

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

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

1 Filer ID (Ethics Commission Filers)

2 Total pages filed: **85**

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS **(MR)**

FIRST

James

MI

Grady

NICKNAME

LAST

Prestage

SUFFIX

OFFICE USE ONLY

Date Received

JUL 17 2023 RVD

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

36 Big Trail Missouri City TX 77459

Change of Address

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(281) 433-4444

Date Hand-delivered or Date Postmarked

6 CAMPAIGN TREASURER NAME

MS / MRS / MR

FIRST

Samuel

MI

L

NICKNAME

LAST

Stewart

SUFFIX

Receipt #

Amount \$

Date Processed

Date Imaged

7 CAMPAIGN TREASURER ADDRESS

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #;

CITY;

STATE;

ZIP CODE

15526 Winter Briar Missouri City

TX 77489

(Residence or Business)

8 CAMPAIGN TREASURER PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(713) 729-5761

9 REPORT TYPE

January 15

30th day before election

Runoff

15th day after campaign treasurer appointment (Officeholder Only)

July 15

8th day before election

Exceeded Modified Reporting Limit

Final Report (Attach C/OH - FR)

10 PERIOD COVERED

Month Day Year

01 / 01 / 23

THROUGH

Month Day Year

06 / 30 / 23

11 ELECTION

ELECTION DATE

Month Day Year

/ /

ELECTION TYPE

Primary

Runoff

Other Description

General

Special

12 OFFICE

OFFICE HELD (if any) **County Commissioner**

13 OFFICE SOUGHT (if known)

Precinct 2 Fort Bend County

14 NOTICE FROM POLITICAL COMMITTEE(S)

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

COMMITTEE TYPE

COMMITTEE NAME

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

Additional Pages

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

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

15 C/OH NAME James "Grady" Prestage		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)	\$ 1,987.86
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 224,537.86
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 24,076.45
	4. TOTAL POLITICAL EXPENDITURES	\$ 128,508.44
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 335,818.29
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.

James Grady Prestage
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 7-30-1958
 My address is 36 Big Trail (street), Missouri City (city), TX (state), 77459 (zip code), Fort Bend (country).
 Executed in Fort Bend County, State of Texas, on the 17th day of July, 2023.
 (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.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ <i>222,650</i>
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>104,431.99</i>
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 30
2 FILER NAME JAMES 'GRADY' PRESTAGE		3 Filer ID (Ethics Commission Filers)
4 Date 1-4-23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRITI K. SINGH	7 Amount of contribution (\$) 1,500⁰⁰
6 Contributor address; City; State; Zip Code 3143 Yellowstone Houston TX 77054		
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions)
Date 1-5-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) XI KAPPA LAMBDA CHAPTER	Amount of contribution (\$) 500⁰⁰
Contributor address; City; State; Zip Code 7031 W. Fugue Missouri City TX 77489		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 1-9-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DVIDIO N. ALANIS	Amount of contribution (\$) 2,500⁰⁰
Contributor address; City; State; Zip Code 2711 SILENT SPRING CREEK DR. KATY, TX 77450		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) EWtech
Date 1-9-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COSTELLO INC. PAC	Amount of contribution (\$) 250⁰⁰
Contributor address; City; State; Zip Code 2107 CITYWEST BLVD, 3RD FLOOR HOUSTON, TX 77042		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 30
2 FILER NAME JAMES 'GRADY' PRESTAGE		3 Filer ID (Ethics Commission Filers)
4 Date 1-9-23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REPUBLIC SERVICES, INC. PAC	7 Amount of contribution (\$) 500⁰⁰
6 Contributor address; City; State; Zip Code 18500 NORTH ALLIED WAY PHOENIX, AZ 85054		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 1-9-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DONALD MIDDLETON	Amount of contribution (\$) 1,500⁰⁰
Contributor address; City; State; Zip Code 416 PICKERING ST. HOUSTON, TX 77091		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) HTS
Date 1-9-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SONYA BROWN MARSHALL	Amount of contribution (\$) 500⁰⁰
Contributor address; City; State; Zip Code 407 JEWEL LANDING MISSOURI CITY, TX 77459		
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Marshall Management
Date 1-9-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LARRY F. JANAK	Amount of contribution (\$) 1,500⁰⁰
Contributor address; City; State; Zip Code 19215 COHEN GREEN LANE HOUSTON, TX 77094		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) IDC US

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: 30
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2 FILER NAME JAMES 'GRADY' PRESTAGE	3 Filer ID (Ethics Commission Filers)
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4 Date 1-25-23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIBEND DEMOCRATIC PARTY	7 Amount of contribution (\$) 8,000⁰⁰
6 Contributor address; City; State; Zip Code 11418 OAK LAKE RIDGE CT. SUGAR LAND, TX 77498		

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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Date 3-1-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CP & Y PAC	Amount of contribution (\$) 2,500⁰⁰
Contributor address; City; State; Zip Code 1020 REGAL ROW, SUITE 200 DALLAS, TX 75235		

Principal occupation / Job title (See Instructions) ENGINEERS	Employer (See Instructions)
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Date 4-5-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALIM CHAROLIA	Amount of contribution (\$) 2,500⁰⁰
Contributor address; City; State; Zip Code 20307 BRIGHTWOOD LN SPRING, TX 77379		

Principal occupation / Job title (See Instructions) Developer	Employer (See Instructions) Prime spot
---	--

Date 4-5-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMCAST CORP. PAC - TEXAS	Amount of contribution (\$) 1,500⁰⁰
Contributor address; City; State; Zip Code ONE COMCAST CENTER 1701 JFK BOULEVARD, PHILADELPHIA, PA 19103		

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

SCHEDULE A1

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2 FILER NAME JAMES 'GRADY' PRESTAGE		3 Filer ID (Ethics Commission Filers)
4 Date 4-25-23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POST OAK POINTS LTD Nino Colbetti	7 Amount of contribution (\$) 2,500⁰⁰
6 Contributor address; City; State; Zip Code 27101 WESTHEIMER PKWY. KATY, TX 77494		
8 Principal occupation / Job title (See Instructions) Developer		9 Employer (See Instructions) Post Oak Points
Date 4-25-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAQUEL OLIVIER	Amount of contribution (\$) 2,500⁰⁰
Contributor address; City; State; Zip Code 17318 ATHERINSTON PL. SPRING, TX 77379		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) OLIVIER, INC.
Date 4-25-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANK MBACHU	Amount of contribution (\$) 2,500⁰⁰
Contributor address; City; State; Zip Code 4419 APRIL MEADOW WAY SUGAR LAND, TX 77479		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) FLM ENGINEERS, LLC PC
Date 4-12-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAROLYN BROWN	Amount of contribution (\$) 800⁰⁰
Contributor address; City; State; Zip Code 7714 CHASEWOOD 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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2 FILER NAME JAMES 'GRADY' PROSTAGE		3 Filer ID (Ethics Commission Filers)
4 Date 4-25-23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEVIN J. MATOCHA	7 Amount of contribution (\$) \$,000⁰⁰
6 Contributor address; City; State; Zip Code 1600 HWY. 6 SOUTH, STE. 245 SUGAR LAND, TX 77478		
8 Principal occupation / Job title (See Instructions) Developer		9 Employer (See Instructions) STONE HENGE
Date 4-25-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLIANCE PAC	Amount of contribution (\$) \$,000⁰⁰
Contributor address; City; State; Zip Code 6200 SAVOY DR. STE. 100 HOUSTON, TX 77036		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4-25-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORHAN BALLAGERE	Amount of contribution (\$) 1,000⁰⁰
Contributor address; City; State; Zip Code 5600 Bintliff Dr Houston, TX 77036		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Geodes
Date 4-25-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GERALD TYSON	Amount of contribution (\$) 100⁰⁰
Contributor address; City; State; Zip Code 1361 MISTLETOE DR. FORT WORTH, TX 76110		
Principal occupation / Job title (See Instructions) Pollster		Employer (See Instructions) THE TYSON ORGANIZATION

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2 FILER NAME JAMES 'GRADY' PRESTAGE		3 Filer ID (Ethics Commission Filers)
4 Date 4-25-23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KCI TEXAS PAC	7 Amount of contribution (\$) \$,000⁰⁰
6 Contributor address; City; State; Zip Code 11550 W. Interstate 10, STE. 315 SAN ANTONIO, TX 78230		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 4-25-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDREW SHATTE	Amount of contribution (\$) \$,000⁰⁰
Contributor address; City; State; Zip Code 5330 MONTROSE BLVD. HOUSTON, TX 77005		
Principal occupation / Job title (See Instructions) Developer		Employer (See Instructions) Americus Holdings
Date 4-25-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARISH SASID	Amount of contribution (\$) \$,000⁰⁰
Contributor address; City; State; Zip Code 62 BRADFORD CIRCLE SUGAR LAND, TX 77479		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) HJ Consulting
Date 4-25-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SATIYA PILLA	Amount of contribution (\$) \$,000⁰⁰
Contributor address; City; State; Zip Code 4103 OAK BLOSSOM CT. HOUSTON, TX 77059		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) IGET

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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 4-25-23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALVINO SAN MIBUEL	7 Amount of contribution (\$) 500⁰⁰
6 Contributor address; City; State; Zip Code 8101 KIRCHNER ROAD MANUEL, TX 77578		
8 Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions) JOHNSON DEVELOPMENT CORP.
Date 4-25-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARCELO MOACYR	Amount of contribution (\$) 500⁰⁰
Contributor address; City; State; Zip Code 5719 MARTINIQUE PASS SUGAR LAND, TX 77479		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) BGE
Date 4-25-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINDSAY KOVAR	Amount of contribution (\$) 500⁰⁰
Contributor address; City; State; Zip Code 15130 RINGFIELD BR. HOUSTON, TX 77084		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4-25-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATTHEW L. FROELICH	Amount of contribution (\$) 500⁰⁰
Contributor address; City; State; Zip Code 22943 PROVINCIAL BLVD. KATY, TX 77450		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) BGE

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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 4-25-23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHARLES G. COULE	7 Amount of contribution (\$) 150⁰⁰
6 Contributor address; City; State; Zip Code 4517 KANSAS ST. FRESNO, TX 77545		
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) S.C. CANTERA HOMES, INC.
Date 4-25-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAYMOND SEWELL	Amount of contribution (\$) 200⁰⁰
Contributor address; City; State; Zip Code 2228 WATERFORD VILLAGE BLVD. MISSOURI CITY, TX 77459		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) RETIRED
Date 4-25-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEAN CARPENTER	Amount of contribution (\$) 250⁰⁰
Contributor address; City; State; Zip Code 4806 LANTANA CT. SUGAR LAND, TX 77479		
Principal occupation / Job title (See Instructions) owner		Employer (See Instructions) HLU, INC.
Date 4-25-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAMAL M. ARISS	Amount of contribution (\$) 250⁰⁰
Contributor address; City; State; Zip Code 6902 CHANTILLY CT. DALLAS, TX 75214		
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) ANIR

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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 4-25-23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINE BARGER COSSAN BLAIR, SAMMON, LLP 6 Contributor address; City; State; Zip Code P.O. BOX 17428 AUSTIN, TEXAS 78760	7 Amount of contribution (\$) 1,000⁰⁰
8 Principal occupation / Job title (See Instructions) ATTORNEYS AT LAW		9 Employer (See Instructions)
Date 4-25-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHOUTING HU Contributor address; City; State; Zip Code 105 PAMELLIA DR. BELLAIRE, TX 77401	Amount of contribution (\$) 1,500⁰⁰
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) AVILES ENGINEERING CORP.
Date 4-25-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRIAN G. MURPHY Contributor address; City; State; Zip Code 5333 NAKOMA DRIVE DALLAS, TX 75209	Amount of contribution (\$) 2,000⁰⁰
Principal occupation / Job title (See Instructions) Developer		Employer (See Instructions) Street Level
Date 4-25-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRAD CRAIN Contributor address; City; State; Zip Code 3812 BUCKHOLT STREET - 3801 KNAPP RD PEARLAND, TX 77581 PEARLAND, TX 77581	Amount of contribution (\$) 2,500⁰⁰
Principal occupation / Job title (See Instructions) Contractor		Employer (See Instructions) CRAIN GROUP, LLC

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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 4-25-23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARY GEHBAUER	7 Amount of contribution (\$) 500⁰⁰
6 Contributor address; City; State; Zip Code 454 W. 18th ST. HOUSTON, TX 77008		
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) BGE
Date 4-25-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERRY SCHROEDER	Amount of contribution (\$) 500⁰⁰
Contributor address; City; State; Zip Code 23431 CRIMSON STAR TERRACE KATY, TX 77494		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) BGE
Date 4-25-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEVI BENTON & ASSOCIATES, PLLC	Amount of contribution (\$) 500⁰⁰
Contributor address; City; State; Zip Code 2207 PINE LOCH DR. HOUSTON, TX 77062		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Law office of Levi Benton
Date 4-25-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAYNES AND BOONE PAC	Amount of contribution (\$) 1,000⁰⁰
Contributor address; City; State; Zip Code 2323 VICTORY AVE, SUITE 700 DALLAS, TX 75219		
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: 30
2 FILER NAME SAMMERS' GRADY' PRESTAGE		3 Filer ID (Ethics Commission Filers)
4 Date 4-25-23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOWARD KATZ	7 Amount of contribution (\$) 100⁰⁰
6 Contributor address; City; State; Zip Code 1118 DEERFIELD RD. RICHMOND, TX 77406		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions) RETIRED
Date 4-25-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AHMED K. VALDEZ	Amount of contribution (\$) 1,000⁰⁰
Contributor address; City; State; Zip Code 15310 SKYHILL DR CYPRESS, TX 77433		
Principal occupation / Job title (See Instructions) ENGINEERS		Employer (See Instructions) AKV CONSULTING ENGINEERS
Date 4-25-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THE MULLER LAW GROUP, PLLC	Amount of contribution (\$) 1,000⁰⁰
Contributor address; City; State; Zip Code 202 CENTURY SQUARE BLDG. SUGAR LAND, TX 77478		
Principal occupation / Job title (See Instructions) ATTORNEYS AT LAW		Employer (See Instructions)
Date 4-25-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVID EASTWOOD	Amount of contribution (\$) 1,500⁰⁰
Contributor address; City; State; Zip Code 17407 HIGHWAY 59N HUMBLE, TX 77396		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions)

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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 4-25-23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RANDY RANDERMANN	7 Amount of contribution (\$) 2,500⁰⁰
6 Contributor address; City; State; Zip Code 4860 JAMES LN. FOLSHEAR, TX 77441		
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) BGE, INC
Date 4-25-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEVE COCHRAN	Amount of contribution (\$) 100⁰⁰
Contributor address; City; State; Zip Code 214 ARBORWAY HOUSTON, TX 77057		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 4-25-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEVIN HATTERY	Amount of contribution (\$) 500⁰⁰
Contributor address; City; State; Zip Code 3819 VILLANOVA ST. HOUSTON, TX 77005		
Principal occupation / Job title (See Instructions) LEO BOYS & GIRLS CLUBS		Employer (See Instructions)
Date 4-25-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATTHEW GORDON	Amount of contribution (\$) 1,500⁰⁰
Contributor address; City; State; Zip Code 4900 WOODWAY DR., STE. 1125 HOUSTON, TX 77056		
Principal occupation / Job title (See Instructions) Developer		Employer (See Instructions) GORDON PROPERTIES

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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: 30
2 FILER NAME JAMES 'GRADY' PRESTAGE		3 Filer ID (Ethics Commission Filers)
4 Date 4-28-23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHN GUESS	7 Amount of contribution (\$) 1,500⁰⁰
6 Contributor address; City; State; Zip Code 10627 ALBURY DR. HOUSTON, TX 77096		
8 Principal occupation / Job title (See Instructions) APPRAISERS / ACQUISITION		9 Employer (See Instructions) THE GUESS GROUP
Date 4-28-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEVEN ALVIS	Amount of contribution (\$) 1,500⁰⁰
Contributor address; City; State; Zip Code 8827 W. SAM HOUSTON PKWY N., STE. 200 HOUSTON, TX 77040		
Principal occupation / Job title (See Instructions) Developer		Employer (See Instructions) New Greg &
Date 4-28-23	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 1445 N. LOOP WEST HOUSTON, TX 77008		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) BOUMANN CONSULTING GROUP LTD.
Date 4-28-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAUL P. KWAN	Amount of contribution (\$) 2,500⁰⁰
Contributor address; City; State; Zip Code 13423 AMBER QUEEN LANE HOUSTON, TX 77041		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) LandTech

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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: 30
2 FILER NAME JAMES 'GRADY' PRESTAGE		3 Filer ID (Ethics Commission Filers)
4 Date 4-25-23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BONNIE MOSS	7 Amount of contribution (\$) 5,000⁰⁰
6 Contributor address; City; State; Zip Code 12418 WESTCLAY DR. HOUSTON, TX 77077 1505 HWY 6 S. #180		
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) MBCD ENGINEERING, LLC
Date 4-28-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) C.C. LEE	Amount of contribution (\$) 2,500⁰⁰
Contributor address; City; State; Zip Code 6001 SANDY DR., STE. #100 HOUSTON, TX 77036		
Principal occupation / Job title (See Instructions) ARCHITECT		Employer (See Instructions)
Date 4-28-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVID BALMOS	Amount of contribution (\$) 5,000⁰⁰
Contributor address; City; State; Zip Code 13623 WAVERLY CREST CT. CYPRESS, TX 77429		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) WSB
Date 4-28-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BATES CONSULTING SERVICES, INC.	Amount of contribution (\$) 500⁰⁰
Contributor address; City; State; Zip Code 2450 LOUISIANA ST., STE. 353 HOUSTON, TX 77006		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Bates Consulting

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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: 30
2 FILER NAME JAMES 'GRADY' PROSTAGE		3 Filer ID (Ethics Commission Filers)
4 Date 4-28-23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUITT - ZOLLARS, INC. TEXAS PAC	7 Amount of contribution (\$) 2,500⁰⁰
6 Contributor address; City; State; Zip Code 5430 LBJ FREEWAY, STE. 1500 DALLAS, TX 75240		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 4-28-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARK HEIDAKER	Amount of contribution (\$) 1,500⁰⁰
Contributor address; City; State; Zip Code 7703 BREEZWAY BEND LN KATY, TX 77494		
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) PAS, PROPERTY ACQUISITION SERVICES, LLC
Date 4-28-23	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00457853) (TERRACON PAC) TSUC, INC PAC	Amount of contribution (\$) 1,500⁰⁰
Contributor address; City; State; Zip Code 10841 S. RIDGEVIEW ROAD OLATHE, KS 66061		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4-28-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEC PAC	Amount of contribution (\$) 2,000⁰⁰
Contributor address; City; State; Zip Code 1 GREENWAY PLAZA, STE. 225 HOUSTON, TX 77046		
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: 30
2 FILER NAME JAMES 'GRADY' PROSTAGE		3 Filer ID (Ethics Commission Filers)
4 Date 5-5-23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COBB FENLEY PAC	7 Amount of contribution (\$) 2,500⁰⁰
6 Contributor address; City; State; Zip Code 13430 NORTHWEST FREEWAY, STE. 1100 HOUSTON, TX 77040		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 5-5-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHN CALHOON	Amount of contribution (\$) 2,500⁰⁰
Contributor address; City; State; Zip Code 120 EAST AMITE ST. JACKSON, MISSISSIPPI 39201		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) JMS
Date 5-5-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LARRY BRIGGS	Amount of contribution (\$) 500⁰⁰
Contributor address; City; State; Zip Code 84 MAGNOLIA CIRCLE HOUSTON, TX 77024		
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions)
Date 5-5-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MICHAEL 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) ACE6SHEALTH

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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:
30

2 FILER NAME

JAMES 'GRADY' PRESTAGE

3 Filer ID (Ethics Commission Filers)

4 Date

5-5-23

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

WAYNE LUCKETT

7 Amount of contribution (\$)

500⁰⁰

6 Contributor address; City; State; Zip Code

4202 CLEARWATER COURT
MISSOURI CITY, TX 77459

8 Principal occupation / Job title (See Instructions)

President

9 Employer (See Instructions)

Brynmor Wines

Date

5-5-23

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

H. PRASAD KOLHURU

Amount of contribution (\$)

2,500⁰⁰

Contributor address; City; State; Zip Code

94 HEATHROW LN.
SUGAR LAND, TX 77479

Principal occupation / Job title (See Instructions)

ENGINEER

Employer (See Instructions)

AMANI ENGINEERING, INC.

Date

5-5-23

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

H.R. GREEN TEXAS PAC

Amount of contribution (\$)

2,500⁰⁰

Contributor address; City; State; Zip Code

11011 RICHMOND AVE. STE. 200
HOUSTON, TX 77042

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ENGINEERS

Date

5-5-23

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

BEN S. McMILLAN

Amount of contribution (\$)

5,000⁰⁰

Contributor address; City; State; Zip Code

440 BENMAR DR. #3335
HOUSTON, TX 77060

Principal occupation / Job title (See Instructions)

Architect

Employer (See Instructions)

IDGT ARCHITECTS

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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: 30
2 FILER NAME JAMES 'GRADY' PRESTAGE		3 Filer ID (Ethics Commission Filers)
4 Date 5-5-23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) M. PETER MORRIS	7 Amount of contribution (\$) 500⁰⁰
6 Contributor address; City; State; Zip Code 5330 MANDELL ST. HOUSTON, TX 77005		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 5-5-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOEL SCOTT (XXXXXXXX)	Amount of contribution (\$) 1,000⁰⁰
Contributor address; City; State; Zip Code 435 THAMER LN HOUSTON, TX 77024		
Principal occupation / Job title (See Instructions) Developer		Employer (See Instructions) Corvus Development
Date 5-5-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRY JOHNSON	Amount of contribution (\$) 250⁰⁰
Contributor address; City; State; Zip Code 10700 RICHMOND AVE., STE. 265 HOUSTON, TX 77042		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Law Office
Date 5-5-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAM ROSS	Amount of contribution (\$) 200⁰⁰
Contributor address; City; State; Zip Code 2527 RITTENMORE DR. MISSOURI CITY, TX 77489		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) WILLIAM ROSS CPA

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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 5-5-23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JIS ENGINEERING GROUP PAC	7 Amount of contribution (\$) 2,500⁰⁰
6 Contributor address; City; State; Zip Code 13430 NORTHWEST FRANK ST. 700 HOUSTON, TX 77040		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 5-5-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEONARD SPARKS III	Amount of contribution (\$) 50⁰⁰
Contributor address; City; State; Zip Code 7 LITTLE RISE DR. MISSOURI CITY, TX 77459		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 5-5-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GABRIEL JOHNSON	Amount of contribution (\$) 5,000⁰⁰
Contributor address; City; State; Zip Code 9407 RESTON GROVE LANE HOUSTON, TX 77095		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) AIG TECHNICAL SERVICES, L.L.C
Date 5-5-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITTIE P. GREGORY	Amount of contribution (\$) 500⁰⁰
Contributor address; City; State; Zip Code P.O. BOX 1145 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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2 FILER NAME JAMES 'GRADU' PRESTAGE		3 Filer ID (Ethics Commission Filers)
4 Date 5-5-23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RANNEY W. McDONOUGH	7 Amount of contribution (\$) 2,500⁰⁰
6 Contributor address; City; State; Zip Code 3 PIN OAK ESTATES DR. BELLAIRE, TX 77401		
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) McDONOUGH ENGINEERING CORP.
Date 5-5-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COSTAS K. GEORGHIU	Amount of contribution (\$) 2,500⁰⁰
Contributor address; City; State; Zip Code 12335 MEADOW LAKE DR HOUSTON, TX 77077		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) PG&A
Date 5-5-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) C. LINTON F. WONG	Amount of contribution (\$) 2,500⁰⁰
Contributor address; City; State; Zip Code 1616 S. VOSS RD., STE. 618 HOUSTON, TX 77057		
Principal occupation / Job title (See Instructions) Developer		Employer (See Instructions) SKYMARK DEVELOPMENT CO. INC.
Date 5-5-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MICHAEL BALLARE	Amount of contribution (\$) 300⁰⁰
Contributor address; City; State; Zip Code 15102 CHASERIDGE DR. MISSOURI CITY, TX 77489		
Principal occupation / Job title (See Instructions)		Employer (See Instructions) RETIRED

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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:
30

2 FILER NAME 3 Filer ID (Ethics Commission Filers)
JAMES 'GRAY' PRESTAGE

4 Date <u>5-10-23</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>CAROLYN BROWN</u>	7 Amount of contribution (\$) <u>200⁰⁰</u>
6 Contributor address; City; State; Zip Code <u>1714 CHASEWOOD DR MISSOURI CITY, TX 77489</u>		

8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)
Engineer RETIRED

Date <u>5-16-23</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>GITI ZARINKELK</u>	Amount of contribution (\$) <u>1,500⁰⁰</u>
Contributor address; City; State; Zip Code <u>1025 S. SHEPHERD DR. UNIT 310 HOUSTON, TX 77019</u>		

Principal occupation / Job title (See Instructions) Employer (See Instructions)
Engineer ZARINKELK ENGINEERING

Date <u>5-16-23</u>	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00333534</u>) <u>CENTER POINT ENERGY PAC</u>	Amount of contribution (\$) <u>1,500⁰⁰</u>
Contributor address; City; State; Zip Code <u>P.O. BOX 4567 HOUSTON, TX 77210</u>		

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

Date <u>5-16-23</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>JACK MILLER</u>	Amount of contribution (\$) <u>1,500⁰⁰</u>
Contributor address; City; State; Zip Code <u>1146 GARDEN CREST HOUSTON, TX 77077</u>		

Principal occupation / Job title (See Instructions) Employer (See Instructions)
Engineer RG Miller

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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 5-16-23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAKH RUDDIN SABIR	7 Amount of contribution (\$) 2,000⁰⁰
6 Contributor address; City; State; Zip Code 13105 NORTHWEST FWY, STE. 1110 HOUSTON, TX 77040		
8 Principal occupation / Job title (See Instructions) Architect		9 Employer (See Instructions) FS Group Architects
Date 5-16-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LARRY F. JANAK	Amount of contribution (\$) 2,000⁰⁰
Contributor address; City; State; Zip Code 19215 COHEN GREEN LANE HOUSTON, TX 77094		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) IDCUS
Date 5-16-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ABHR, LLP	Amount of contribution (\$) 2,500⁰⁰
Contributor address; City; State; Zip Code 3200 SOUTHWEST FREEWAY, STE. 2600 HOUSTON, TX 77027		
Principal occupation / Job title (See Instructions) ATTORNEYS AT LAW		Employer (See Instructions)
Date 5-16-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) QUIDIO N. ALANIS	Amount of contribution (\$) 2,500⁰⁰
Contributor address; City; State; Zip Code 8519 WOODS HOLLOW TRL. FULSHEAR, TX 77406		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) ENTECH

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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 5-16-23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BASSEM CHAFIS TAJE	7 Amount of contribution (\$) \$,000⁰⁰
6 Contributor address; City; State; Zip Code 1125 RIVER GLYNN DR HOUSTON, TX 77063		
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) RPS
Date 5-16-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KCI TEXAS PAC	Amount of contribution (\$) \$,000⁰⁰
Contributor address; City; State; Zip Code 11550 W. INTERSTATE 10, STE. 395 SAN ANTONIO, TX 78230		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 5-16-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VHRINDER BOBBY P. SINGH	Amount of contribution (\$) \$,000⁰⁰
Contributor address; City; State; Zip Code 12511 STILL HARBOUR DR HOUSTON, TX 77041		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) ISam & Consultants
Date 5-16-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALFE ASSOCIATES STATE PAC	Amount of contribution (\$) \$,000⁰⁰
Contributor address; City; State; Zip Code 1201 N. BOWSER ROAD RICHARDSON, TX 75081		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME JAMES' GRAY' PRESTAGE		3 Filer ID (Ethics Commission Filers)
4 Date 5-16-23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANIEL SIGMORELLI	7 Amount of contribution (\$) 2,500⁰⁰
6 Contributor address; City; State; Zip Code 1401 WOODLANDS PKWY. THE WOODLANDS, TX 77380		
8 Principal occupation / Job title (See Instructions) Developer		9 Employer (See Instructions) Signorelli Companies
Date 5-16-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CURTIS LAMPLEY	Amount of contribution (\$) 2,500⁰⁰
Contributor address; City; State; Zip Code 3233 PROSPECT ST. HOUSTON, TX 77004		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) HTS
Date 5-16-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LLARANCA TURNER	Amount of contribution (\$) 2,500⁰⁰
Contributor address; City; State; Zip Code P.O. BOX 481 STAFFORD, TX 77497		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) KALUZA
Date 5-16-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EPIFANIO SALAZAR, SR.	Amount of contribution (\$) 5,000⁰⁰
Contributor address; City; State; Zip Code 6623 ALICANT DR. SUGAR LAND, TX 77479		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) SES Horizon

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME JAMES 'GRADY' PROSTAGE		3 Filer ID (Ethics Commission Filers)
4 Date 5/16/23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHRISTOPHER WILSON	7 Amount of contribution (\$) 150.00
6 Contributor address; City; State; Zip Code 3711 ELMWOOD DALE DR. FRESNO, TX 77545		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 5-16-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LARRY BARFIELD	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 10827 PAINTED CRESCENT CT. CYPRESS, TX 77433		
Principal occupation / Job title (See Instructions) ENGINEERS		Employer (See Instructions) BINKLEY & BARFIELD
Date 5-16-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAMES BRETT BINKLEY	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 9209 STAGE COACH DR. HOUSTON, TX 77041		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) BINKLEY BARFIELD
Date 5-16-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAROLA REDDISH	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 1302 CEDAR TERRACE COURT SUGAR LAND, TX 77479		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) BBF

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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 5-16-23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REDACTED YOUSSEF LAHAM	7 Amount of contribution (\$) 500⁰⁰
6 Contributor address; City; State; Zip Code 23230 SUMMERS CREEK CT. KATY, TX 77454		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 5-16-23	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
Date 5-16-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLUMBERS LOCAL UNION #68 PAC	Amount of contribution (\$) 1,000⁰⁰
Contributor address; City; State; Zip Code P.O. BOX 8746 HOUSTON, TX 77249		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 5-16-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIM RUSS	Amount of contribution (\$) 1,500⁰⁰
Contributor address; City; State; Zip Code 10011 MEADOWSLEN LN. HOUSTON, TX 77042		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) EHRA

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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:

30

2 FILER NAME

JAMES' GRADY' PRESTAGE

3 Filer ID (Ethics Commission Filers)

4 Date

5-16-23

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

WALT SASS

7 Amount of contribution (\$)

2,500⁰⁰

6 Contributor address; City; State; Zip Code

2707 AUTUMNLAKE DR
KATY, TX 77450

8 Principal occupation / Job title (See Instructions)

Surveyor

9 Employer (See Instructions)

WEISSER

Date

5-16-23

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

ASIM TUFAIC

Amount of contribution (\$)

2,500⁰⁰

Contributor address; City; State; Zip Code

5447 LARKIN ST., HOUSTON, TX 77007

Principal occupation / Job title (See Instructions)

Engineer

Employer (See Instructions)

Blackline

Date

5-16-23

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

GLENNIE GORDON

Amount of contribution (\$)

300⁰⁰

Contributor address; City; State; Zip Code

P.O. BOX 18155
SUGARLAND, TX 77496

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

RETIRED

Date

5-16-23

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

MARTY CRISTOFORA

Amount of contribution (\$)

1,500⁰⁰

Contributor address; City; State; Zip Code

17923 WINDY CANYON CANYE
HOUSTON, TX 77084

Principal occupation / Job title (See Instructions)

VP / PROGRAM DIRECTOR

Employer (See Instructions)

STUART CONSULTING GROUP

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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: 30
2 FILER NAME JAMES 'GRADY' PRESTAGE		3 Filer ID (Ethics Commission Filers)
4 Date 5-16-23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUB SHIHADAH	7 Amount of contribution (\$) 5,000⁰⁰
6 Contributor address; City; State; Zip Code 11907 ARCADIA BEND LANE HOUSTON, TX 77041		
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Earth Engineering
Date 5-23-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRITI SINGH	Amount of contribution (\$) 1,500⁰⁰
Contributor address; City; State; Zip Code 3143 YELLOWSTONE BLVD HOUSTON, TX 77054		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) Associated Testing Lab
Date 5-26-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRACEWELL PAC	Amount of contribution (\$) 1,500⁰⁰
Contributor address; City; State; Zip Code 711 LOUISIANA ST. STE. 200 2300 HOUSTON, TX 77002		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 5-26-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JEROME POWELL	Amount of contribution (\$) 150⁰⁰
Contributor address; City; State; Zip Code 16503 MAHOGANY DR. MISSOURI CITY, TX 77489		
Principal occupation / Job title (See Instructions) Refined		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

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: 30
2 FILER NAME JAMES 'GRADY' PROSTAGE		3 Filer ID (Ethics Commission Filers)
4 Date 5-26-23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OMAR ALHAMMURI	7 Amount of contribution (\$) 2,000⁰⁰
6 Contributor address; City; State; Zip Code 9757 KATY FWY. APT. 1912 HOUSTON TX 77024		
8 Principal occupation / Job title (See Instructions) Business Development		9 Employer (See Instructions) THOMPSON ENGINEERING
Date 5-26-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOREN VALVERDE	Amount of contribution (\$) 250⁰⁰
Contributor address; City; State; Zip Code 11703 PENDER LAKE STAFFORD, TX 77477		
Principal occupation / Job title (See Instructions) PRESIDENT		Employer (See Instructions) VALVERDE FAMILY ENTERPRISE, LLC
Date 5-26-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAO BASAVARAO	Amount of contribution (\$) 1,000⁰⁰
Contributor address; City; State; Zip Code 20918 VELVET WING DR. CYPRESS, TX 77433		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) TRANSCEND ENGINEERING
Date 5-26-23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) William BOBRICIC	Amount of contribution (\$) 100⁰⁰
Contributor address; City; State; Zip Code P.O. BOX 637. SUBARLAND, TX 77478		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) AFT OF TEXAS

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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:
30

2 FILER NAME

JAMES 'GRADY' PRESTAGE

3 Filer ID (Ethics Commission Filers)

4 Date

6-5-23

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

HERMANN BURROUGHS

7 Amount of contribution (\$)

500⁰⁰

6 Contributor address; City; State; Zip Code

9717 SECOND WIND COURT
MISSOURI CITY, TX 77459

8 Principal occupation / Job title (See Instructions)

President

9 Employer (See Instructions)

AUSTATE INSURANCE AGENCY

Date

6-5-23

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

TIA BAKER

Amount of contribution (\$)

2,500⁰⁰

Contributor address; City; State; Zip Code

11510 SCOTTSDALE DR.
MEADOWS PLACE, TX 77477

Principal occupation / Job title (See Instructions)

ENGINEER

Employer (See Instructions)

LSA

Date

6-5-23

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

Jeffery CANNON

Amount of contribution (\$)

2,500⁰⁰

Contributor address; City; State; Zip Code

4315 WHICKHAM DR.
FULSHEAR, TX 77441

Principal occupation / Job title (See Instructions)

ENGINEER

Employer (See Instructions)

LSA

Date

5-16-23

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

QUIDDITY PAC

Amount of contribution (\$)

1500⁰⁰

Contributor address; City; State; Zip Code

6330 WEST LOOPS. STE. 150
BELLAIRE, TX 77401

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 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: 52	2 FILER NAME James "Grady" Prestage	3 Filer ID (Ethics Commission Filers)
4 Date 1/3/23	5 Payee name Mana Basio Morales	
6 Amount (\$) 500⁰⁰	7 Payee address; City; State; Zip Code 5015 Ridge Manor Dr Houston, TX 77053	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor	(b) Description Holiday 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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 1/3/23	Payee name Apple store		
Amount (\$) 592¹²	Payee address; City; State; Zip Code 16535 Southwest Freeway Sugar Land, TX 77479		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Computer 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 1/3/23	Payee name American Storage		
Amount (\$) 794⁰⁰	Payee address; City; State; Zip Code 2427 Texas Parkway Missouri City, TX 77489		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Rental 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 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: 52	2 FILER NAME James "Grady" Prestage	3 Filer ID (Ethics Commission Filers)
4 Date 1/4/23	5 Payee name McAfee	
6 Amount (\$) 162 ³⁶	7 Payee address; City; State; Zip Code 6220 America Center Drive San Jose, CA	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Software 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 1/5/23	Payee name Microsoft Corporation		
Amount (\$) 106 ²⁴	Payee address; City; State; Zip Code 1 Microsoft Way Redmond, WA		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Software 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 1/5/23	Payee name Brenda Patton		
Amount (\$) 427 ⁰⁰	Payee address; City; State; Zip Code 1618 Dusty Ridge Missouri City, TX 77459		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting 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 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: <u>52</u>		2 FILER NAME <u>James "Grady" Prestage</u>		3 Filer ID (Ethics Commission Filers)	
4 Date <u>1/5/23</u>		5 Payee name <u>Brenda Patton</u>			
6 Amount (\$) <u>100⁰⁰</u>		7 Payee address; City; State; Zip Code <u>1618 Dusty Ridge Missouri City, TX 77459</u>			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <u>Contract Labor</u>		(b) Description		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
8 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date <u>1/5/23</u>		Payee name <u>Felecia Evans-Smith</u>			
Amount (\$) <u>1,000⁰⁰</u>		Payee address; City; State; Zip Code <u>1123 Wesley Drive Stafford, TX 77477</u>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Contract Labor</u>		Description		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date <u>1/6/23</u>		Payee name <u>Bonita Billings</u>			
Amount (\$) <u>2,504⁰⁰</u>		Payee address; City; State; Zip Code <u>6202 Copin Lake Lane Missouri City, TX 77459</u>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Event Expense</u>		Description <u>Liquor Catering</u>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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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: 52	2 FILER NAME James "Grady" Prestage	3 Filer ID (Ethics Commission Filers)
4 Date 1/6/23	5 Payee name 4H Program Ft. Bend County	
6 Amount (\$) 100 ⁰⁰	7 Payee address; City; State; Zip Code 1402 Band Rd #100 Rosenberg, TX 77471	
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

Date 1/9/23	Payee name Cheryl J. Prestage	
Amount (\$) 1,250 ⁰⁰	Payee address; City; State; Zip Code 36 Big Trail Missouri City, TX 77459	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Reimbursement for campaign related expense	Description Paid for services with personal funds
	<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 1/9/23	Payee name Brenda Patton	
Amount (\$) 1,000 ⁰⁰	Payee address; City; State; Zip Code 1618 Dusty Ridge Missouri City, TX 77459	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: 52		2 FILER NAME James "Grady" Prestage		3 Filer ID (Ethics Commission Filers)	
4 Date 1/10/23		5 Payee name T-Mobile			
6 Amount (\$) 583 ¹⁷		7 Payee address; City; State; Zip Code 5684 Highway 6 Missouri City, TX 77459			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Phone 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	
Date 1/10/23		Payee name B's Wine Bar			
Amount (\$) 3,176 ⁹⁴		Payee address; City; State; Zip Code 6202 Copin Lake Lane Missouri City, TX 77459			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description Liquor Catering		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 1/11/23		Payee name Bayou Boys Restaurant			
Amount (\$) 148 ¹¹		Payee address; City; State; Zip Code 13335 TX-36 Needville, TX 77461			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food & Beverage Expense		Description 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	

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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: 52	2 FILER NAME James "Grady" Prestage	3 Filer ID (Ethics Commission Filers)
4 Date 1/12/23	5 Payee name Greta Blankenship	
6 Amount (\$) 200 ⁰⁰	7 Payee address; City; State; Zip Code 16432 Chimney Rock # 424 Houston, TX 77053	
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	
8 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	Office sought Office held
Date 1/17/23	Payee name Southern University Scholarship Galg	
Amount (\$) 946 ⁶⁴	Payee address; City; State; Zip Code 3000 North Loop Freeway West Houston, TX 77092	
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	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	Office sought Office held
Date 1/17/23	Payee name Alpha Phi Alpha Fraternity	
Amount (\$) 400 ⁰⁰	Payee address; City; State; Zip Code 7031 W. Fugua Missouri City, TX 77489	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation / Event	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
10 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: <u>52</u>		2 FILER NAME <u>James "Grady" Prestage</u>		3 Filer ID (Ethics Commission Filers)	
4 Date <u>1/17/23</u>		5 Payee name <u>Chama Gaucha Brazil</u>			
6 Amount (\$) <u>425⁰⁰</u>		7 Payee address; City; State; Zip Code <u>5865 Westheimer Road Houston, TX 77057</u>			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <u>Food & Beverage Expense</u>		(b) Description <u>Staff Event</u>		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
8 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date <u>1/17/23</u>		Payee name <u>Texas Democratic Woman - Fort Bend</u>			
Amount (\$) <u>500⁰⁰</u>		Payee address; City; State; Zip Code <u>8014 Agora Circle Sugar Land, TX 77479</u>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Donation</u>		Description		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date <u>1/19/23</u>		Payee name <u>Southern University Alumni Scholarship Gala</u>			
Amount (\$) <u>236⁶⁶</u>		Payee address; City; State; Zip Code <u>3000 North Loop Freeway West Houston, TX 77092</u>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Donation</u>		Description		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <u>52</u>		2 FILER NAME <u>James "Grody" Prestage</u>		3 Filer ID (Ethics Commission Filers)	
4 Date <u>1/20/23</u>		5 Payee name <u>Constant Contact</u>			
6 Amount (\$) <u>204⁷⁵</u>		7 Payee address; City; State; Zip Code <u>1601 Trapelo Road Waltham, MA 02451</u>			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <u>Fees</u>		(b) Description		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date <u>1/25/23</u>		Payee name <u>Missouri City Baptist Church</u>			
Amount (\$) <u>100⁰⁰</u>		Payee address; City; State; Zip Code <u>16818 Quail Park Missouri City, TX 77489</u>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Donation</u>		Description		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date <u>1/25/23</u>		Payee name <u>Brenda Patton</u>			
Amount (\$) <u>400⁰⁰</u>		Payee address; City; State; Zip Code <u>1618 Dusty Ridge Missouri City, TX 77489</u>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Consulting Expense</u>		Description		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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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>52</i>	2 FILER NAME <i>James "Grady" Prestage</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>1/26/23</i>	5 Payee name <i>Mama's Cafe</i>	
6 Amount (\$) <i>105⁹³</i>	7 Payee address; City; State; Zip Code <i>3434 FM 1092 Missouri City, TX 77459</i>	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Food & Beverage Expense</i>	(b) Description <i>Staff meeting</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>1/26/23</i>	Payee name <i>Thomasine Johnson</i>	
Amount (\$) <i>200⁰⁰</i>	Payee address; City; State; Zip Code <i>2700 Lake Olympia Parkway Missouri City, TX 77459</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Event Expense</i>	Description <i>City Manger Reception</i>
	<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 <i>1/26/23</i>	Payee name <i>Needville ISD Education Foundation</i>	
Amount (\$) <i>500⁰⁰</i>	Payee address; City; State; Zip Code <i>16227 TX-36 Needville, TX 77461</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	
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>52</i>	2 FILER NAME <i>James "Grady" Prestage</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>1/31/23</i>	5 Payee name <i>SU Lab Class Reunion</i>	
6 Amount (\$) <i>250⁰⁰</i>	7 Payee address; City; State; Zip Code <i>129 Swan Street Baton Rouge, LA 70813</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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date <i>2/1/23</i>	Payee name <i>Bridges to Empowerment</i>		
Amount (\$) <i>600⁰⁰</i>	Payee address; City; State; Zip Code <i>16310 Chimney Rock Rd Houston, TX 77053</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		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date <i>2/6/23</i>	Payee name <i>Aoede, LLC</i>		
Amount (\$) <i>533²²</i>	Payee address; City; State; Zip Code <i>2440 Texas Parkway Missan City, TX 77489</i>		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Rent for office</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: 52	2 FILER NAME James "Grady" Prestage	3 Filer ID (Ethics Commission Filers)
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4 Date 2/6/23	5 Payee name American Storage
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6 Amount (\$) 989⁰⁰-	7 Payee address; 2427 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) Storage 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 2/7/23	Payee name Discount Tire
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Amount (\$) 466⁰³-	Payee address; 9440 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) 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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Date 2/9/23	Payee name Alexandria Foundation, LLC
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Amount (\$) 1,040⁰⁰-	Payee address; 7031 W. Fugua 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 <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: 52 2 FILER NAME: James "Grady" Prestage 3 Filer ID (Ethics Commission Filers)

4 Date: 2/10/23 5 Payee name: T-Mobile

6 Amount (\$): 458⁰³ 7 Payee address; 5684 Highway 6 City; State; Zip Code
Missouri City, TX 77459

8 PURPOSE OF EXPENDITURE: (a) Category (See Categories listed at the top of this schedule): Phone & Internet Expense (b) Description
 (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Date: 2/10/23 Payee name: Annie Hannan Campaign

Amount (\$): 500⁰⁰ Payee address; 903 Goldfinch Avenue City; State; Zip Code
Sugar Land, TX 77478

PURPOSE OF EXPENDITURE: Category (See Categories listed at the top of this schedule): Donation Description
 Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Date: 2/10/23 Payee name: Katie Herrington

Amount (\$): 1,000⁰⁰ Payee address; 1610 Mustang Crossing City; State; Zip Code
Missouri City, TX 77459

PURPOSE OF EXPENDITURE: Category (See Categories listed at the top of this schedule): Contract Labor Description
 Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

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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>52</i>	2 FILER NAME <i>James "Grady" Prestage</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>2/13/23</i>	5 Payee name <i>Brentwood Baptist Church</i>	
6 Amount (\$) <i>250⁰⁰</i>	7 Payee address; City; State; Zip Code <i>13033 Landmark Houston, TX 77045</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Donation</i>	(b) Description <i>Pastors Anniversary</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>2/13/23</i>	Payee name <i>Brenda Patton</i>	
Amount (\$) <i>193¹⁴</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>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>2/14/23</i>	Payee name <i>Super Cleaners</i>	
Amount (\$) <i>1,621⁴⁷</i>	Payee address; City; State; Zip Code <i>3003 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

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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 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: <u>52</u>		2 FILER NAME <u>James "Grady" Prestage</u>		3 Filer ID (Ethics Commission Filers)	
4 Date <u>2/14/23</u>		5 Payee name <u>Fort Bend History Association</u>			
6 Amount (\$) <u>2,500⁰⁰</u>		7 Payee address; <u>410 Jackson Street</u> <u>Richmond, TX 77469</u>		City; State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <u>Donation</u>		(b) Description		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <u>2/15/23</u>		Payee name <u>Churrasco's Sugar Land</u>			
Amount (\$) <u>121⁷¹</u>		Payee address; <u>1520 Lake Pointe Parkway # 500</u> <u>Sugar Land, TX 77478</u>		City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Food & Beverage Expense</u>		Description <u>staff Luncheon</u>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <u>2/16/23</u>		Payee name <u>Black History Month Celebration Gala</u>			
Amount (\$) <u>552⁰⁰</u>		Payee address; <u>1959 Texas Parkway</u> <u>Missouri City, TX 77489</u>		City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Sponsorship</u>		Description		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | 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: 52	2 FILER NAME James "Grady" Prestage	3 Filer ID (Ethics Commission Filers)
4 Date 2/16/23	5 Payee name Houston Community College Foundation	
6 Amount (\$) 2,500 ⁰⁰	7 Payee address; City; State; Zip Code 3100 S. main Houston, TX 77002	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Donation	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 2/17/23	Payee name SU Lab Reunion	
Amount (\$) 1,000 ⁰⁰	Payee address; City; State; Zip Code 129 Swan Street Baton Rouge, LA 70813	
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 2/17/23	Payee name Dustin Prestage	
Amount (\$) 1,250 ⁰⁰	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 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 | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Printing Expense | Travel In District |
| Contributions/Donations Made By Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Polling 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: 52	2 FILER NAME James "Grady" Prestage	3 Filer ID (Ethics Commission Filers)
4 Date 2/21/23	5 Payee name Constant Contact	
6 Amount (\$) 204 ⁷⁵	7 Payee address; City; State; Zip Code 1601 Trapelo Rd Waltham, MA 02451	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Database
	(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 2/23/23	Payee name Take 5 Oil Change	
Amount (\$) 113 ⁷⁰	Payee address; City; State; Zip Code 1405 Fm 1092 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
Date 2/23/23	Payee name DAAP Philanthropic Foundation	
Amount (\$) 200 ⁰⁰	Payee address; City; State; Zip Code PO Box 711091 Houston, TX 77271	
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: 52		2 FILER NAME James "Grady" Prestage		3 Filer ID (Ethics Commission Filers)	
4 Date 2/27/23		5 Payee name Texas A&M Hotel			
6 Amount (\$) 292⁰⁹		7 Payee address; City; State; Zip Code 177 Joe Routt Blvd College Station, TX 77840			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Expenses		(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 2/27/23		Payee name Home Depot			
Amount (\$) 668⁹⁹		Payee address; City; State; Zip Code 14440 Hillcroft St. Houston, TX 77085			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Equipment		Description Refridgerator		
	<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 3/1/23		Payee name National Conference of Black Political Scientists			
Amount (\$) 200⁰⁰		Payee address; City; State; Zip Code 14000 Highway 82 West Itta Bena, MS 38941			
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	

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: 52	2 FILER NAME James "Grady" Prestage	3 Filer ID (Ethics Commission Filers)
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4 Date 3/1/23	5 Payee name Fort Bend County
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6 Amount (\$) 502 ⁷³	7 Payee address; 1317 Eugene Heimann Circle Richmond, TX 77469	City;	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Property Taxes of Office	(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 3/2/23	Payee name Shirley Rose-Gillum Campaign
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Amount (\$) 1,000 ⁰⁰	Payee address; 3011 Bonney Briar Drive Missouri City, TX 77459	City;	State;	Zip Code
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8 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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Date 3/2/23	Payee name Auede, LLC
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Amount (\$) 533 ²²	Payee address; 2440 Texas Parkway Missouri City, TX 77489	City;	State;	Zip Code
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8 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 <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 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: 52		2 FILER NAME James "Grady" Prestage		3 Filer ID (Ethics Commission Filers)	
4 Date 3/2/23		5 Payee name 40 Plus Models, Inc			
6 Amount (\$) 200 ⁰⁰		7 Payee address; City; State; Zip Code 2622 Harvest Moon Missouri City, TX 77489			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Donation		(b) Description		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 3/3/23		Payee name American Storage			
Amount (\$) 794 ⁰⁰		Payee address; City; State; Zip Code 2427 Texas Parkway Missouri City, TX 77489			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Storage Expense		Description		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

Date 3/3/23		Payee name Brenda Patton			
Amount (\$) 400 ⁰⁰		Payee address; City; State; Zip Code 1618 Dusty Ridge Missouri City, TX 77459			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting 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	

Date 3/3/23		Payee name Brenda Patton			
Amount (\$) 400 ⁰⁰		Payee address; City; State; Zip Code 1618 Dusty Ridge Missouri City, TX 77459			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting 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	

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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>52</i>	2 FILER NAME <i>James "Grady" Prestage</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>3/6/23</i>	5 Payee name <i>Pappadeaux Seafood Catering</i>	
6 Amount (\$) <i>978³⁹</i>	7 Payee address; City; State; Zip Code <i>12711 Highway 59 S Stafford, TX 77477</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Food & Beverage Expense</i>	(b) Description <i>Employee Reception Sponsor</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>3/6/23</i>	Payee name <i>Southern University Alumni Foundation</i>		
Amount (\$) <i>200⁰⁰</i>	Payee address; City; State; Zip Code <i>598 Harding Blvd Baton Rouge, LA 70807</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		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date <i>3/7/23</i>	Payee name <i>Winners of the World Awards</i>		
Amount (\$) <i>350⁰⁰</i>	Payee address; City; State; Zip Code <i>6140 Highway 6 #72 Missouri City, TX 77459</i>		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Awards</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: <u>52</u>		2 FILER NAME <u>James "Grady" Prestage</u>		3 Filer ID (Ethics Commission Filers)	
4 Date <u>3/8/23</u>		5 Payee name <u>Fort Bend County Parks</u>			
6 Amount (\$) <u>325⁰⁰</u>		7 Payee address; City; State; Zip Code <u>9555 Highway 6 Missouri City, TX 77459</u>			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <u>Fees</u>		(b) Description <u>Park Rental</u>		
	(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 <u>3/8/23</u>		Payee name <u>Fort Bend County Parks</u>			
Amount (\$) <u>300⁰⁰</u>		Payee address; City; State; Zip Code <u>9555 Highway 6 Missouri City, TX 77459</u>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Fees</u>		Description <u>Park Rental</u>		
	<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 <u>3/9/23</u>		Payee name <u>Sugar Land Jack & Jill</u>			
Amount (\$) <u>161⁹⁰</u>		Payee address; City; State; Zip Code <u>P.O. Box 17325 Sugar Land, TX 77496</u>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Donation</u>		Description		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete 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 | Printing 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: 52	2 FILER NAME James "Grady" Prestage	3 Filer ID (Ethics Commission Filers)
4 Date 3/9/23	5 Payee name USPS	
6 Amount (\$) 176 ⁰⁰	7 Payee address: City: State: Zip Code PO Box 835 Missouri City, TX 77459	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Postage 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 3/10/23	Payee name T-Mobile
Amount (\$) 484 ²¹	Payee address; City: State: Zip Code 5684 Highway 6 Missouri City, TX 77459
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Phone & Internet Expense
	<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 3/13/23	Payee name Martha Castek-Tatum Campaign
Amount (\$) 1,000 ⁰⁰	Payee address; City: State: Zip Code 5445 Alameda # 307 Houston, TX 77004
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation
	<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: 52	2 FILER NAME James "Grady" Prestage	3 Filer ID (Ethics Commission Filers)
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4 Date 3/13/23	5 Payee name Thurgood Marshall Band
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6 Amount (\$) 520⁰⁰	7 Payee address; City; State; Zip Code 1220 Buffalo Run Missouri City, TX 77489
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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 3/13/23	Payee name National Association of Black Military Women
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Amount (\$) 120⁰⁰	Payee address; City; State; Zip Code 1560 VFW Way Houston, TX 77055
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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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Date 3/13/23	Payee name Cornerstone Community Church
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Amount (\$) 100⁰⁰	Payee address; City; State; Zip Code 7950 W. Fugue Missouri City, TX 77489
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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: 52	2 FILER NAME James "Grady" Prestage	3 Filer ID (Ethics Commission Filers)
4 Date 3/14/23	5 Payee name Patricia's Petals	
6 Amount (\$) 112 ²⁹	7 Payee address; City: State: Zip Code 100 SE 3rd Avenue Fort Lauderdale, FL 33394	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Memorial 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 3/15/23	Payee name APR 1	
Amount (\$) 200 ⁰⁰	Payee address; City; State; Zip Code 4414 Akard Street Houston, TX 77047	
8 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 3/20/23	Payee name Constant Contact	
Amount (\$) 204 ⁷⁵	Payee address; City; State; Zip Code 1601 Trapelo Rd Waltham, MA 02451	
8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	
	Description Database	
	<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: 52	2 FILER NAME James "Grady" Prestage	3 Filer ID (Ethics Commission Filers)
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4 Date 3/21/23	5 Payee name Alpha Merit Foundation
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6 Amount (\$) 150 ⁰⁰	7 Payee address; P.O. Box 88318 Houston, TX 77288	City;	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 3/21/23	Payee name Carolyn Brown
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Amount (\$) 1,000 ⁰⁰	Payee address; 7714 Chasewood 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) Sponsorship 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 3/22/23	Payee name Fresh and Savory
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Amount (\$) 111 ⁸⁶	Payee address; 12999 Murphy Road, Unit B-4 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 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: 52	2 FILER NAME James "Grady" Prestage	3 Filer ID (Ethics Commission Filers)
4 Date 3/31/23	5 Payee name Brenda Patton	
6 Amount (\$) 400 ⁰⁰	7 Payee address: City: State: Zip Code 1618 Dusty Ridge Missouri City, TX 77459	
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 4/3/23	Payee name Shaz Graphics		
Amount (\$) 1,073 ⁸⁴	Payee address: City: State: Zip Code 13003 Murphy Road, Unit B6 Stafford, TX 77477		
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 <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			

Date 4/3/23	Payee name Jupiter Pizza		
Amount (\$) 148 ⁷⁷	Payee address: City: State: Zip Code 16135 City Walk Sugar Land, TX 77479		
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 <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 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>52</i>	2 FILER NAME <i>James "Grady" Prestage</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>4/3/23</i>	5 Payee name <i>USPS</i>	
6 Amount (\$) <i>132³⁰</i>	7 Payee address; City; State; Zip Code <i>1902 Texas Parkway Missouri City, TX 77489</i>	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Postage 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>4/4/23</i>	Payee name <i>Aoede, LLC</i>	
Amount (\$) <i>533²²</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>Office Rental</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 ONLY if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		

Date <i>4/4/23</i>	Payee name <i>American Storage</i>	
Amount (\$) <i>794⁰⁰</i>	Payee address; City; State; Zip Code <i>2427 Texas Parkway Missouri City, TX 77489</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Storage 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 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: 52	2 FILER NAME James "Grady" Prestage	3 Filer ID (Ethics Commission Filers)
4 Date 4/6/23	5 Payee name Shaz Graphics	
6 Amount (\$) 127 -	7 Payee address; City: State: Zip Code 13003 Murphy Road, Unit B6 Stafford, TX 77477	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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		
Date 4/6/23	Candidate / Officeholder name Johnny Tamales Restaurant	
Amount (\$) 145 ⁵⁰	Office sought Office held	
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 <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 4/6/23	Candidate / Officeholder name USPS	
Amount (\$) 126 ⁰⁰	Office sought Office held	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Postage Expense	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <u>52</u>	2 FILER NAME <u>James "Grady" Prestage</u>	3 Filer ID (Ethics Commission Filers)
4 Date <u>4/7/23</u>	5 Payee name <u>Missouri City Juneteenth Celebration Foundation</u>	
6 Amount (\$) <u>1,500⁰⁰</u>	7 Payee address; City; State; Zip Code <u>P.O. Box 1007 Missouri City, TX 77489</u>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <u>Donation</u>	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <u>4/10/23</u>	Payee name <u>Amazon Marketplace</u>	
Amount (\$) <u>275⁸⁸</u>	Payee address; City; State; Zip Code <u>410 Terry Avenue N. Seattle, WA 98109</u>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Office equipment</u>	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <u>4/10/23</u>	Payee name <u>American Caribbean Chamber of Commerce</u>	
Amount (\$) <u>500⁰⁰</u>	Payee address; City; State; Zip Code <u>6201 Bonhomme St., Ste 614 N Houston, TX 77036</u>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Donation/Sponsorship</u>	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	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: 52	2 FILER NAME James "Grady" Prestage	3 Filer ID (Ethics Commission Filers)
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4 Date 4/10/23	6 Payee name Texas Black Expo
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6 Amount (\$) 2,842 ⁷³	7 Payee address: 12401 S. Post Oak, suite 221 Houston, TX 77045	City:	State:	Zip Code:
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 4/10/23	Payee name T-Mobile
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Amount (\$) 486 ⁴²	Payee address; 5684 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) Phone and Internet 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 4/13/23	Payee name Michele Forman c/o Mimi's Restaurant
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Amount (\$) 6,300 ⁰⁰	Payee address; 1833 Richmond Parkway, Unit 2100 Richmond, TX 77469	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 | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel In District |
| Contributions/Donations Made By Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <i>52</i>	2 FILER NAME <i>James "Grady" Prestage</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>4/14/23</i>	5 Payee name <i>Boys and Girls Club of Greater Houston</i>	
6 Amount (\$) <i>2,279⁷⁹</i>	7 Payee address; City; State; Zip Code <i>815 Crosby Street Houston, TX 77019</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>4/17/23</i>	Payee name <i>American Leadership Forum</i>		
Amount (\$) <i>1,026⁵⁸</i>	Payee address; City; State; Zip Code <i>3101 Richmond Avenue Houston, TX 77098</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		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date <i>4/17/23</i>	Payee name <i>Attack Poverty</i>		
Amount (\$) <i>2,510⁰⁰</i>	Payee address; City; State; Zip Code <i>3727 Greenbriar Dr., Unit 100 Stafford, TX 77477</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		
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: 52	2 FILER NAME James "Grady" Prestage	3 Filer ID (Ethics Commission Filers)
4 Date 4/17/23	5 Payee name Brenda Patton	
6 Amount (\$) 200 ⁰⁰	7 Payee address: 1618 Dusty Ridge Missouri City, TX 77459 City: State: Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Reimbursement	(b) Description Event sponsorship
	(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 4/17/23	Payee name Who Dat Nation - Missouri City	
Amount (\$) 100 ⁰⁰	Payee address: 9555 Highway 6 Missouri City, TX 77489 City: State: Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event sponsorship	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 4/18/23	Payee name After Burners Track Club	
Amount (\$) 250 ⁰⁰	Payee address: 10043 Plantation Mill Missouri City, TX 77459 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 <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: 52	2 FILER NAME James "Grady" Prestage	3 Filer ID (Ethics Commission Filers)
4 Date 4/20/23	5 Payee name Constant Contact	
6 Amount (\$) 204 ⁷⁵	7 Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Database
	(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 4/24/23	Payee name Houston Area Real Estate Association	
Amount (\$) 300 ⁰⁰	Payee address; City; State; Zip Code 12401 S. Post Oak Road Houston, TX 77045	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Sponsorship	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 4/24/23	Payee name Take 5 # 238	
Amount (\$) 119 ⁴¹	Payee address; City; State; Zip Code 1405 Fm 1092 Road Missouri City, TX 77459	
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

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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: 52	2 FILER NAME James "Grady" Prestage	3 Filer ID (Ethics Commission Filers)
4 Date 4/26/23	5 Payee name Dustin Prestage	
6 Amount (\$) 800 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
	<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 4/28/23	Payee name Olive Garden	
Amount (\$) 161 ⁷⁸	Payee address: 10327 State Highway 6 Missouri City, TX 77459	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food & Beverage	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
Date 4/28/23	Payee name Southern University Alumni - Houston	
Amount (\$) 2,500 ⁰⁰	Payee address: P.O. Box 2624 Houston, TX 77252	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) SPONSORSHIP	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>52</i>	2 FILER NAME <i>James "Grady" Prestage</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>4/28/23</i>	5 Payee name <i>Zeta Alpha Boule</i>	
6 Amount (\$) <i>2,700⁰⁰</i>	7 Payee address; City; State; Zip Code <i>4202 Clearwater Court Missouri City, TX 77459</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>5/1/23</i>	Payee name <i>American Leadership Foundation</i>	
Amount (\$) <i>1,026⁵⁸</i>	Payee address; City; State; Zip Code <i>3101 Richmond Ave Houston, TX 77098</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	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	Office sought Office held

Date <i>5/1/23</i>	Payee name <i>Avede, LLC</i>	
Amount (\$) <i>533²²</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>Office Rental</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: <i>52</i>	2 FILER NAME <i>James "Grady" Prestage</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>5/1/23</i>	5 Payee name <i>Ronnie Bennett</i>	
6 Amount (\$) <i>250⁰⁰-</i>	7 Payee address: <i>12840 South Kirkwood Road #714 Stafford, TX 77477</i>	City: State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Contract Labor</i>	(b) Description <i>security</i>
	<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>5/1/23</i>	Candidate / Officeholder name <i>Top Choice Products</i>	
Amount (\$) <i>301¹²-</i>	Payee address: <i>1492 Harding Blvd Baton Rouge, LA 70807</i>	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Campaign paraphernalia</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		
Date <i>5/1/23</i>	Candidate / Officeholder name <i>David Cardenas</i>	
Amount (\$) <i>250⁰⁰</i>	Payee address: <i>12840 South Kirkwood Road #714 Stafford, TX 77477</i>	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Contract Labor</i>	Description <i>security</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 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>52</i>	2 FILER NAME <i>James "Grady" Prestago</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>5/1/23</i>	5 Payee name <i>Dwayne Santa Cruz</i>	
6 Amount (\$) <i>350⁰⁰</i>	7 Payee address; City; State; Zip Code <i>P.O. Box 651 Katy, TX 77492</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Contract Labor</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>5/1/23</i>	Payee name <i>Brenda Patton</i>	
Amount (\$) <i>400⁰⁰</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>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
Date <i>5/5/23</i>	Payee name <i>Carmen Turner Campaign</i>	
Amount (\$) <i>1,000⁰⁰</i>	Payee address; City; State; Zip Code <i>23503 Starbridge Lake Lane Richmond, TX 77407</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	
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: 52 2 FILER NAME James "Grady" Prestage 3 Filer ID (Ethics Commission Filers)

4 Date 5/4/23 5 Payee name American Storage

6 Amount (\$) 794⁰⁰ 7 Payee address; 2427 Texas Parkway City; State; Zip Code
Missouri City, TX 77489

8 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule)	(b) Description
<u>Storage Expense</u>	
(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 5/5/23 Payee name Avas Flowers

Amount (\$) 216¹⁴ Payee address; 200 Continental Drive, suite 401 City; State; Zip Code
Newark, DE 19713

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule)	Description
<u>Memorial Expense</u>	
<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 5/5/23 Payee name Jonathan Elmore c/o March of Dimes

Amount (\$) 100⁰⁰ Payee address; 5420 Dashwood Dr #302 City; State; Zip Code
Houston, TX 77081

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule)	Description
<u>Donation</u>	
<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: <u>52</u>		2 FILER NAME <u>James "Grady" Prestage</u>		3 Filer ID (Ethics Commission Filers)	
4 Date <u>5/5/23</u>		5 Payee name <u>Alexandra Foundation</u>			
6 Amount (\$) <u>1,000⁰⁰</u>		7 Payee address; <u>7031 W. Fugua</u> <u>Missouri City, TX 77489</u>		City; State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <u>Donation / sponsorship</u>		(b) Description		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <u>5/8/23</u>		Payee name <u>Amazon Marketplace</u>			
Amount (\$) <u>238¹²</u>		Payee address; <u>410 Terry Avenue North</u> <u>Seattle, WA 98109</u>		City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Event Expense</u>		Description		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <u>5/9/23</u>		Payee name <u>Super Cleaners</u>			
Amount (\$) <u>176⁴⁷</u>		Payee address; <u>3003 Texas Parkway</u> <u>Missouri City, TX 77489</u>		City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Event Expense</u>		Description		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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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: 52	2 FILER NAME James "Grady" Prestage	3 Filer ID (Ethics Commission Filers)
4 Date 5/10/23	5 Payee name T-Mobile	
6 Amount (\$) 486 ³¹	7 Payee address: 5684 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) Phone & Internet 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		
Date 5/11/23	Candidate / Officeholder name Bridgette Smith-Lawson Campaign Office sought Office held	
Amount (\$) 2,500 ⁰⁰	Payee address; 5826 New Territory Blvd #810 Sugar Land, TX 77479 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 <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 5/15/23	Candidate / Officeholder name Cleopatra's Office sought Office held	
Amount (\$) 145 ⁵⁶	Payee address; 1833 Richmond Parkway Richmond, TX 77469 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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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>52</i>	2 FILER NAME <i>James "Grady" Prestage</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>5/15/23</i>	5 Payee name <i>Brenda Patton</i>	
6 Amount (\$) <i>2,500⁰⁰</i>	7 Payee address; City; State; Zip Code <i>1618 Dusty Ridge Missouri City, TX 77459</i>	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Consulting Expense</i>	(b) Description
	<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>5/15/23</i>	Candidate / Officeholder name <i>Erin Prestage</i>	
Amount (\$) <i>250⁰⁰</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 <i>Photography</i>
	<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		
Date <i>5/15/23</i>	Candidate / Officeholder name <i>Solomon Spencer</i>	
Amount (\$) <i>325⁰⁰</i>	Payee address; City; State; Zip Code <i>3819 Kiamesha Drive Missouri City, TX 77459</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Contract Labor</i>	Description <i>Entertainment</i>
	<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 <i>Erin Prestage</i>		
Office sought <i> </i>		
Office held <i> </i>		

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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: 52	2 FILER NAME James "Grady" Prestage	3 Filer ID (Ethics Commission Filers)
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4 Date 5/15/23	5 Payee name Carolyn Brown
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6 Amount (\$) 400 ⁰⁰	7 Payee address: 7714 Chasewood Drive 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 5/22/23	Payee name Constant Contact
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Amount (\$) 204 ⁷⁵	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) Fees	Description Database
	<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 5/23/23	Payee name Brentwood Baptist Church
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Amount (\$) 500 ⁰⁰	Payee address: 13033 Landmark Houston, TX 77045	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

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>52</i>	2 FILER NAME <i>James "Grady" Prestage</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>5/25/23</i>	5 Payee name <i>Andrea Sawyer</i>	
6 Amount (\$) <i>1,900⁰⁰</i>	7 Payee address; City; State; Zip Code <i>1843 Avocet way Missouri City, TX 77489</i>	
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	
8 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <i>5/26/23</i>	Payee name <i>Larry Johnson Campaign</i>	
Amount (\$) <i>250⁰⁰</i>	Payee address; City; State; Zip Code <i>PO Box 362054 Decatur, GA 30036</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	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <i>5/26/23</i>	Payee name <i>House of Blooms</i>	
Amount (\$) <i>156⁹⁶</i>	Payee address; City; State; Zip Code <i>16180 City Walk Sugar Land, TX 77479</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Memorial 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: 52	2 FILER NAME James "Grody" Prestage	3 Filer ID (Ethics Commission Filers)
4 Date 5/26/23	5 Payee name Worthing High School Reunion	
6 Amount (\$) 125 ⁰⁰	7 Payee address; City: State: Zip Code 3802 Point Clear Missouri City, TX 77459	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Donation	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

Date 5/30/23	Payee name Aoede, LL
Amount (\$) 533 ²²	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) Office Rental
	<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 5/31/23	Payee name Brenda Patton
Amount (\$) 500 ⁰⁰	Payee address; City: State: Zip Code 1618 Dusty Ridge Missouri City, TX 77459
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense
	<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: **52** 2 FILER NAME: **James "Grady" Prestage** 3 Filer ID (Ethics Commission Filers)

4 Date: **6/2/23** 6 Payee name: **Sirrus XM**

5 Amount (\$): **332⁵¹** 7 Payee address; City; State; Zip Code:
1221 Avenue of the Americas, 35th Floor
New York, NY 10020

8 PURPOSE OF EXPENDITURE: **Technology Expense**

(a) Category (See Categories listed at the top of this schedule)

(b) Description

(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Date: **6/2/23** Payee name: **American Storage**

Amount (\$): **794⁰⁰** Payee address; City; State; Zip Code:
2427 Texas Parkway
Missouri City, TX 77489

PURPOSE OF EXPENDITURE: **Storage Expense**

Category (See Categories listed at the top of this schedule)

Description

Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Date: **6/2/23** Payee name: **Michele Forman**

Amount (\$): **2,000⁰⁰** Payee address; City; State; Zip Code:
5218 Pebble Bluff Ln
Sugar Land, TX 77479

PURPOSE OF EXPENDITURE: **Event Expense**

Category (See Categories listed at the top of this schedule)

Description

Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

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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: 52		2 FILER NAME James "Grady" Prestage		3 Filer ID (Ethics Commission Filers)	
4 Date 6/2/23		5 Payee name APRI			
6 Amount (\$) 150⁰⁰-		7 Payee address: City: State: Zip Code 4414 AKard Houston, TX 77047			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Donation		(b) Description		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 6/5/23		Candidate / Officeholder name Missouri City Juneteenth Celebration Foundation			
Amount (\$) 2,562⁵⁰-		Office sought Missouri City, TX 77489			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation		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 6/6/23		Candidate / Officeholder name Wayfair			
Amount (\$) 184⁸⁷-		Office sought 4 Copley Place, 7th FL Boston, MA 02116			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		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

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: 52	2 FILER NAME James "Grady" Prestage	3 Filer ID (Ethics Commission Filers)
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4 Date 6/17/23	5 Payee name New St. Phillip Baptist Church
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6 Amount (\$) 100 ⁰⁰	7 Payee address; City; State; Zip Code 6135 FM 521 Arcola, TX 77583
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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 6/12/23	Payee name C-STEM
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Amount (\$) 1,000 ⁰⁰	Payee address; City; State; Zip Code PO BOX 270864 Houston, TX 77277
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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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Date 6/12/23	Payee name T-Mobile
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Amount (\$) 486 ³¹	Payee address; City; State; Zip Code 5684 Highway 6 Missouri City, TX 77459
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Phone and internet 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	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: 52	2 FILER NAME James "Grady" Prestage	3 Filer ID (Ethics Commission Filers)
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4 Date 6/12/23	5 Payee name Linesisters
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6 Amount (\$) 102 ⁸⁴	7 Payee address: 2602 Southmore Houston, TX 77004	City:	State:	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gifts/Awards	(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 6/14/23	Payee name Michele Forman
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Amount (\$) 1,250 ⁰⁰	Payee address: 5218 Pebble Bluff Lane Sugar Land, TX 77479	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 6/15/23	Payee name Andrea Sawyer
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Amount (\$) 1,500 ⁰⁰	Payee address: 1843 Avocet Way 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) 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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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>52</i>	2 FILER NAME <i>James "Grady" Prestage</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>6/20/23</i>	5 Payee name <i>Brentwood Baptist Church</i>	
6 Amount (\$) <i>200⁰⁰</i>	7 Payee address; City; State; Zip Code <i>13033 Landmark Houston, TX 77045</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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>6/20/23</i>	Payee name <i>Constant Contact</i>		
Amount (\$) <i>204⁷⁵</i>	Payee address; City; State; Zip Code <i>1601 Trapelo Rd Waltham, MA 02451</i>		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Fees</i>	Description <i>Data base</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>6/20/23</i>	Payee name <i>Duchenbe Muscular Dystrophy Fundraiser</i>		
Amount (\$) <i>100⁰⁰</i>	Payee address; City; State; Zip Code <i>220 Hockenbury Road Hillsborough, NJ 08843</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		

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 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>52</i>	2 FILER NAME <i>James "Grady" Prestage</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>6/23/23</i>	5 Payee name <i>Teana Watson Campaign</i>	
6 Amount (\$) <i>1,000⁰⁰</i>	7 Payee address; City; State; Zip Code <i>4211 Clearwater Ct. Missouri City, TX 77459</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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <i>6/26/23</i>	Payee name <i>H-E-B #110</i>	
Amount (\$) <i>933⁷⁵</i>	Payee address; City; State; Zip Code <i>8900 Highway Missouri City, TX 77459</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Gifts/Awards</i>	Description <i>Graduation gift cards</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>6/26/23</i>	Payee name <i>Sydney Snipes</i>	
Amount (\$) <i>150⁰⁰</i>	Payee address; City; State; Zip Code <i>4311 Roundtree Lane Missouri City, TX 77459</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Gift</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: 52		2 FILER NAME James "Grady" Prestage		3 Filer ID (Ethics Commission Filers)	
4 Date 6/26/23		5 Payee name Sean Jones			
6 Amount (\$) 150⁰⁰		7 Payee address: 2825 Emberwood Garland, TX 75043		City: State: Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift		(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 6/26/23		Payee name Jasmyn Love			
Amount (\$) 150⁰⁰		Payee address: 13609 Fountain Mist Drive Pearland, TX 77584		City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gift		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 6/26/23		Payee name Brenda Patton			
Amount (\$) 450⁰⁰		Payee address: 1618 Dusty Ridge Missouri City, TX 77459		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	

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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: 52		2 FILER NAME James "Grady" Prestage		3 Filer ID (Ethics Commission Filers)	
4 Date 6/27/23		5 Payee name Mufasa's Pride			
6 Amount (\$) 204⁹⁹		7 Payee address; PO Box 131262 Houston, TX 77219		City; State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Donation		(b) Description		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 6/27/23		Payee name Jada Jackson			
Amount (\$) 150⁰⁰		Payee address; 3001 Irving Ave N. Minneapolis, MN 55411		City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gift		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 6/29/23		Payee name Amazon.com			
Amount (\$) 232⁶⁹		Payee address; 410 Terry Avenue North Seattle, WA 98109		City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gift for needy family		Description Baby crib		
	<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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