Candidate / Officeholder name</div> <div>Office sought</div> <div>Office held</div> </div>		

Date <div style="text-align: center;">10/18/22</div>	Payee name <div style="text-align: center;">The Tyson Organization</div>		
Amount (\$) <div style="text-align: center;">20,000⁰⁰</div>	Payee address; City; State; Zip Code <div style="text-align: center;">1351 Mistletoe Dr Fort Worth, TX 76110</div>		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <div style="text-align: center;">Fees for Service</div>	Description <div style="text-align: center;">Phone Banking</div>	
	<div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense </div>		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
<div style="display: flex; justify-content: space-between;"> <div>Candidate / Officeholder name</div> <div>Office sought</div> <div>Office held</div> </div>			

Date <div style="text-align: center;">10/18/22</div>	Payee name <div style="text-align: center;">Innovative Solutions</div>		
Amount (\$) <div style="text-align: center;">580⁰⁰</div>	Payee address; City; State; Zip Code <div style="text-align: center;">10862 Redstone Ct. Missouri City, TX 77459</div>		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <div style="text-align: center;">Graphic design</div>	Description	
	<div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense </div>		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
<div style="display: flex; justify-content: space-between;"> <div>Candidate / Officeholder name</div> <div>Office sought</div> <div>Office held</div> </div>			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <u>20</u>		2 FILER NAME <u>James Grady Prestage</u>		3 Filer ID (Ethics Commission Filers)	
4 Date <u>10/19/22</u>		5 Payee name <u>Maurice Lewis</u>			
6 Amount (\$) <u>2,000.00</u>		7 Payee address; City; State; Zip Code <u>9614 Brannock Ln Tomball, TX 77375</u>			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <u>Consulting Service</u>		(b) Description		
	(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 <u>10/19/22</u>		Payee name <u>Independence Fuel / SQ Int'l</u>			
Amount (\$) <u>169.77</u>		Payee address; City; State; Zip Code <u>2202 Texas Parkway Missouri City, TX 77489</u>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Transportation Expense</u>		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					
Date <u>10/20/22</u>		Payee name <u>Jesse Torres</u>			
Amount (\$) <u>2270.58</u>		Payee address; City; State; Zip Code <u>405 San Jose St Richmond, TX 77469</u>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Contract Labor</u>		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					

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <u>20</u>		2 FILER NAME <u>James Grady Prestage</u>		3 Filer ID (Ethics Commission Filers)	
4 Date <u>10/20/22</u>		5 Payee name <u>Houston Chronicle</u>			
6 Amount (\$) <u>5,250⁰⁰ -</u>		7 Payee address; City; State; Zip Code <u>4747 Southwest Frewy</u> <u>Houston, TX 77027</u>			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <u>Advertising Expense</u>		(b) Description		
	(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 <u>10/20/22</u>		Payee name <u>Forward Times</u>			
Amount (\$) <u>250⁰⁰ -</u>		Payee address; City; State; Zip Code <u>P.O. Box 8346</u> <u>Houston, TX 77288</u>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Advertising Expense</u>		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					
Date <u>10/21/22</u>		Payee name <u>Exodus Advisors</u>			
Amount (\$) <u>8,000⁰⁰ -</u>		Payee address; City; State; Zip Code <u>4906 Grapenne Lake Ct.</u> <u>Richmond, TX 77407</u>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Consulting Services</u>		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	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <u>20</u>		2 FILER NAME <u>James Grady Prestage</u>		3 Filer ID (Ethics Commission Filers)	
4 Date <u>10/21/22</u>		5 Payee name <u>Turo Inc.</u>			
6 Amount (\$) <u>682.32</u>		7 Payee address; City; State; Zip Code <u>7300 Brompton St, Houston, TX 77025</u>			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <u>Transportation Expenses</u>		(b) Description		
	(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 <u>10/24/22</u>		Payee name <u>Dustin Prestage</u>			
Amount (\$) <u>1,250.00</u>		Payee address; City; State; Zip Code <u>1357 Flatbush Ave #1-6 Brooklyn, NY 11210</u>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Consulting Expense</u>		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 _____					
Date <u>10/24/22</u>		Payee name <u>Delta Academic, Artistic & Philanthropic Foundation</u>			
Amount (\$) <u>1,062.50</u>		Payee address; City; State; Zip Code <u>P.O. Box 711091 Houston, TX 77271</u>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Donation</u>		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 _____					
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <u>20</u>		2 FILER NAME <u>James Grady Prestage</u>		3 Filer ID (Ethics Commission Filers)	
4 Date <u>10/24/22</u>		5 Payee name <u>Laguinta Shelby % Breast Cancer Walk</u>			
6 Amount (\$) <u>250⁰⁰</u>		7 Payee address; City; State; Zip Code <u>907 Pismo Lane</u> <u>Rusharon, TX 77583</u>			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <u>Donation</u>		(b) Description		
	(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 <u>10/24/22</u>		Payee name <u>Charlie Villa</u>			
Amount (\$) <u>200⁰⁰</u>		Payee address; City; State; Zip Code <u>2310 Flickering Leaf Lane</u> <u>Fresno, TX 77545</u>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Office equipment</u>		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					
Date <u>10/24/22</u>		Payee name <u>Act Blue % The Two Million Texans Project</u>			
Amount (\$) <u>500⁰⁰</u>		Payee address; City; State; Zip Code <u>PO Box 41424</u> <u>Austin, TX 78704</u>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Donation</u>		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					
<div style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</div>					

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <u>20</u>		2 FILER NAME <u>James Grady Prestage</u>		3 Filer ID (Ethics Commission Filers)	
4 Date <u>10/25/22</u>		5 Payee name <u>Vas Key Media Group, Inc</u>			
6 Amount (\$) <u>2,500⁰⁰</u>		7 Payee address; City; State; Zip Code <u>7322 Southwest Freeway, Ste 800</u> <u>Houston, TX 77074</u>			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <u>Advertising Expense</u>		(b) Description		
	(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 <u>10/27/22</u>		Payee name <u>Stafford MSD Education Foundation</u>			
Amount (\$) <u>500⁰⁰</u>		Payee address; City; State; Zip Code <u>1633 Staffordshire Rd</u> <u>Stafford, TX 77477</u>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Donation</u>		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 _____					
Date <u>10/27/22</u>		Payee name <u>Valencia Spencer</u>			
Amount (\$) <u>195⁰⁰</u>		Payee address; City; State; Zip Code <u>12903 Sugar Ridge Blvd #3501</u> <u>Stafford, TX 77477</u>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Contract Labor</u>		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 _____					

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <u>20</u>		2 FILER NAME <u>James Grady Prestage</u>		3 Filer ID (Ethics Commission Filers)	
4 Date <u>10/27/22</u>		5 Payee name <u>Fort Bend MUD #26</u>			
6 Amount (\$) <u>153 ²⁶</u>		7 Payee address; <u>3134 Cartwright Road</u> <u>Missouri City, TX 77459</u>		City; State; Zip Code	
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) <u>Property Taxes for Office</u>		(b) Description	
		(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 <u>10/27/22</u>		Payee name <u>Chris Beavers</u>			
Amount (\$) <u>160 ⁰⁰</u>		Payee address; <u>2440 Texas Parkway #202</u> <u>Missouri City, TX 77489</u>		City; State; Zip Code	
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) <u>Contract Labor</u>		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	

Date <u>10/28/22</u>		Payee name <u>Chris Beavers</u>			
Amount (\$) <u>225 ⁰⁰</u>		Payee address; <u>2440 Texas Parkway #202</u> <u>Missouri City, TX 77489</u>		City; State; Zip Code	
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) <u>Contract Labor</u>		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	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
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Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 20		2 FILER NAME James Grody Prestage		3 Filer ID (Ethics Commission Filers)	
4 Date 10/28/22		5 Payee name Valencia Spencer			
6 Amount (\$) 225⁰⁰		7 Payee address; City; State; Zip Code 12903 Sugar Ridge #3601 Stafford, TX 77477			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor		(b) Description		
	(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 ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name _____ Office sought _____ Office held _____					
Date 10/28/22		Payee name Jesse Torres			
Amount (\$) 120⁰⁰		Payee address; City; State; Zip Code 6726 Tara Drive Richmond, TX 77469			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor		Description		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name _____ Office sought _____ Office held _____					
Date 10/28/22		Payee name Ordia Drew			
Amount (\$) 200⁰⁰		Payee address; City; State; Zip Code 36 Big Trail Missouri City, TX 77459			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor		Description		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name _____ Office sought _____ Office held _____					

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <u>20</u>		2 FILER NAME <u>James Grady Prestage</u>		3 Filer ID (Ethics Commission Filers)	
4 Date <u>10/28/22</u>		5 Payee name <u>Michelle Hale</u>			
6 Amount (\$) <u>360⁰⁰</u>		7 Payee address; <u>6919 Rosebud Hollow Lane</u> <u>Richmond, TX 77469</u>		City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <u>Contract Labor</u>		(b) Description		
	(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 <u>10/28/22</u>		Payee name <u>Malcolm Wright</u>			
Amount (\$) <u>135⁰⁰</u>		Payee address; <u>514 Summer Mist Ln</u> <u>Rosenberg, TX 77469</u>		City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Contract Labor</u>		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					
Date <u>10/25/22</u>		Payee name <u>Act Blue</u>			
Amount (\$) <u>1,641.23</u>		Payee address; <u>366 Summer Street</u> <u>Somerville, MA 02144</u>		City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Fees</u>		Description <u>Fundraising Commission</u>		
	<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					

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