

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME		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)	\$ 4,644.23
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 132,667.95
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 18,603.29
	4. TOTAL POLITICAL EXPENDITURES	\$ 155,200.21
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 239,788.87
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 07/30/1958.
My address is 36 BIG TRAIL, MISSOURI CITY, TX, 77459 ~~USA~~
(street) (city) (state) (zip code) (country)

Executed in FORT BEND County, State of TEXAS, on the 17th day of JANUARY, 20 23.
(month) (year)

James Grady Prestage
Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

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

19 FILER NAME <i>James Grady Prestage</i>		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ <i>128,023.72</i>
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. SCHEDULE E: LOANS		\$
5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$ <i>136,596.92</i>
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS		\$
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS		\$
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH		\$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$
12. 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: 32
2 FILER NAME JAMES 'GRADY' PRESTAGE		3 Filer ID (Ethics Commission Filers)
4 Date 10/30/22 11/3/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EXODUS ADVISORS FORM LLC 6 Contributor address; City; State; Zip Code 4406 GARDNER LAKE DR, RICHMOND, TX 77407	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions) CONSULTING SERVICES		9 Employer (See Instructions)
Date 11/3/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEMILA WINSEY Contributor address; City; State; Zip Code 7119 FM 1464, STE. 340 RICHMOND, TX 77407	Amount of contribution (\$) 2,500⁰⁰
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) ERA - LEGACY LIVING
Date 11/3/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALFF ASSOCIATES - STATE PAC Contributor address; City; State; Zip Code 1201 N. BOWSER ROAD RICHARDSON, TX 75081	Amount of contribution (\$) 2,500⁰⁰
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/3/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JEFF CANNON Contributor address; City; State; Zip Code 4315 WHICKHAM DR. FULSHEAR, TX 77441	Amount of contribution (\$) 2,500⁰⁰
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) LJA ENGINEERS

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: 32
2 FILER NAME JAMES 'GRADY' PRESTAGE		3 Filer ID (Ethics Commission Filers)
4 Date 11/8/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAWRENCE YOUNG	7 Amount of contribution (\$) 500.00
6 Contributor address; City; State; Zip Code 19 SOVEREIGN CIRCLE RICHMOND, TX 77409		
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) ALIX PARTNERS
Date 11/8/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NELSON NUCKLES	Amount of contribution (\$) 2,000.00
Contributor address; City; State; Zip Code 7119 AVONCREST LANE RICHMOND, TX 77407		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) TSC ENGINEERING AND SURVEYING
Date 11/8/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHARLES OTHON	Amount of contribution (\$) 3,000.00
Contributor address; City; State; Zip Code 5906 LAGUNA FALLS CT. HOUSTON, TX 77041		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) OTHON
Date 11/15/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LILLIAN GERMAN	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 228 THIRD ST NE WASHINGTON, DC 20002		
Principal occupation / Job title (See Instructions) DIRECTOR OF GOVERNMENT RELATIONS		Employer (See Instructions) FERRING PHARMACEUTICALS

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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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: 32
2 FILER NAME JAMES 'GRADY' PRESTAGE		3 Filer ID (Ethics Commission Filers)
4 Date 11/15/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHIRLEY SEWELL	7 Amount of contribution (\$) 100⁰⁰
6 Contributor address; City; State; Zip Code 2228 WATERFORD VILLAGE BLVD. MISSOURI CITY, TX 77459		
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions)
Date 11/23/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEVI BENTON ASSOCIATES PLLC	Amount of contribution (\$) 1,000⁰⁰
Contributor address; City; State; Zip Code 2207 PINELOCH DR. HOUSTON, TX 77062		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/23/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THE TYSON ORGANIZATION PAC	Amount of contribution (\$) 1,073.72
Contributor address; City; State; Zip Code 1351 MISTLETOE DR. FORT WORTH, TX 76110		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/23/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VEDA BURNS	Amount of contribution (\$) 100⁰⁰
Contributor address; City; State; Zip Code 2350 WATERFORD PARK ST. MISSOURI CITY, TX 77459		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 32
2 FILER NAME JAMES 'GRADY' PRESTAGE		3 Filer ID (Ethics Commission Filers)
4 Date 11/29/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VALENCIA JOHNSON	7 Amount of contribution (\$) 500⁰⁰
6 Contributor address; City; State; Zip Code 10627 GRENADA FALLS DR, HOUSTON, TX 77095		
8 Principal occupation / Job title (See Instructions) NURSE		9 Employer (See Instructions) UTMB
Date 12/13/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHN SCROGGINS	Amount of contribution (\$) 200⁰⁰
Contributor address; City; State; Zip Code 3211 IVY MILL LN, MISSOURI CITY, TX 77459		
Principal occupation / Job title (See Instructions) BANKER		Employer (See Instructions) ALLEGIANCE BANK
Date 12/13/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIE HOWARD	Amount of contribution (\$) 500⁰⁰
Contributor address; City; State; Zip Code 21715 SIERRA LONG DR, RICHMOND, TX 77407		
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) HOWARD INVESTMENT ADVISORS
Date 12/13/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SACQUES E. DAVIDSON	Amount of contribution (\$) 500⁰⁰
Contributor address; City; State; Zip Code 5730 ETRICK DR, HOUSTON, TX 77035		
Principal occupation / Job title (See Instructions) FLEET MANAGER		Employer (See Instructions) B16 STAR FORD

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 12/2/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SASON JONES	7 Amount of contribution (\$) 500.00
6 Contributor address; City; State; Zip Code 2306 CEZANNE CIRCLE MISSOURI CITY, TX 77459		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions) CHEVRON
Date 12/5/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIS MICHAEL	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 2245 TEXAS DRIVE, SUITE 300 SUGAR LAND, TX 77479		
Principal occupation / Job title (See Instructions) BRANCH MANAGER		Employer (See Instructions) NRL MORTGAGE
Date 12/7/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FELICIA FARRAR	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 18126 AFTON HOLLOW LANE RICHMOND, TX 77469		
Principal occupation / Job title (See Instructions) JOINT COMMITTEE SPECIALIST		Employer (See Instructions) IRS
Date 12/8/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERT COLEMAN-FOSTER	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 9476 HIGHWAY 6.S. SUITE 239 HOUSTON, TX 77083		
Principal occupation / Job title (See Instructions) PRESIDENT ROBROD / CEO		Employer (See Instructions) MJC & ASSOCIATES, INC

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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 12/9/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUND DICKERSON	7 Amount of contribution (\$) 500⁰⁰
6 Contributor address; City; State; Zip Code 1207 WISTERIA WHARTON, TX 77488		
8 Principal occupation / Job title (See Instructions) RN - RETIRED		9 Employer (See Instructions) METHODIST
Date 12/12/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YOLANDA BOYKIN	Amount of contribution (\$) 350⁰⁰
Contributor address; City; State; Zip Code 6439 BAZEL BROOK MISSOURI CITY, TX 77489		
Principal occupation / Job title (See Instructions) ADMINISTRATOR		Employer (See Instructions) TEXAS ATTORNEY GENERAL
Date 12/13/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHERIEE WILLIAMS	Amount of contribution (\$) 500⁰⁰
Contributor address; City; State; Zip Code 218 PROMENADEWAY SUGAR LAND, TX 77479		
Principal occupation / Job title (See Instructions) SALES MANAGER		Employer (See Instructions) HAMPTON INN
Date 12/13/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Z WHO DAT NATION CLUB OF HOUSTON	Amount of contribution (\$) 500⁰⁰
Contributor address; City; State; Zip Code 3819 KIAMESHA DR MISSOURI CITY, TX 77459		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

32

2 FILER NAME

JAMES 'GRADY' PRESTAGE

3 Filer ID (Ethics Commission Filers)

4 Date

12/13/22

5 Full name of contributor

out-of-state PAC (ID# _____)

H. CLAYTON CATCHINGS

7 Amount of contribution (\$)

500⁰⁰

6 Contributor address;

City;

State;

Zip Code

1630 CASTLE CREEK DR.
MISSOURI CITY, TX 77489

8 Principal occupation / Job title (See Instructions)

RETIRED

9 Employer (See Instructions)

Date

12/13/22

Full name of contributor

out-of-state PAC (ID# _____)

TROY CARTER

Amount of contribution (\$)

500⁰⁰

Contributor address;

City;

State;

Zip Code

21743 COZY HOLLOW LN.
RICHMOND, TX 77469

Principal occupation / Job title (See Instructions)

VP Government & MANAGED CARE

Employer (See Instructions)

EVEROSE HEALTHCARE

Date

12/13/22

Full name of contributor

out-of-state PAC (ID# _____)

TROY CARTER

Amount of contribution (\$)

500⁰⁰

Contributor address;

City;

State;

Zip Code

21743 COZY HOLLOW LN.
RICHMOND, TX 77469

Principal occupation / Job title (See Instructions)

VP GOVERNMENT & MANAGED CARE

Employer (See Instructions)

EVEROSE HEALTHCARE

Date

12/13/22

Full name of contributor

out-of-state PAC (ID# _____)

ROBYN DOUGHTIE

Amount of contribution (\$)

500⁰⁰

Contributor address;

City;

State;

Zip Code

26907 POSSUM HILL COURT, KATY, TX 77494

Principal occupation / Job title (See Instructions)

Information TECH.

Employer (See Instructions)

FBC

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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: 32
2 FILER NAME JAMES 'GRADY' PRESTAGE		3 Filer ID (Ethics Commission Filers)
4 Date 12/13/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICKIE L. McBRIDE	7 Amount of contribution (\$) 500.00
6 Contributor address; City; State; Zip Code 16518 TEAK DR. MISSOURI CITY, TX 77489		
8 Principal occupation / Job title (See Instructions) PLANNING CONSULTANT		9 Employer (See Instructions) SELF
Date 12/13/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRENDA SOYCE PARKER	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 16406 QUAIL BRIAR DR. MISSOURI CITY, TX 77489		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 12/13/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROY L. OWENS JR.	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 4100 HULL ST. HOUSTON, TX 77021		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 12/13/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORT BEND UNITED	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code P.O. BOX 420811, HOUSTON, TX 77242		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 32
2 FILER NAME JAMES 'BRADY' PRESTAGE		3 Filer ID (Ethics Commission Filers)
4 Date 12/13/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JEFFERSON BRYANT	7 Amount of contribution (\$) 500.00
6 Contributor address; City; State; Zip Code 11 THETFORD, SUSARLAND, TX 77479		
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions)
Date 12/13/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SACQUELYN TURNER	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 8702 STONES TROW LN. MISSOURI CITY, TX 77459		
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) INVESTCO, LTD
Date 12/13/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RANDY RANDERMANN	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 4860 JAMES LN. FULSHEAR, TX 77441		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) TSGE, INC
Date 12/13/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEVI BENTON & ASSOCIATES, PLLC	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 2207 PINELOCH DR., HOUSTON, TX 77062		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) LEVI BENTON & ASSOCIATES, PLLC

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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 12/13/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMASINE JOHNSON	7 Amount of contribution (\$) 5000
6 Contributor address; City; State; Zip Code 3318 BRECKINRIDGE MISSOURI CITY, TX 77459		
8 Principal occupation / Job title (See Instructions) OWNER		9 Employer (See Instructions) INTERIOR DESIGNS
Date 12/13/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sim RUSS	Amount of contribution (\$) 1500
Contributor address; City; State; Zip Code 10011 MEADOWSLEN LN HOUSTON, TX 77042		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) CHRA
Date 12/13/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GITI ZARINKELK	Amount of contribution (\$) 1500
Contributor address; City; State; Zip Code 18 BERRY BLOSSOM DR SPRINGS, TX 77380		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) ZARINKELK ENGINEERING
Date 12/13/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVID EASTWOOD	Amount of contribution (\$) 1500
Contributor address; City; State; Zip Code 17407 HIGHWAY 59N HUMBLE, TX 77396		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) GEOTECH ENGINEERING

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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 12/13/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARK HEIDAKER	7 Amount of contribution (\$) 1500⁰⁰
6 Contributor address; City; State; Zip Code 7703 BREEZEWAY BEND LN. KATY, TX 77494		
8 Principal occupation / Job title (See Instructions) PRESIDENT		9 Employer (See Instructions) PAS Property Acquisition Service
Date 12/13/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUS PAC	Amount of contribution (\$) 1,500⁰⁰
Contributor address; City; State; Zip Code 6120 S. DAIRY ASHFORD RD. HOUSTON, TX 77072		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/13/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEBRA MITCHELL	Amount of contribution (\$) 1,000⁰⁰
Contributor address; City; State; Zip Code P.O. BOX 58741 WEBSTER, TX 77598		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 12/13/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ LEWIS	Amount of contribution (\$) 1,000⁰⁰
Contributor address; City; State; Zip Code 1825 SANJACINTO ST. #307 HOUSTON, TX 77002		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) KINDER MORGAN

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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: 32
2 FILER NAME James 'BRADY' PRESTAGE		3 Filer ID (Ethics Commission Filers)
4 Date 12/13/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MDHAMED SHI HADEH	7 Amount of contribution (\$) 2,500⁰⁰
6 Contributor address; City; State; Zip Code 11907 ARCADIA BEND LN. HOUSTON, TX 77041		
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) EARTH ENGINEERING, INC.
Date 12/13/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LYLE HENKEL	Amount of contribution (\$) 2,500⁰⁰
Contributor address; City; State; Zip Code 8030 WYNDHAM VILLAGE DR. JERSEY, VILLAGE, TX 77040		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) TERRA / BOWMAN
Date 12/13/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDREW PADERANGA	Amount of contribution (\$) 2,500⁰⁰
Contributor address; City; State; Zip Code 26314 CRESENT COVE LN. KATY, TX 77494		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) RG MILLER
Date 12/13/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DARRYL CARTER	Amount of contribution (\$) 2,500⁰⁰
Contributor address; City; State; Zip Code 4828 LOOP CENTRAL DR. STE. #600 HOUSTON, TX 77081		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) LAW OFFICE OF DARRYL B. CARTER

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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: **32**

2 FILER NAME

JAMES 'GRADY' PRESTAGE

3 Filer ID (Ethics Commission Filers)

4 Date

12/13/22

5 Full name of contributor

CLARENCE TORBER

out-of-state PAC (ID# _____)

7 Amount of contribution (\$)

2,500⁰⁰

6 Contributor address;

P.O. BOX 481

City;

State;

Zip Code

STAFFORD, TX 77497

8 Principal occupation / Job title (See Instructions)

ENGINEER

9 Employer (See Instructions)

KALUZA

Date

12/13/22

Full name of contributor

KEVIN MATOCHA

out-of-state PAC (ID# _____)

Amount of contribution (\$)

2,500⁰⁰

Contributor address;

**1600 HWY 6 SOUTH, STE. 245
SUGARLAND, TX 77478**

City;

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

STONEHENGE, CO., LLC

Date

12/13/22

Full name of contributor

NIND CORBITT

out-of-state PAC (ID# _____)

Amount of contribution (\$)

2,500

Contributor address;

2114 TANGLEY, HOUSTON, TX 77005

City;

State;

Zip Code

Principal occupation / Job title (See Instructions)

DEVELOPER

Employer (See Instructions)

COMPASS LAND DEVELOPMENT, LLC

Date

12/14/22

Full name of contributor

HORTON WILLIAMS

out-of-state PAC (ID# _____)

Amount of contribution (\$)

500⁰⁰

Contributor address;

**1040 LUNALILO ST. ART. 501
HONOLULU, HI 96822**

City;

State;

Zip Code

Principal occupation / Job title (See Instructions)

RETIRED

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 32
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2 FILER NAME JAMES 'GRADY' PRESTAGE	3 Filer ID (Ethics Commission Filers)
---	---------------------------------------

4 Date 12/15/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JANICE DAVIS	7 Amount of contribution (\$) 500⁰⁰
6 Contributor address; City; State; Zip Code 10902 MCKAMY DR HOUSTON, TX 77067		

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions) MY STYLE DANCE
---	--

Date 12/15/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ASIM TUFAIL	Amount of contribution (\$) 750⁰⁰
Contributor address; City; State; Zip Code 1016 S. VOSS, SUITE 300 HOUSTON, TX 77057		

Principal occupation / Job title (See Instructions) ENGINEER	Employer (See Instructions) BLACKLINE ENGINEERING
--	---

Date 12/15/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOHAN BALLAGERE	Amount of contribution (\$) 1,500⁰⁰
Contributor address; City; State; Zip Code 10306 LOGAN BRIDLE LANE SUSAN LAND, TX 77498		

Principal occupation / Job title (See Instructions) ENGINEER	Employer (See Instructions) GEDTEST
--	---

Date 12/15/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAMELA LABRANE	Amount of contribution (\$) 500⁰⁰
Contributor address; City; State; Zip Code P.O. BOX 710265 HOUSTON, TX 77271		

Principal occupation / Job title (See Instructions) MANAGER	Employer (See Instructions) FBC
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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: 32
2 FILER NAME JAMES 'GRADY' PRESTAGE		3 Filer ID (Ethics Commission Filers)
4 Date 12/19/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SACKIE SEANBORRE	7 Amount of contribution (\$) 500⁰⁰
6 Contributor address; City; State; Zip Code 6618 BUTLER OAKS HOUSTON, TX 77309		
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions)
Date 12/19/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONICA RAWLINS	Amount of contribution (\$) 500⁰⁰
Contributor address; City; State; Zip Code 4303 BUBOLINK CIRCE MISSOURI CITY, TX 77459		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 12/19/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILFORD SISTRUCK	Amount of contribution (\$) 500⁰⁰
Contributor address; City; State; Zip Code 4602 SANTA BARBARA WAY RICHMOND, TX 7406		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 12/19/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHYLLIS TENNARD	Amount of contribution (\$) 500⁰⁰
Contributor address; City; State; Zip Code 7100 REGENCY SQUARE, SUITE 135 HOUSTON, TX 77036		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <u>32</u>
2 FILER NAME <u>JAMES 'GRADY' PRESTAGE</u>		3 Filer ID (Ethics Commission Filers)
4 Date <u>12/19/22</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>HOWARD MOSLEY</u>	7 Amount of contribution (\$) <u>50000</u>
6 Contributor address; City; State; Zip Code <u>4202 WOODLAKE LANE MISSOURI CITY, TX 77459</u>		
8 Principal occupation / Job title (See Instructions) <u>OWNER</u>		9 Employer (See Instructions) <u>ADAPTIVE DIGITAL SERVICES, INC.</u>
Date <u>12/19/22</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>JOSEPH WALKER</u>	Amount of contribution (\$) <u>50000</u>
Contributor address; City; State; Zip Code <u>4206 W MEADOWS DRIVE SUGAR LAND, TX 77479</u>		
Principal occupation / Job title (See Instructions) <u>SALES MANAGER</u>		Employer (See Instructions) <u>DOWLEY</u>
Date <u>12/19/22</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>GERALD WILSON</u>	Amount of contribution (\$) <u>50000</u>
Contributor address; City; State; Zip Code <u>4611 BIGGAM DRIVE FRESNO, TX 77549</u>		
Principal occupation / Job title (See Instructions) <u>ENGINEER</u>		Employer (See Instructions) <u>WILSON ENGINEERING</u>
Date <u>12/19/22</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>GWENDOLYN CHERRY</u>	Amount of contribution (\$) <u>50000</u>
Contributor address; City; State; Zip Code <u>16 BRIGHTON, CT. MISSOURI CITY, TX 77459</u>		
Principal occupation / Job title (See Instructions) <u>RETIRED</u>		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 32
2 FILER NAME JAMES 'GRADY' PROSTAGE		3 Filer ID (Ethics Commission Filers)
4 Date 12/19/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHRISTOPHER SAMPA	7 Amount of contribution (\$) 500⁰⁰
6 Contributor address; City; State; Zip Code 1714 ARCOTT LN STAFFORD, TX 77477		
8 Principal occupation / Job title (See Instructions) OWNER		9 Employer (See Instructions) STATOWAY CIVIL PROCESS
Date 12/19/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARY NICHOLS	Amount of contribution (\$) 1,000⁰⁰
Contributor address; City; State; Zip Code 2807 W. PEBBLE BEACH MISSOURI CITY, TX 77459		
Principal occupation / Job title (See Instructions) COACH		Employer (See Instructions) FBC
Date 12/19/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RON REYNOLDS CAMPAIGN	Amount of contribution (\$) 1,500⁰⁰
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 12/19/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WAYNE SAUGER	Amount of contribution (\$) 1,500⁰⁰
Contributor address; City; State; Zip Code 3338 COUNTY RD. 239 GONZALES, TX 78629		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) SAUGER ENGINEERING
<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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 32
2 FILER NAME SAMES 'GRADY' PRESTAGE		3 Filer ID (Ethics Commission Filers)
4 Date 12/19/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) H. P. KOLLURU	7 Amount of contribution (\$) 1,500⁰⁰
6 Contributor address; City; State; Zip Code 94 HEATH ROW LN. SUGAR LAND, TX 77479		
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) AMANI ENGINEERING
Date 12/19/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOHN WHITMIRE CAMPAIGN FUND	Amount of contribution (\$) 1,500⁰⁰
Contributor address; City; State; Zip Code 321 W. COWAN DR. HOUSTON, TX 77007		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 12/19/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEC - PAC	Amount of contribution (\$) 1,500⁰⁰
Contributor address; City; State; Zip Code 1 GREENWAY PLAZA STE. 225 HOUSTON, TX 77046		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/19/22	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 77429-6830		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) WSB

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME <u>SAMES 'GRADY' PRESTAGE</u>		3 Filer ID (Ethics Commission Filers)
4 Date <u>12/19/22</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>BONNIE MOSS</u>	7 Amount of contribution (\$) <u>5,000⁰⁰</u>
6 Contributor address; City; State; Zip Code <u>12418 WESTELLA DR., HOUSTON, TX 77077</u>		
8 Principal occupation / Job title (See Instructions) <u>ENGINEER</u>		9 Employer (See Instructions) <u>MBCO ENGINEERING</u>
Date <u>12/19/22</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>RAYMOND SEWELL</u>	Amount of contribution (\$) <u>200⁰⁰</u>
Contributor address; City; State; Zip Code <u>2228 WATERFORD VILLAGE BLVD. MISSOURI CITY, TX 77459</u>		
Principal occupation / Job title (See Instructions) <u>Retired</u>		Employer (See Instructions)
Date <u>12/19/22</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>PAUL KWAN</u>	Amount of contribution (\$) <u>250⁰⁰</u>
Contributor address; City; State; Zip Code <u>13423 AMBER QUEEN LANE HOUSTON, TX 77041</u>		
Principal occupation / Job title (See Instructions) <u>Engineer / Surveyor</u>		Employer (See Instructions) <u>Landtech</u>
Date <u>12/19/22</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>LENETRA LARY SENIGAIR</u>	Amount of contribution (\$) <u>400⁰⁰</u>
Contributor address; City; State; Zip Code <u>P.O. BOX 145 RICHMOND, TX 77406</u>		
Principal occupation / Job title (See Instructions) <u>ATTORNEY</u>		Employer (See Instructions) <u>FBC</u>

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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: 32
2 FILER NAME James 'GRADY' PRESTAGE		3 Filer ID (Ethics Commission Filers)
4 Date 12/19/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATRICIA BYNUM	7 Amount of contribution (\$) 500⁰⁰
6 Contributor address; City; State; Zip Code 10815 SAGE MEADOW LN HOUSTON, TX 77089		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 12/19/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REGINALD BURKETT PEARSON	Amount of contribution (\$) 500⁰⁰
Contributor address; City; State; Zip Code 1622 DAFFODIL RD. MISSOURI CITY, TX 77489		
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Spec's
Date 12/19/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOE LYNN CLOUSER	Amount of contribution (\$) 500⁰⁰
Contributor address; City; State; Zip Code 2730 Coyote Trail Drive Missouri City, TX 77459		
Principal occupation / Job title (See Instructions) MARKETING DIRECTOR		Employer (See Instructions) APARA AUTISM CENTER
Date 12/19/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MICHAEL BALLARE	Amount of contribution (\$) 500⁰⁰
Contributor address; City; State; Zip Code 15102 CHASE RIDGE DR. MISSOURI CITY, TX 77489		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **32**

2 FILER NAME

JAMES 'GRADY' PRESTAGE

3 Filer ID (Ethics Commission Filers)

4 Date

12/19/22

5 Full name of contributor out-of-state PAC (ID# _____)

CATINA L. RISPER

7 Amount of contribution (\$)

500⁰⁰

6 Contributor address; City; State; Zip Code

**2638 SEAHORSE BEND DR.
KATY, TX**

8 Principal occupation / Job title (See Instructions)

FINANCIAL ADVISOR

9 Employer (See Instructions)

PENN MUTUAL SOUTH

Date

12/19/22

Full name of contributor out-of-state PAC (ID# _____)

MARCUS STUCKETT

Amount of contribution (\$)

500⁰⁰

Contributor address; City; State; Zip Code

**10506 CARRINGTON COURT
MISSOURI CITY, TX 77459**

Principal occupation / Job title (See Instructions)

ENGINEER

Employer (See Instructions)

PARE-DANSON ENGINEERS

Date

12/20/22

Full name of contributor out-of-state PAC (ID# _____)

CARL DAVIS

Amount of contribution (\$)

500⁰⁰

Contributor address; City; State; Zip Code

**1507 CALIFORNIA ST. #2
HOUSTON, TX 77006**

Principal occupation / Job title (See Instructions)

RETIRED

Employer (See Instructions)

Date

12/20/22

Full name of contributor out-of-state PAC (ID# _____)

ROYANE JOHNSON

Amount of contribution (\$)

100⁰⁰

Contributor address; City; State; Zip Code

**1722 CRESENT OAKS DR.
MISSOURI CITY, TX 77459**

Principal occupation / Job title (See Instructions)

REALTOR

Employer (See Instructions)

SELF EMPLOYED

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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>32</u>
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2 FILER NAME <u>JAMES 'GRADY' PRESTAGE</u>	3 Filer ID (Ethics Commission Filers)
---	---------------------------------------

4 Date <u>12/20/22</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>JOE S. RATLIFF</u>	7 Amount of contribution (\$) <u>500⁰⁰</u>
6 Contributor address; City; State; Zip Code <u>13033 LANDMARK HOUSTON, TX 77045</u>		

8 Principal occupation / Job title (See Instructions) <u>PASTOR</u>	9 Employer (See Instructions) <u>BRENTWOOD BAPTIST</u>
--	---

Date <u>12/20/22</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>KAYLA SNEED</u>	Amount of contribution (\$) <u>350⁰⁰</u>
Contributor address; City; State; Zip Code <u>3030 SHADOWBRIAR DR. #435 HOUSTON, TX 77082</u>		

Principal occupation / Job title (See Instructions) <u>EXECUTIVE ASSISTANT</u>	Employer (See Instructions) <u>FBC ATTORNEY</u>
---	--

Date <u>12/20/22</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>AHMED VALDEZ</u>	Amount of contribution (\$) <u>500⁰⁰</u>
Contributor address; City; State; Zip Code <u>4600 HWY 6 N., STE. 210 HOUSTON, TX 77084</u>		

Principal occupation / Job title (See Instructions) <u>ENGINEER</u>	Employer (See Instructions) <u>AKV CONSULTING ENGINEERS</u>
--	--

Date <u>12/20/22</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>JUAN SAUL REINARD ORTUNO</u>	Amount of contribution (\$) <u>2500⁰⁰</u>
Contributor address; City; State; Zip Code		

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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1 Total pages Schedule A1: **32**

2 FILER NAME

JAMES 'GRADY' PRESTAGE

3 Filer ID (Ethics Commission Filers)

4 Date

12/20/22

5 Full name of contributor out-of-state PAC (ID# _____)

MARK MUSEMECHE

7 Amount of contribution (\$)

2,500⁰⁰

6 Contributor address; City; State; Zip Code

**1013 VAN BUREN ST.
HOUSTON, TX 77019**

8 Principal occupation / Job title (See Instructions)

DEVELOPER

9 Employer (See Instructions)

MGROUP

Date

12/20/22

Full name of contributor out-of-state PAC (ID# _____)

NEENE SHEPPARD

Amount of contribution (\$)

500⁰⁰

Contributor address; City; State; Zip Code

**6230 HAVENSDALE DR.
HOUSTON, TX 77072**

Principal occupation / Job title (See Instructions)

CASE MANAGER

Employer (See Instructions)

UNITED HEALTH CARE

Date

12/20/22

Full name of contributor out-of-state PAC (ID# _____)

MICHAEL R. DOTSON

Amount of contribution (\$)

500⁰⁰

Contributor address; City; State; Zip Code

**2800 KIRBY DR., APT. A630
HOUSTON, TX 77098**

Principal occupation / Job title (See Instructions)

CEO

Employer (See Instructions)

ACCESSHEALTH

Date

12/20/22

Full name of contributor out-of-state PAC (ID# _____)

DAVID COLLINS

Amount of contribution (\$)

1,500⁰⁰

Contributor address; City; State; Zip Code

**7719 CHASEWOOD BR.
MISSOURI CITY, TX 77489**

Principal occupation / Job title (See Instructions)

ENGINEER

Employer (See Instructions)

FCM ENGINEERS

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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)
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4 Date 12/20/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINZBARGER GIGGEN, BLAIR, SAMMON, LLP	7 Amount of contribution (\$) 1,500⁰⁰
6 Contributor address; City; State; Zip Code P.O. BOX 17428 AUSTIN, TX 78760		

8 Principal occupation / Job title (See Instructions) ATTORNEY AT LAW	9 Employer (See Instructions)
---	-------------------------------

Date 12/21/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADRYAN BILLOPS	Amount of contribution (\$) 500⁰⁰
Contributor address; City; State; Zip Code 2706 PRIMROSE BLOOM LANE RICHMOND, TX 77406		

Principal occupation / Job title (See Instructions) CPA	Employer (See Instructions) ADRYAN BILLOPS, PC, CPA
---	---

Date 12/21/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAREN MICHELLE MILES	Amount of contribution (\$) 250⁰⁰
Contributor address; City; State; Zip Code 7702 CICALDA DRIVE MISSOURI CITY, TX 77459		

Principal occupation / Job title (See Instructions) RETIRED	Employer (See Instructions)
---	-----------------------------

Date 12/21/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAYLA SNEED	Amount of contribution (\$) 2,000⁰⁰
Contributor address; City; State; Zip Code 3030 SHAWBRIAR DR., APT. 435 HOUSTON, TX 77082		

Principal occupation / Job title (See Instructions) EXECUTIVE ASST.	Employer (See Instructions) FBC ATTORNEY
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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: 32
2 FILER NAME JAMES 'GRADY' Prestage		3 Filer ID (Ethics Commission Filers)
4 Date 12/21/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEXTER W. JOHNSON	7 Amount of contribution (\$) 500⁰⁰
6 Contributor address; City; State; Zip Code 511 Stephanie Lane Missouri City, TX 77489		
8 Principal occupation / Job title (See Instructions) Fire fighter		9 Employer (See Instructions) City of Houston
Date 12/21/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JASON YANCEY	Amount of contribution (\$) 500⁰⁰
Contributor address; City; State; Zip Code 2406 Bastrop Houston, TX 77004		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 12/21/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cynthia GINYARD	Amount of contribution (\$) 500⁰⁰
Contributor address; City; State; Zip Code 11418 OAK LAKE RIDGE COURT SUGAR LAND, TX 77498		
Principal occupation / Job title (See Instructions)		Employer (See Instructions) F2 DEMOCRATIC PARTY
Date 12/21/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLAUDIA SIMENEZ/JOHN ENGLISH	Amount of contribution (\$) 750⁰⁰
Contributor address; City; State; Zip Code 7676 Hillmont Road, suite 350 Houston, TX 77040		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) REKHA ENGINEERING

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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>12/21/22</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>DORIS BACON</u>	7 Amount of contribution (\$) <u>100⁰⁰</u>
6 Contributor address; City; State; Zip Code		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <u>12/22/22</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>BARBARA CRUMP JONES</u>	Amount of contribution (\$) <u>100⁰⁰</u>
Contributor address; City; State; Zip Code <u>2610 LITTLE LAKE COURT RICHMOND, TX 77046</u>		
Principal occupation / Job title (See Instructions) <u>MANAGER</u>		Employer (See Instructions) <u>FLUOR</u>
Date <u>12/22/22</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>CHERITA ANDREWS</u>	Amount of contribution (\$) <u>500⁰⁰</u>
Contributor address; City; State; Zip Code <u>9101 SAMUEL RD., STE. 130 HOUSTON, TX 77040</u>		
Principal occupation / Job title (See Instructions) <u>CONSULTANT</u>		Employer (See Instructions) <u>MV ENGINEERING</u>
Date <u>12/28/22</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>ANDREW SCHATTE</u>	Amount of contribution (\$) <u>2,500⁰⁰</u>
Contributor address; City; State; Zip Code <u>5330 MONTROSE BLVD. HOUSTON, TX 77005</u>		
Principal occupation / Job title (See Instructions) <u>DEVELOPER</u>		Employer (See Instructions) <u>AMERICVS HOLDINGS</u>
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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: 32
2 FILER NAME JAMES 'GRADY' PRESTAGE		3 Filer ID (Ethics Commission Filers)
4 Date 12/28/22	5 Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00457853) (TERRACON PAC) ISVC, INC. PAC	7 Amount of contribution (\$) 2,500⁰⁰
6 Contributor address; City; State; Zip Code 10841 S. RIDGEVIEW RD. OLATHE, KS 66061-6456		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
ENGINEER		G.C. ENGINEERING
Date 12/28/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) A. M. RODRIGO	Amount of contribution (\$) 2,500⁰⁰
Contributor address; City; State; Zip Code 15514 TURTLE OAK COURT HOUSTON, TX 77059		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) G.C. ENGINEERING
Date 12/28/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VISAYA RAPOLU	Amount of contribution (\$) 2,500⁰⁰
Contributor address; City; State; Zip Code 27822 ACACIA SIEN LN. KATY, TX 77494		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) KAVI CONSULTING
Date 12/28/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GABRIEL JOHNSON	Amount of contribution (\$) 1,500⁰⁰
Contributor address; City; State; Zip Code 9407 RESTONBROVE LANE HOUSTON, TX 77095		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) AIG TECH
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED 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: 32
2 FILER NAME JAMES 'GRADY' PROSTAGE		3 Filer ID (Ethics Commission Filers)
4 Date 12/28/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HR GREEN TEXAS PAC	7 Amount of contribution (\$) 1,500⁰⁰
6 Contributor address; City; State; Zip Code 11011 RICHMOND AVE. STE. 200 HOUSTON, TX 77042		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/28/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIMITRIS MILLAS	Amount of contribution (\$) 1,500⁰⁰
Contributor address; City; State; Zip Code 5324 CALHOUN RD. HOUSTON, TX 77021		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) MORTON & FULLBRIGHT
Date 12/28/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN BOONE HUMPHRIES ROBINSON LLP	Amount of contribution (\$) 1,500⁰⁰
Contributor address; City; State; Zip Code 3200 SOUTHWEST FREEWAY, STE. 2600 HOUSTON, TX 77027		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/28/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ERROLL WILKERSON	Amount of contribution (\$) 1,500⁰⁰
Contributor address; City; State; Zip Code 3807 OAKWICK FOREST MISSOURI CITY, TX 77459		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)

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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: 32
2 FILER NAME JAMES 'GRADY' PRESTAGE		3 Filer ID (Ethics Commission Filers)
4 Date 12/28/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) QUANTITY PAC	7 Amount of contribution (\$) 1,500⁰⁰
6 Contributor address; City; State; Zip Code 6330 WEST LOOPS. STE. 150		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/28/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAM BOUCHE MICKEY	Amount of contribution (\$) 4500⁰⁰
Contributor address; City; State; Zip Code 27010 BERING CROSSING DR. KATY, TX 77494		
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) ADMIRAL
Date 12/28/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JERRY SOWELLS	Amount of contribution (\$) 1,500⁰⁰
Contributor address; City; State; Zip Code 18022 BLUE RIDGE SHORES DR. CYPRESS, TX 77433		
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) SOWELLS CONSTRUCTION MANAGEMENT
Date 12/28/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RPS INFRASTRUCTURE, INC. PAC	Amount of contribution (\$) 1,500⁰⁰
Contributor address; City; State; Zip Code 1160 DAIRY ASHFORD RD., STE. 500 HOUSTON, TX 77079		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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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: 32
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2 FILER NAME JAMES 'GRABY' PRESTAGE	3 Filer ID (Ethics Commission Filers)
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4 Date 12/28/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LARRY BARFIELD	7 Amount of contribution (\$) 500⁰⁰
6 Contributor address; City; State; Zip Code 10827 PAINTED CRESCENT CT. CYPRESS, TX 77433		

8 Principal occupation / Job title (See Instructions) ENGINEER	9 Employer (See Instructions) BINKLEY & BARFIELD
--	--

Date 12/28/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAMES BRETT BINKLEY	Amount of contribution (\$) 500⁰⁰
Contributor address; City; State; Zip Code 9209 STASE COACH DR. HOUSTON, TX 77041		

Principal occupation / Job title (See Instructions) ENGINEER	Employer (See Instructions) BINKLEY & BARFIELD
--	--

Date 12/28/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JR REDDISH	Amount of contribution (\$) 500⁰⁰
Contributor address; City; State; Zip Code 1302 CEDAR TERRACE CT. SUGARLAND, TX 77479		

Principal occupation / Job title (See Instructions) ENGINEER	Employer (See Instructions) BINKLEY & BARFIELD
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Date 12/28/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVID HAMILTON	Amount of contribution (\$) 500⁰⁰
Contributor address; City; State; Zip Code 12315 WOODTHORPE LN. HOUSTON, TX 77024		

Principal occupation / Job title (See Instructions) ENGINEER	Employer (See Instructions) BINKLEY & BARFIELD
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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: <u>32</u>
2 FILER NAME <u>JAMES 'GRADY' PRESTAGE</u>		3 Filer ID (Ethics Commission Filers)
4 Date <u>12/28/22</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <u>MOUSSEF A. LAHAM</u>	7 Amount of contribution (\$) <u>500⁰⁰</u>
6 Contributor address; City; State; Zip Code <u>23230 SUMMERS CREEK CT. KATY, TX 77494</u>		
8 Principal occupation / Job title (See Instructions) <u>ENGINEER</u>		9 Employer (See Instructions) <u>BINKLEY BARFIELD</u>
Date <u>12/28/22</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <u>MARK GIBSON</u>	Amount of contribution (\$) <u>500⁰⁰</u>
Contributor address; City; State; Zip Code <u>6307 PENHALLOW LN. MISSOURI CITY, TX 77459</u>		
Principal occupation / Job title (See Instructions) <u>S.P.</u>		Employer (See Instructions) <u>FBC</u>
Date <u>12/28/22</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <u>MOURHAF SABOUNI</u>	Amount of contribution (\$) <u>1,250⁰⁰</u>
Contributor address; City; State; Zip Code <u>23 PALM BLVD. MISSOURI CITY, TX 77459</u>		
Principal occupation / Job title (See Instructions) <u>ARCHITECTS</u>		Employer (See Instructions) <u>AUTO ARCH</u>
Date <u>12/28/22</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <u>TIA BAKER</u>	Amount of contribution (\$) <u>1,250⁰⁰</u>
Contributor address; City; State; Zip Code <u>11510 SCOTTS DALE DR. MEADOWS PLACE, TX 77477</u>		
Principal occupation / Job title (See Instructions) <u>ENGINEER</u>		Employer (See Instructions) <u>LSA</u>
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED 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: 32
2 FILER NAME JAMES 'GRADY' PRESTAGE		3 Filer ID (Ethics Commission Filers)
4 Date 12/20/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OMAR ESCOBAR SR	7 Amount of contribution (\$) 1,250⁰⁰
6 Contributor address; City; State; Zip Code 16910 ROBERTS HILL DR. CYPRESS TX 77433		
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) LSA
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	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: 48	2 FILER NAME James Grady Prestage	3 Filer ID (Ethics Commission Filers)
4 Date 10/31/22	5 Payee name Ordia R. Drew	
6 Amount (\$) 200 ⁰⁰	7 Payee address; City; State; Zip Code 36 Big Trail Missouri City, TX 77459	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor	(b) Description Poll worker
	(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 10/31/22	Payee name Michelle Hale	
Amount (\$) 360 ⁰⁰	Payee address; City; State; Zip Code 6919 Rosebud Hollow Lane Richmond, TX 77466	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Poll worker
	<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 10/31/22	Payee name Robert J Mayberry	
Amount (\$) 330 ⁰⁰	Payee address; City; State; Zip Code 2440 Texas Parkway Missouri City, TX 77489	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Poll worker
	<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

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: <i>48</i>	2 FILER NAME <i>James Grady Prestage</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>10/31/22</i>	5 Payee name <i>Chris Beavers</i>	
6 Amount (\$) <i>120⁰⁰</i>	7 Payee address; City; State; Zip Code <i>2440 Texas Parkway # 202 Missoua City, TX 77489</i>	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Contract Labor</i>	(b) Description <i>Poll Worker</i>
	(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 <i>10/31/22</i>	Payee name <i>Michelle Hale</i>	
Amount (\$) <i>150⁰⁰</i>	Payee address; City; State; Zip Code <i>6919 Rosebud Hollow Lane Richmond, TX 77466</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Contract Labor</i>	Description <i>Poll Worker</i>
	<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 <i>10/31/22</i>	Payee name <i>Dustin Prestage</i>	
Amount (\$) <i>1,250⁰⁰</i>	Payee address; City; State; Zip Code <i>1357 Flatbush Ave 1-G Brooklyn NY 11210</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Consulting Expense</i>	Description <i>Campaign Manager</i>
	<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	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: 48	2 FILER NAME James Grady Prestage	3 Filer ID (Ethics Commission Filers)
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4 Date 10/31/22	5 Payee name Chris Beavers
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6 Amount (\$) 135 ⁰⁰	7 Payee address; 2440 Texas Parkway Missouri City, TX 77489	City;	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor	(b) Description Poll worker
	(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
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Date 10/31/22	Payee name Exodus Advisors
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Amount (\$) 2,040 ⁰⁰	Payee address; 4906 Grapevine Lake Ct. Richmond, TX 77407	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/1/22	Payee name NAACP
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Amount (\$) 256 ²⁵	Payee address; P.O 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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <i>48</i>	2 FILER NAME <i>James Grady Prestage</i>	3 Filer ID (Ethics Commission Filers)
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4 Date <i>11/1/22</i>	5 Payee name <i>Michelle Hate</i>
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6 Amount (\$) <i>180⁰⁰</i>	7 Payee address; <i>6919 Rosebud Hollow Lane Richmond, TX 77466</i>	City;	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Contract Labor</i>	(b) Description <i>Poll Worker</i>
	(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 <i>11/1/22</i>	Payee name <i>Jesse Torres</i>
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Amount (\$) <i>135⁰⁰</i>	Payee address; <i>2440 Texas Parkway Missouri City, TX 77489</i>	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Contract Labor</i>	Description <i>Poll Worker</i>
	<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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Date <i>11/1/22</i>	Payee name <i>Ordia Drew</i>
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Amount (\$) <i>180⁰⁰</i>	Payee address; <i>36 Big Trail Missouri City, TX 77459</i>	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Contract Labor</i>	Description <i>Poll worker</i>
	<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	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: 48	2 FILER NAME James Grady Prestage	3 Filer ID (Ethics Commission Filers)
4 Date 11/1/22	5 Payee name JLP Polling Center - Southern University	
6 Amount (\$) 10,550 ⁰⁰	7 Payee address; City; State; Zip Code 427-B Higgins Hall Baton Rouge, LA 70813	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling Expense	(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 11/1/22	Payee name Borris Miles Campaign	
Amount (\$) 1,000 ⁰⁰	Payee address; City; State; Zip Code 5308 Alameda Rd Houston, TX 77004	
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 11/2/22	Payee name Nations Auto	
Amount (\$) 520 ⁰⁰	Payee address; City; State; Zip Code 111 Present Street Missouri City, TX 77489	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation 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	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: 48	2 FILER NAME James Grady Prestage	3 Filer ID (Ethics Commission Filers)
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4 Date 11/2/22	5 Payee name Brenda Patton
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6 Amount (\$) 400 ⁰⁰	7 Payee address; 1618 Dusty Ridge 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) Consulting Expense	(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
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Date 11/2/22	Payee name The Tyson Organization
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Amount (\$) 16,500 ⁰⁰	Payee address; 1351 Mistletoe Drive Fort Worth, TX 76110	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Polling 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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/2/22	Payee name Chris Beavers
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Amount (\$) 135 ⁰⁰	Payee address; 2440 Texas Parkway Missouri City, TX 77489	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Poll Worker
	<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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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 848	2 FILER NAME James Grady Prestage	3 Filer ID (Ethics Commission Filers)
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4 Date 11/3/22	5 Payee name XKL Foundation
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6 Amount (\$) 325⁰⁰	7 Payee address; 7031 West Fugoa Missouri City, TX 77489	City;	State;	Zip Code
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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
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Date 11/3/22	Payee name Michelle Hale
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Amount (\$) 180⁰⁰	Payee address; 6919 Rosebud Hollow Lane Richmond, TX 77466	City;	State;	Zip Code
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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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Date 11/3/22	Payee name Ordia Drew
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Amount (\$) 180⁰⁰	Payee address; 36 Big Trail 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) 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

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: <i>48</i>	2 FILER NAME <i>James Grady Prestage</i>	3 Filer ID (Ethics Commission Filers)
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4 Date <i>11/3/22</i>	5 Payee name <i>Robert J. Mayberry</i>
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6 Amount (\$) <i>180⁰⁰</i>	7 Payee address; <i>2440 Texas Parkway Missouri City, TX 77489</i>	City;	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Contract Labor</i>	(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 <i>11/3/22</i>	Payee name <i>Ursula Wright</i>
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Amount (\$) <i>135⁰⁰</i>	Payee address; <i>514 Summer Mist Ln Rosenberg, TX 77469</i>	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Contract Labor</i>	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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Date <i>11/3/22</i>	Payee name <i>Chris Beavers</i>
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Amount (\$) <i>180⁰⁰</i>	Payee address; <i>2440 Texas Parkway Missouri City, TX 77489</i>	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Contract Labor</i>	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: <i>48</i>	2 FILER NAME <i>James Grady Prestage</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>11/4/22</i>	5 Payee name <i>Givebutter - Twelve Days of Christmas</i>	
6 Amount (\$) <i>287⁷⁸</i>	7 Payee address; City; State; Zip Code <i>P.O. Box 66411 Houston, TX 77266</i>	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Donation</i>	(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 <i>11/4/22</i>	Payee name <i>Michelle Hale</i>	
Amount (\$) <i>180⁰⁰</i>	Payee address; City; State; Zip Code <i>6919 Rosebud Hollow Lane Richmond, TX 77469</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Contract Labor</i>	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 <i>11/4/22</i>	Payee name <i>Ordia Drew</i>	
Amount (\$) <i>180⁰⁰</i>	Payee address; City; State; Zip Code <i>36 Big Trail Missouri City, TX 77459</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Contract Labor</i>	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	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: 48	2 FILER NAME James Grady Prestage	3 Filer ID (Ethics Commission Filers)
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4 Date 11/4/22	5 Payee name Robert J. Mayberry
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6 Amount (\$) 180 ⁰⁰	7 Payee address; 2440 TX Parkway Missouri City, TX 77489	City;	State;	Zip Code
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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
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Date 11/4/22	Payee name O'Reilly Auto Parts
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Amount (\$) 129 ⁸⁷	Payee address; 3410 Texas Parkway Missouri City, TX 77489	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation 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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/7/22	Payee name Beto O'Rourke Campaign c/o Act Blue
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Amount (\$) 250 ⁰⁰	Payee address; 366 Summer St. Somerville, MA 02144	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 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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 48	2 FILER NAME James Grady Prestage	3 Filer ID (Ethics Commission Filers)
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4 Date 11/7/22	5 Payee name Robert J Mayberry
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6 Amount (\$) 180 ⁰⁰	7 Payee address: 2440 Texas Parkway Missouri City, TX 77489	City:	State:	Zip Code
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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	Candidate / Officeholder name	Office sought	Office held
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Date 11/7/22	Payee name Ordia Drew
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Amount (\$) 180 ⁰⁰	Payee address: 36 Big Trail 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) 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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Date 11/7/22	Payee name Chris Beavers
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Amount (\$) 135 ⁰⁰	Payee address: 2440 Texas Parkway Missouri City, TX 77489	City:	State:	Zip Code
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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

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: 48	2 FILER NAME James Grady Prestage	3 Filer ID (Ethics Commission Filers)
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4 Date 11/7/22	5 Payee name Aoede, LLC
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6 Amount (\$) 533²²	7 Payee address; 2440 Texas Parkway Missouri City, TX 77489	City;	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Rental	(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
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Date 11/7/22	Payee name Exodus Advisors
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Amount (\$) 3,780⁰⁰	Payee address; 4906 Grapevine Lake Ct. Richmond, TX 77407	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/7/22	Payee name Exodus Advisors
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Amount (\$) 8,000⁰⁰	Payee address; 4906 Grapevine Lake Ct Richmond, TX 77407	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

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

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: 48		2 FILER NAME James Grady Prestage		3 Filer ID (Ethics Commission Filers)	
4 Date 11/7/22		5 Payee name Dustin Prestage			
6 Amount (\$) 1,250 ⁰⁰		7 Payee address; 1357 Flatbush Ave 1-G Brooklyn, NY 11210		City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(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 11/7/22		Payee name Maurice Lewis			
Amount (\$) 1,000 ⁰⁰		Payee address; 9614 Brannok Ln Tomball, TX 77375		City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense		Description		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

Date 11/7/22		Payee name O'Neill Gilbert			
Amount (\$) 2,500 ⁰⁰		Payee address; 2506 Pioneer Oaks Drive Fresno, TX 77545		City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description Election Watch Party		
	<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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <i>48</i>	2 FILER NAME <i>James Grady Prestage</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>11/9/22</i>	5 Payee name <i>Chris Beavers</i>	
6 Amount (\$) <i>130⁰⁰</i>	7 Payee address; City; State; Zip Code <i>2440 Texas Parkway Missouri City, TX 77489</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Contract Labor</i>	(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 <i>11/9/22</i>	Payee name <i>Ashley Hill</i>	
Amount (\$) <i>100⁰⁰</i>	Payee address; City; State; Zip Code <i>2440 Texas Parkway Missouri City, TX 77489</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Contract Labor</i>	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 <i>11/10/22</i>	Payee name <i>Big Mammias Restaurant</i>	
Amount (\$) <i>1,305⁴⁰</i>	Payee address; City; State; Zip Code <i>8731 State Highway 6 N Unit 100 Missouri City, TX 77459</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Food/Beverage Expense</i>	Description <i>Election Watch Party</i>
	<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: 48	2 FILER NAME James Grady Prestage	3 Filer ID (Ethics Commission Filers)
4 Date 11/10/22	5 Payee name T-Mobile	
6 Amount (\$) 580⁸⁸	7 Payee address; City; State; Zip Code 9340 Highway 6, suite 300 Missouri City, TX 77459	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Communications Expense	(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 11/10/22	Payee name Daryl Edwards	
Amount (\$) 180⁰⁰	Payee address; City; State; Zip Code 2440 Texas Parkway Missouri City, TX 77489	
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

Date 11/10/22	Payee name Michelle Hale	
Amount (\$) 180⁰⁰	Payee address; City; State; Zip Code 6919 Rosebud Hollow Lane 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 <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	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: 48	2 FILER NAME James Grady Prestage	3 Filer ID (Ethics Commission Filers)
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4 Date 11/10/22	5 Payee name Ordia Drew
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6 Amount (\$) 180⁰⁰	7 Payee address; 36 Big Trail 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) 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	Candidate / Officeholder name	Office sought	Office held
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Date 11/10/22	Payee name Robert Mayberry
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Amount (\$) 180⁰⁰	Payee address; 2440 Texas Parkway Missouri City, TX 77489	City;	State;	Zip Code
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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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Date 11/10/22	Payee name Ursula Wright
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Amount (\$) 135⁰⁰	Payee address; 514 Summer Mist Ln Rosenberg, TX 77469	City;	State;	Zip Code
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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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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
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: <i>48</i>	2 FILER NAME <i>James Grady Prestage</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>12/7/22</i>	5 Payee name <i>Sheraton New Orleans</i>	
6 Amount (\$) <i>959⁹⁵</i>	7 Payee address; City; State; Zip Code <i>500 Canal St. New Orleans, LA 70130</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Travel Expense</i>	(b) Description <i>La. Legislative Black caucus Mtg</i>
	(c) <input checked="" 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 <i>12/7/22</i>	Payee name <i>Costco Wholesale</i>		
Amount (\$) <i>390³⁶</i>	Payee address; City; State; Zip Code <i>12717 Network Dr Stafford, TX 77477</i>		

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Event Expense</i>	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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Date <i>12/7/22</i>	Payee name <i>Fox Auto Glass</i>		
Amount (\$) <i>226⁰⁰</i>	Payee address; City; State; Zip Code <i>2001 S. Voss Rd # 517 Houston, TX 77057</i>		

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Transportation Expense</i>	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: <i>48</i>	2 FILER NAME <i>James Grody Prestage</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>12/7/22</i>	5 Payee name <i>Brenda Patton</i>	
6 Amount (\$) <i>400⁰⁰</i>	7 Payee address; <i>1618 Dusty Ridge</i> <i>Missouri City, TX 77459</i>	City; State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Consulting Expense</i>	(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 <i>12/8/22</i>	Payee name <i>J&J Parking Company</i>	
Amount (\$) <i>219⁸³</i>	Payee address; <i>35602 West Highway 90</i> <i>Brookshire, TX 77423</i>	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Event Expense</i>	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 <i>12/8/22</i>	Payee name <i>Fiesta Mart</i>	
Amount (\$) <i>150⁵⁸</i>	Payee address; <i>1530 Independence</i> <i>Missouri City, TX 77489</i>	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Event Expense</i>	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	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: 48	2 FILER NAME James Grady Prestage	3 Filer ID (Ethics Commission Filers)
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4 Date 12/9/22	5 Payee name Community Missionary Baptist Church
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6 Amount (\$) 150⁰⁰	7 Payee address; 820 E. Wintergreen Rd cedar Hill, TX 75104	City;	State;	Zip Code
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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
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Date 12/9/22	Payee name Pluckers
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Amount (\$) 131⁶⁹	Payee address; 12469 Southwest Freeway Stafford, TX 77477	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description staff meeting
	<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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Date 12/9/22	Payee name John Washington
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Amount (\$) 250⁰⁰	Payee address; 5515 Condon Lane Houston, TX 77053	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Photography	Description community luncheon
	<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: <i>48</i>	2 FILER NAME <i>James Grady Prestage</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>12/9/22</i>	5 Payee name <i>Solomon Spencer</i>	
6 Amount (\$) <i>250⁰⁰</i>	7 Payee address; City; State; Zip Code <i>3819 Kiamesha Dr. Missouri City, TX 77459</i>	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Event Expense</i>	(b) Description <i>Entertainment</i>
	(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 <i>12/9/22</i>	Payee name <i>Charolette Allen</i>	
Amount (\$) <i>400⁰⁰</i>	Payee address; City; State; Zip Code <i>Rt. 1, Box 712 Wharton, TX 77488</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Event Expense</i>	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 <i>12/9/22</i>	Payee name <i>Brenda Patton</i>	
Amount (\$) <i>466²⁷</i>	Payee address; City; State; Zip Code <i>1618 Dusty Ridge Missouri City, TX 77459</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Event Expense reimbursement</i>	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	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: <i>48</i>	2 FILER NAME <i>James Grady Prestage</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>11/10/22</i>	5 Payee name <i>Vickie Gibbs</i>	
6 Amount (\$) <i>480⁰⁰</i>	7 Payee address; City; State; Zip Code <i>3802 Point Clear Missouri City, TX 77459</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Contract Labor</i>	
	(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 <i>11/10/22</i>	Payee name <i>Maurice Lewis</i>	
Amount (\$) <i>1,000⁰⁰</i>	Payee address; City; State; Zip Code <i>9614 Brannock Ln Tomball, TX 77375</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Consulting Expense</i>	
	Description	
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Candidate / Officeholder name Office sought Office held		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date <i>11/14/22</i>	Payee name <i>Ursula Wight</i>	
Amount (\$) <i>600⁰⁰</i>	Payee address; City; State; Zip Code <i>514 Summer Mist Ln Rosenberg, TX 77469</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Contract Labor</i>	
	Description	
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Candidate / Officeholder name Office sought Office held		
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: 48	2 FILER NAME James Grady Prestage	3 Filer ID (Ethics Commission Filers)
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4 Date 11/14/22	5 Payee name American Caribbean Chamber of Commerce
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6 Amount (\$) 250⁰⁰	7 Payee address; City; State; Zip Code 6201 Bonhomme St, Ste 614N Houston, TX 77036
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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
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Date 11/14/22	Payee name Dustin Prestage
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Amount (\$) 1,250⁰⁰	Payee address; City; State; Zip Code 1357 Flatbush Ave #1-G Brooklyn, NY 11210
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/14/22	Payee name Edwards Ministerial Association, Inc
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Amount (\$) 100⁰⁰	Payee address; City; State; Zip Code 4140 Governors Row Austin, TX 78730
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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	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: 48	2 FILER NAME James Grady Prestage	3 Filer ID (Ethics Commission Filers)
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4 Date 11/16/22	5 Payee name Fort Bend Transformation Church
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6 Amount (\$) 250 ⁰⁰	7 Payee address; 3900 Raoul Wallenberg Ln 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) 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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/17/22	Payee name Michele Forman
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Amount (\$) 1,986 ⁰⁰	Payee address; 1833 Richmond Pkwy Richmond, TX 77469	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage 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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/21/22	Payee name The Driskill Hyatt
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Amount (\$) 962 ⁴²	Payee address; 604 Brazos St Austin, TX 78701	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel/Lodging	Description FBEDC Conference
	<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

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: 48	2 FILER NAME James Grady Prestage	3 Filer ID (Ethics Commission Filers)
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4 Date 11/21/22	5 Payee name Universally MADE % Ferrell Bonner
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6 Amount (\$) 250⁰⁰	7 Payee address; PO Box 1063 Fresno, TX 77545	City;	State;	Zip Code
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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
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Date 11/21/22	Payee name Constant Contact
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Amount (\$) 204⁷⁵	Payee address; 1601 Trapelo Road Waltham, MA 02451	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising 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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Date 11/22/22	Payee name Southern University Foundation
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Amount (\$) 1,000⁰⁰	Payee address; JS Clark Administration Bldg, Room 32 Baton Rouge, LA 70813	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: <i>48</i>	2 FILER NAME <i>James Grady Prestage</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>11/22/22</i>	5 Payee name <i>Community Works CDC</i>	
6 Amount (\$) <i>257⁵⁰</i>	7 Payee address; City; State; Zip Code <i>7111 Homestead Rd Houston, TX 77028</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Donation</i>	
	(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 <i>11/23/22</i>	Payee name <i>Kovetta Brown</i>	
Amount (\$) <i>250⁰⁰</i>	Payee address; City; State; Zip Code <i>5206 Madden Lane Houston, TX 77048</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Donation</i>	
	Description	
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Candidate / Officeholder name Office sought Office held		
Complete ONLY if direct expenditure to benefit C/OH		
Date <i>11/25/22</i>	Payee name <i>Jocelyn Lewis</i>	
Amount (\$) <i>130⁰⁰</i>	Payee address; City; State; Zip Code <i>JS Clark Administration Bldg, Room 32 Baton Rouge, LA 70813</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Donation</i>	
	Description	
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Candidate / Officeholder name Office sought Office held		
Complete ONLY 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: 48	2 FILER NAME James Grady Prestage	3 Filer ID (Ethics Commission Filers)
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4 Date 11/29/22	5 Payee name Fountain of Praise
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6 Amount (\$) 1,287⁷⁰	7 Payee address; 13950 Hillcroft - Houston, TX 77085	City;	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Donation/Sponsorship	(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 11/29/22	Payee name The Webstaurant Store
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Amount (\$) 1,256⁹⁷	Payee address; 2205 Old Philadelphia Pike Lancaster, PA 17602	City;	State;	Zip Code
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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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Date 11/29/22	Payee name Texas Council of Alpha Chapters
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Amount (\$) 250⁰⁰	Payee address; P.O. Box 851144 Mesquite, TX 75185	City;	State;	Zip Code
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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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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
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: 48	2 FILER NAME James Grady Prestage	3 Filer ID (Ethics Commission Filers)
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4 Date 12/2/22	5 Payee name Los Galitos Restaurant
--------------------------	---

6 Amount (\$) 126⁷⁸	7 Payee address; 3385 Highway 6 Sugar Land, TX 77478	City;	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description TDW Ft. Bend Event
	(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
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Date 12/2/22	Payee name Aoede, LLC
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Amount (\$) 533²²	Payee address; 2440 Texas Parkway Missouri City, TX 77489	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Rental	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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Date 12/2/22	Payee name American Storage
------------------------	---------------------------------------

Amount (\$) 794⁰⁰	Payee address; 2427 Texas Parkway Missouri City, TX 77489	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Storage	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	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: 48	2 FILER NAME James Grady Prestage	3 Filer ID (Ethics Commission Filers)
4 Date 12/5/22	5 Payee name Academy Sports and Outdoors	
6 Amount (\$) 281.43	7 Payee address; 9210 Highway 6 Missouri City, TX 77459	City; State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Community Luncheon
	(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 12/6/22	Payee name American Caribbean Chamber of Commerce	
Amount (\$) 250.00	Payee address; 6201 Bonhomme St, Ste 614 N Houston, TX 77036	City; State; Zip Code
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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 12/6/22	Payee name Charlie Walker Insurance	
Amount (\$) 650.00	Payee address; 2338 Texas Parkway Missouri City, TX 77489	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Liability Insurance
	<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: <i>48</i>	2 FILER NAME <i>James Grady Prestage</i>	3 Filer ID (Ethics Commission Filers)
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4 Date <i>12/9/22</i>	5 Payee name <i>Stanley Alexander</i>
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6 Amount (\$) <i>300⁰⁰</i>	7 Payee address; <i>1618 Dusty Ridge Missouri City, TX 77459</i>	City;	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Event Expense</i>	(b) Description <i>Community Luncheon</i>
	(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 <i>12/12/22</i>	Payee name <i>T-Mobile</i>
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Amount (\$) <i>580⁸⁸</i>	Payee address; <i>9340 Highway 6 Missouri City, TX 77459</i>	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Communication Expense</i>	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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Date <i>12/12/22</i>	Payee name <i>Yvette Woods-Britton</i>
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Amount (\$) <i>300⁰⁰</i>	Payee address; <i>9927 South Court Dr Houston, TX 77099</i>	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Event Expense</i>	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: 48	2 FILER NAME James Grady Prestage	3 Filer ID (Ethics Commission Filers)
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4 Date 12/13/22	5 Payee name Missouri City & Vicinity NAACP
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6 Amount (\$) 350⁰⁰	7 Payee address; PO Box 1053 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) 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
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Date 12/14/22	Payee name Sam's Club
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Amount (\$) 219⁵³	Payee address; 12300 Southwest Freeway Stafford, TX 77477	City;	State;	Zip Code
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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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Date 12/14/22	Payee name Fiesta Mart
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Amount (\$) 112⁹⁹	Payee address; 12355 South Main Houston, TX 77035	City;	State;	Zip Code
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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

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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: <i>48</i>	2 FILER NAME <i>James Grady Prestage</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>12/15/22</i>	5 Payee name <i>Kroger</i>	
6 Amount (\$) <i>134²⁴</i>	7 Payee address; City; State; Zip Code <i>10250 Highway 6 Missouri City, TX 77459</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Event Expense</i>	(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 <i>12/15/22</i>	Candidate / Officeholder name <i>Toni Wallace Campaign</i>	
Amount (\$) <i>1,000⁰⁰</i>	Office sought <i>Richmond, TX 77406</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Donation</i>	Office held
	<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 <i>12/16/22</i>	Candidate / Officeholder name <i>Yvette Woods-Britton</i>	
Amount (\$) <i>300⁰⁰</i>	Office sought <i>Houston, TX 77099</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Event Expense</i>	Office held
	<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: 48	2 FILER NAME James Grady Prestage	3 Filer ID (Ethics Commission Filers)
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4 Date 12/16/22	5 Payee name Ordia Drew
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6 Amount (\$) 500⁰⁰	7 Payee address; 36 Big Trail 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) 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	Candidate / Officeholder name	Office sought	Office held
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Date 12/16/22	Payee name Jesus Lopez
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Amount (\$) 450⁰⁰	Payee address; 5627 Brookfield Dr Houston, TX 77085	City;	State;	Zip Code
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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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Date 12/19/22	Payee name Amazon Marketplace
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Amount (\$) 361²⁴	Payee address; 410 Terry Avenue N Seattle, WA 98109	City;	State;	Zip Code
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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

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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: 48	2 FILER NAME James Grady Prestage	3 Filer ID (Ethics Commission Filers)
4 Date 12/19/22	5 Payee name Temlyn Rene Lomax-Jones	
6 Amount (\$) 300⁰⁰	7 Payee address; 10602 Indian Paintbrush Ln Houston, TX 77095	City; State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(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 12/19/22	Payee name Phoenix Design Group	
Amount (\$) 1,387⁶²	Payee address; 13406 Redfish Ln Stafford, TX 77477	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

Date 12/19/22	Payee name Lowe's	
Amount (\$) 439⁵⁰	Payee address; 3807 FM 1092 Missouri City, TX 77459	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

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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: 48	2 FILER NAME James Grady Prestage	3 Filer ID (Ethics Commission Filers)
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4 Date 12/19/22	5 Payee name Home Depot
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6 Amount (\$) 323⁸⁸	7 Payee address; 5900 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) Event Expense	(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
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Date 12/19/22	Payee name T-Mobile
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Amount (\$) 1,353⁰⁸	Payee address; 9340 Highway 6 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) Communication 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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12/19/22	Payee name T-Mobile
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Amount (\$) 1,252⁶⁴	Payee address; 9340 Highway 6 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) Communication 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 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

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: <i>48</i>	2 FILER NAME <i>James Grady Prestage</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>12/19/22</i>	5 Payee name <i>City of Stafford</i>	
6 Amount (\$) <i>5,750⁰⁰</i>	7 Payee address; City; State; Zip Code <i>2610 S. Main St. Stafford, TX 77477</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Event Expense</i>	(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 <i>12/20/22</i>	Payee name <i>Constant Contact</i>	
Amount (\$) <i>204⁷⁵</i>	Payee address; City; State; Zip Code <i>1601 Trapelo Road Waltham, MA 02451</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>	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 <i>12/20/22</i>	Payee name <i>Dustin Prestage</i>	
Amount (\$) <i>685⁰⁰</i>	Payee address; City; State; Zip Code <i>1357 Flatbush Ave #1-G Brooklyn, NY 11210</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Consulting Expense</i>	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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 48	2 FILER NAME James Grady Prestage	3 Filer ID (Ethics Commission Filers)
4 Date 12/20/22	5 Payee name King Dollar	
6 Amount (\$) 176 ⁶⁴	7 Payee address; City; State; Zip Code 2192 Texas Parkway Missouri City, TX 77459	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(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 12/20/22	Payee name NOSisterLeft Behind, Inc		
Amount (\$) 900 ⁰⁰	Payee address; City; State; Zip Code P.O. Box 19695 Sugar Land, TX 77496		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event sponsorship	Description Kwanza Celebration	
	<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 12/21/22	Payee name Theriy1 Drew		
Amount (\$) 166 ⁰⁰	Payee address; City; State; Zip Code PO Box 28 Oakdale, LA 71463		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Reimbursement for 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: 48	2 FILER NAME James Grady Prestage	3 Filer ID (Ethics Commission Filers)
4 Date 12/22/22	5 Payee name Kapcherd Studios	
6 Amount (\$) 625 ⁰⁰	7 Payee address; City; State; Zip Code 1824 Spring Street Houston, TX 77007	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Photography services	(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 12/22/22	Payee name J & J Packing Company	
Amount (\$) 856 ⁵³	Payee address; City; State; Zip Code 35602 Highway 90 Brookshire, TX 77423	
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
Date 12/22/22	Payee name Sam's Club	
Amount (\$) 218 ⁸⁴	Payee address; City; State; Zip Code 351 State Highway 6 Sugar Land, TX 77478	
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

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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: 48	2 FILER NAME James Grady Prestage	3 Filer ID (Ethics Commission Filers)
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4 Date 12/22/22	5 Payee name Costco Wholesale
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6 Amount (\$) 243⁵⁰-	7 Payee address; 12717 Network Drive Stafford, TX 77477	City;	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(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 12/22/22	Payee name Costco Wholesale
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Amount (\$) 151⁵³	Payee address; 12717 Network Dr Stafford, TX 77477	City;	State;	Zip Code
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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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Date 12/22/22	Payee name Sam's Club
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Amount (\$) 182¹²	Payee address; 12300 Southwest Freeway Stafford, TX 77477	City;	State;	Zip Code
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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

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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: <i>48</i>	2 FILER NAME <i>James Grady Prestage</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>12/23/22</i>	5 Payee name <i>Apex Signs</i>	
6 Amount (\$) <i>866⁰⁰</i>	7 Payee address; <i>13003 Murphy Rd, unit B2 Stafford, TX 77477</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Event Expense</i>	(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 <i>12/23/22</i>	Payee name <i>Brenda Patton</i>	
Amount (\$) <i>150⁰⁰</i>	Payee address; <i>1618 Dusty Ridge Missoua City, TX 77459</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Event Expense reimbursement</i>	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 <i>12/23/22</i>	Payee name <i>Mauvnce Lewis</i>	
Amount (\$) <i>1,500⁰⁰</i>	Payee address; <i>9614 Bannok Ln Tomball, TX 77375</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Contract Labor</i>	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: 48	2 FILER NAME James Grady Prestage	3 Filer ID (Ethics Commission Filers)
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4 Date 12/23/22	5 Payee name Ben E. Keith Food Service
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6 Amount (\$) 86 2,808	7 Payee address; 725 S. Cravens Road Missouri City, TX 77489	City;	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(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 12/23/22	Payee name Julie Perez
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Amount (\$) 00 200	Payee address; 10505 Cash Road Stafford, TX 77477	City;	State;	Zip Code
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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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Date 12/27/22	Payee name Uhaul Moving
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Amount (\$) 64 187	Payee address; 603 Murphy Rd Stafford, TX 77477	City;	State;	Zip Code
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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

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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: 48	2 FILER NAME James Grady Prestage	3 Filer ID (Ethics Commission Filers)
4 Date 12/27/22	5 Payee name Ursula Wright	
6 Amount (\$) 432 ⁰⁰	7 Payee address; City; State; Zip Code 514 Summer Mist Ln Rosenberg, TX 77469	
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		
Candidate / Officeholder name Office sought Office held		
Date 12/27/22	Payee name John Washington	
Amount (\$) 700 ⁰⁰	Payee address; City; State; Zip Code 5515 Condon Lane Houston, TX 77053	
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		
Date 12/27/22	Payee name Truha Harvey	
Amount (\$) 360 ⁰⁰	Payee address; City; State; Zip Code 6407 West Ridgescreek Missouri City, TX 77489	
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 | 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: <i>48</i>	2 FILER NAME <i>James Grody Prestage</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>12/27/22</i>	5 Payee name <i>Linda Gilbert</i>	
6 Amount (\$) <i>250⁰⁰</i>	7 Payee address; <i>10505 Cash Road Stafford, TX 77477</i>	City; State; Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Event Expense</i>	(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 <i>12/27/22</i>	Payee name <i>Betty Arceneaux</i>	
Amount (\$) <i>250⁰⁰</i>	Payee address; <i>10505 Cash Road Stafford, TX 77477</i>	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Event Expense</i>	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 <i>12/27/22</i>	Payee name <i>Yvette Woods Britton</i>	
Amount (\$) <i>600⁰⁰</i>	Payee address; <i>9927 South Court Dr Houston, TX 77099</i>	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Contract Labor</i>	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: 48		2 FILER NAME James Grady Prestage		3 Filer ID (Ethics Commission Filers)	
4 Date 12/27/22		5 Payee name Gabe Onyeagu			
6 Amount (\$) 140⁰⁰		7 Payee address; City; State; Zip Code 10505 Cash Road 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 12/27/22		Payee name Ulysses Grady, Jr			
Amount (\$) 140⁰⁰		Payee address; City; State; Zip Code 10505 Cash Road Stafford, TX 77477			
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 12/27/22		Payee name Charollette Allen			
Amount (\$) 600⁰⁰		Payee address; City; State; Zip Code Rt 1, Box 712 Wharton, TX 77488			
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 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	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: 48	2 FILER NAME James Grady Prestage	3 Filer ID (Ethics Commission Filers)
4 Date 12/27/22	5 Payee name Ordiq Drew	
6 Amount (\$) 400⁰⁰	7 Payee address; City; State; Zip Code 36 Big Trail Missouri City, TX 77459	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(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 12/27/22	Payee name Trey Perkins	
Amount (\$) 140⁰⁰	Payee address; City; State; Zip Code 10505 Cash Road Stafford, TX 77477	
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
Date 12/27/22	Payee name Dustin Prestage	
Amount (\$) 500⁰⁰	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	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: 48	2 FILER NAME James Grady Prestage	3 Filer ID (Ethics Commission Filers)
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4 Date 12/27/22	5 Payee name Take 5 Oil Change
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6 Amount (\$) 103 ⁵⁸	7 Payee address: 9626 Highway b 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) Transportation Expense	(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
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Date 12/27/22	Payee name Shani Turner
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Amount (\$) 100 ⁰⁰	Payee address: 3204 Orchard Mill Ln Pearland, TX 77584	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labour	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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Date 12/28/22	Payee name Missouri City Baptist Church
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Amount (\$) 100 ⁰⁰	Payee address: 16816 Quail Park Missouri City, TX 77489	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 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

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: 48	2 FILER NAME James Grady Prestage	3 Filer ID (Ethics Commission Filers)
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4 Date 12/28/22	5 Payee name Maurice Lewis
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6 Amount (\$) 1,000⁰⁰	7 Payee address; 9614 Brannok Ln Tomball, TX 77375	City;	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(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
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Date 12/28/22	Payee name Raistons Discount Liquor
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Amount (\$) 3,060⁹⁰	Payee address; 3013 S. Main Stafford, TX 77477	City;	State;	Zip Code
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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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12/29/22	Payee name Shaz Graphics
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Amount (\$) 191⁶⁰	Payee address; 13003 Murphy Road, Unit B6 Stafford, TX 77477	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing 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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
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: <i>48</i>	2 FILER NAME <i>James Grady Prestage</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>12/29/22</i>	5 Payee name <i>Acade, LLC</i>	
6 Amount (\$) <i>533²²</i>	7 Payee address; City; State; Zip Code <i>2440 Texas Parkway Missouri City, TX 77489</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Office Rental</i>	(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 <i>12/29/22</i>	Payee name <i>The Greatest BBQ</i>	
Amount (\$) <i>12,000⁰⁰</i>	Payee address; City; State; Zip Code <i>2358 Texas Parkway Missouri City, TX 77489</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Event Expense</i>	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 <i>12/30/22</i>	Payee name <i>Best Buy</i>	
Amount (\$) <i>1,675⁷¹</i>	Payee address; City; State; Zip Code <i>16980 Southwest Freeway Sugar Land, TX 77479</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Computer Equipment</i>	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: 48	2 FILER NAME James Grady Prestage	3 Filer ID (Ethics Commission Filers)
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4 Date 12/30/22	5 Payee name Ben E. Keith Food Service
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6 Amount (\$) 9,792 ²⁸	7 Payee address; 725 S. Cravens Road Missouri City, TX 77489	City;	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(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 12/30/22	Payee name Dwayne Santa Cruz
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Amount (\$) 1,000 ⁰⁰	Payee address; P.O. Box 651 Katy, TX 77492	City;	State;	Zip Code
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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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Date 11/6/22	Payee name Act Blue
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Amount (\$) 296. ²⁵	Payee address; 366 Summer Street Somerville, MA 02144	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Fundraising Commission
	<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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IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

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 T: <u>1</u>
2 FILER NAME <u>James Grady Prestage</u>		3 Filer ID (Ethics Commission Filers)
4 Name of Contributor / Corporation or Labor Organization / Pledgor / <u>Payee</u> <u>Sheraton - New Orleans</u>		
5 Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input checked="" type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC <input type="checkbox"/> Schedule B-SS		
6 Dates of travel <u>11-25-22</u> <u>to</u> <u>11-28-22</u>	7 Name of person(s) traveling <u>James Grady Prestage</u>	
	8 Departure city or name of departure location <u>Missouin City, TX</u>	
	9 Destination city or name of destination location <u>New Orleans, LA</u>	
10 Means of transportation <u>Auto</u>	11 Purpose of travel (including name of conference, seminar, or other event) <u>Attend Louisiana Legislative Black Caucus Event</u>	
Name of Contributor / Corporation or Labor Organization / Pledgor / Payee		
Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC <input type="checkbox"/> Schedule B-SS		
Dates of travel	Name of person(s) traveling	
	Departure city or name of departure location	
	Destination city or name of destination location	
Means of transportation	Purpose of travel (including name of conference, seminar, or other event)	
Name of Contributor / Corporation or Labor Organization / Pledgor / Payee		
Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC <input type="checkbox"/> Schedule B-SS		
Dates of travel	Name of person(s) traveling	
	Departure city or name of departure location	
	Destination city or name of destination location	
Means of transportation	Purpose of travel (including name of conference, seminar, or other event)	

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