CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

ī	he C/OH Instruction	Guide explains how to	complete this form.	1 Filer ID (Ethics Commi	ssion Filers)	2 Total pages	filed:
3	CANDIDATE/ OFFICEHOLDER NAME	MS/MRS/MR NICKNAME	FIRST Dexter Lorance-Na LAST McCoy	vario	MI	OFFICE U	JSE ONLY
4	CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS /PO BOX: P.O. Box 1398	APT/SUITE # CITY Richmond		ZIP CODE 77406	Date Hand-delivered	or Date Postmarked
5	CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PH	ONE NUMBER	EXTENSIO	DN .	Receipt #	Amount \$
6	CAMPAIGN TREASURER NAME	MS/MRS/MR NICKNAME	FIRST Joseph LAST Killebrew		MI	Date Processed Date Imaged	
7	CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO B 8835 Arch Rock Dr.	OX PLEASE): APT/SUITE :	# CITY Cypress	STATE: TX	ZIP CODE 77433	
8	CAMPAIGN TREASURER PHONE	AREA CODE F (407) 376-1	PHONE NUMBER	EXTENSIO)N		
9	REPORT TYPE	☐ January 15	30th day before election	E	unoff ceeded Modified eporting limit	appointment (campaign treasurer officeholder only) Attach- COH-FR)
L	PERIOD COVERED ELECTION	Month Day Y 01/01/2024 ELECTION DATE Month Day	ear TH ELECTION Year ✓ Primar		Month Runoff	Day Yea 06/30/2024 Other	ir
	OFFICE	3/3/2026 OFFICE HELD (if any) Fort Bend County C	Gener		Special 3 OFFICE SOUGH	T (if known)	
14	NOTICE FROM POLITICAL COMMITTEE(S) Additional Pages	SUPPORT THE CANDIDATE / O	OLITICAL CONTRIBUTIONS ACC FFICEHOLDER. THESE EXPEND ANDIDATES AND OFFICEHOLDE COMMITTEE NAME COMMITTEE ADDRESS	ITURES MAY HAVE RS ARE REQUIRE	E BEEN MADE WITHOUT D TO REPORT THIS INF	THE CANDIDATE'S OR	OFFICEHOLDER'S
			COMMITTEE CAMPAIGN				
		L	GO TO PA	GE 2			

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

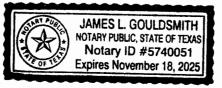
15 C/OH NAME	Dexter L	orance-Navario McCoy	16	Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS		OTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOA R GUARANTEES OF LOANS OR CONTRIBUTIONS MADE ELECTRONICALLY)	NS,	\$75.00
		OTAL POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$200,205.00
EXPENDITURE TOTALS	3 ^T	OTAL UNITEMIZED POLITICAL EXPENDITURES		\$0.00
	4 T	OTAL POLITICAL EXPENDITURES		\$55,028.63
CONTRIBUTION BALANCE		OTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY F REPORTING PERIOD		\$562,098.84
OUTSTANDING LOAN TOTALS		OTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE AST DAY OF THE REPORTING PERIOD		\$0.00

18 SIGNATURE

(1) Affidavit

NOTARY STAMP / SEAL

I swear, or affirm, under penalty of perjury, that the accompanying required to be reported by me under Title 15, Election Code.



Signature of Candidate or Officeholder

Please complete either option below:

Sworn to and subscribed before me by	Dexter L-N McCoy	this the					
day of $\frac{9\sqrt{4}}{20}$ 20 $\frac{24}{20}$ to certify which, witness my hand and seal of office.							
all	Clames C. Galdsuit	Notary					
Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath					

OR

Title of officer administering oath

) Unsworn	Declaration	
) Unsworn	Declaration	

(zip code)	(country)
20	
nth) (yea	ar)
n	20

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - COH

FORM C/OH COVER SHEET PG 3

1	FILER NAME kter Lorance-Navario McCoy	ics Commission Filers)	
21 \$	SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$200,205.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$0.00
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$0.00	
4.	SCHEDULE E: LOANS	\$0.00	
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRI	\$55,028.63	
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$0.00	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONT	FRIBUTIONS	\$0.00
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$0.00
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS		\$0.00
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BU	\$0.00	
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CON	ITRIBUTIONS	\$0.00
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS AND CONTRIBUTIONS TO FILER	S RETURNED	\$191.20

SCHEDULE A1

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

The Ins	struction Guide explains how to complete this form	Total pages Schedule A1: not available		
2 FILER NAME	Janania McCarr		3 Filer ID (Ethics Commission Fi	lers)
Dexter Lorance-N			7	
4 Date			7 Amount of contribution (\$)	
04/05/2024	Huitt-Zollars, Inc. Texas PAC			\$1,500.00
	6 Contributor address; City; State; Z	Cip Code		
	1717 Mckinney Ave Ste 1400 Dallas, TX 75202-1239			
8 Principal occup	ation / Job title (See Instructions)	9 Employ	ver (See Instructions)	
4 Date	5 Full name of contributorout-of-state PAC		7 Amount of contribution (\$)	
04/20/2024	Delilah Agho-Otoghile			\$25.00
	6 Contributor address; City; State; Z	ip Code		420.00
	11615 Radford Ln Houston, TX 77099-4640			
8 Principal occup	ver (See Instructions)			
4 Date	5 Full name of contributorout-of-state PAC		7 Amount of contribution (\$)	
04/20/2024	Nick Alanis			\$5,000.00
	6 Contributor address; City; State; Z	ip Code		
	8519 Woods Hollow Trl Richmond, TX 77406-2536			
8 Principal occup	ation / Job title (See Instructions)	9 Employ	er (See Instructions)	
Chairman		Er	ntech Civil Engineers, Inc.	
4 Date	5 Full name of contributorout-of-state PAC		7 Amount of contribution (\$)	
06/13/2024	Allen Boone Humphries Robinson, LLP			\$1,500.00
	6 Contributor address; City; State; Z	ip Code		
	3200 Southwest Fwy Ste 2600 Houston, TX 77027-7537			
8 Principal occup	ation / Job title (See Instructions)	9 Employ	er (See Instructions)	
4 Date	5 Full name of contributorout-of-state PAC		7 Amount of contribution (\$)	
03/11/2024	Cherita Andrews			\$550.00
	6 Contributor address; City; State; Z	ip Code		
	9023 Covent Garden St Houston, TX 77031-3015			
	ation / Job title (See Instructions)	1	er (See Instructions)	
CXO		M	V Engineering	

SCHEDULE A1

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

The	Instruction Guide explains how	Total pages Schedule A1: not available		
2 FILER NAM				3 Filer ID (Ethics Commission Filers)
Dexter Lorance	e-Navario McCoy			
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)
04/16/2024	Ardurra Group PAC			\$1,500.00
	6 Contributor address;	City; State;	Zip Code	
	5851 San Felipe St Ste 425 Hous	ton, TX 77057-8018		
8 Principal oc	cupation / Job title (See Instruction	s)	9 Emplo	yer (See Instructions)
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)
04/18/2024	Manuela Arroyos			\$50.00
	6 Contributor address;	City; State;	Zip Code	
	5515 Cunningham Ln Rosenberg	, TX 77471-2664		
8 Principal occ	cupation / Job title (See Instruction	s)	9 Emplo	yer (See Instructions)
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)
03/29/2024	Mohan Ballagere	<u> </u>		\$2,500.00
	6 Contributor address;	City; State;	Zip Code	
	10306 Logan Bridge Ln Sugar La	and, TX 77498-4078		
8 Principal occ Vice Presi	cupation / Job title (See Instruction ident	s)		yer (See Instructions) Geotest Engineering, Inc.
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)
04/15/2024	David Balmos			\$5,000.00
	6 Contributor address;	City; State;	Zip Code	
	13623 Waverly Crest Ct Cypress	, TX 77429-6830		
8 Principal occ Engineer	cupation / Job title (See Instruction	s)	· ·	oyer (See Instructions) WSB
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)
04/20/2024	Raj Basavaraju			\$500.00
	6 Contributor address;	City; State;	Zip Code	
	13518 Fawn Lily Dr Ste 900 Cyp	oress, TX 77429-5419		
•	L cupation / Job title (See Instruction	s)	1	oyer (See Instructions)
Transport	ation Engineer		H	INTB

SCHEDULE A1

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

The	Instruction Guide explains how	1 Total pages Schedule A1: not available			
2 FILER NAMI Dexter Lorance	E -Navario McCoy			3 Filer ID (Ethics Commission F	ilers)
4 Date	5 Full name of contributor	out-of-state PAC	,	7 Amount of contribution (\$)	
04/01/2024	Levi Benton				\$250.00
	6 Contributor address;	City; State	e; Zip Code		Ψ250.00
	3417 Milam St Houston, TX 770	02-9531			
8 Principal occ Lawyer	cupation / Job title (See Instruction	s)	1 '	yer (See Instructions) .evi Benton & Associates PLLC	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
04/20/2024	william bobrick				\$25.00
	6 Contributor address;	City; State	; Zip Code		ψ25.00
	PO Box 637 Sugar Land, TX 774	187-0637			
8 Principal occ	cupation / Job title (See Instruction	s)	9 Emplo	yer (See Instructions)	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	·
06/13/2024	Jeff Cannon				\$2,000.00
	6 Contributor address;	City; State	; Zip Code		4-,
	4315 Whickham Dr Fulshear, TX	X 77441-4058			
8 Principal occ Senior Vic	cupation / Job title (See Instruction e President	s)	I '	yer (See Instructions) JA	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
04/20/2024	Darryl Carter				\$2,500.00
	6 Contributor address;	City; State	; Zip Code		
	5651 Willers Way Houston, TX	77056-2608			
8 Principal occ Attorney	upation / Job title (See Instruction	s)	1	yer (See Instructions)	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
03/29/2024	Santiago Castaneda				\$2,500.00
	6 Contributor address;	City; State	; Zip Code		
	2426 Mills Creek Dr Kingwood,	TX 77339-3095			
8 Principal occ Engineer	cupation / Job title (See Instruction	s)		yer (See Instructions) Omega Engineers	
L					

SCHEDULE A1

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

The	Instruction Guide explains how	1 Total pages Schedule A1: not available			
2 FILER NAMI				3 Filer ID (Ethics Commission F	ilers)
Dexter Lorance	e-Navario McCoy				
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
04/20/2024	Maria Cerana				\$50.00
	6 Contributor address;	City; State;	Zip Code		
	11714 Wickhollow Ln Houston,	TX 77043-4534			
8 Principal occ	cupation / Job title (See Instruction	is)	9 Emplo	yer (See Instructions)	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
03/13/2024	Cobb Fendley PAC				\$5,000.00
	6 Contributor address;	City; State;	Zip Code		
	13430 Northwest Fwy Ste 1100	Houston, TX 77040-6	153		
8 Principal occ	cupation / Job title (See Instruction	is)	9 Emplo	yer (See Instructions)	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
04/20/2024	Robin Cole				\$50.00
	6 Contributor address;	City; State;	Zip Code		
	6023 Hansford Ln Sugar Land, 7	TX 77479-5075			
8 Principal occ	cupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
04/05/2024	CONSOR Engineering, LLC				\$5,000.00
	6 Contributor address;	City; State;	Zip Code		
	15310 Park Row Houston, TX 7	7084-2887			
8 Principal occ	cupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
04/15/2024	Marty Cristofaro				\$2,500.00
	6 Contributor address;	City; State;	Zip Code		
	17923 Windy Canyon Ln Housto	on, TX 77084-7027			
	cupation / Job title (See Instruction dent/Program Director	ns)		yer (See Instructions)	
L			L		

SCHEDULE A1

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The Ins	struction Guide explains how to co	Total pages Schedule A1: not available			
2 FILER NAME				3 Filer ID (Ethics Commission Filers)	
Dexter Lorance-N	lavario McCoy				
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
04/19/2024	Antoinette Davis			\$25.00	
	6 Contributor address; C	City; State;	Zip Code		
	5438 Plantation Forest Dr Katy, TX 77	7449-6444			
8 Principal occup	nation / Job title (See Instructions)		9 Employ	er (See Instructions)	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
04/20/2024	Barry Davis Jr			\$50.00	
	6 Contributor address; C	City; State;	Zip Code		
	964 Ringold St Houston, TX 77088				
8 Principal occup	pation / Job title (See Instructions)		9 Employ	er (See Instructions)	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
04/20/2024	Maxine Dawkins			\$50.00	
	6 Contributor address; C	City; State;	Zip Code		
	6831 River Bluff Dr Houston, TX 7708	85-1313			
8 Principal occup	pation / Job title (See Instructions)		9 Employ	er (See Instructions)	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
04/20/2024	DEC PAC			\$2,500.00	
	6 Contributor address; C	City; State;	Zip Code		
	1 Greenway Plz Ste 225 Houston, TX	77046-0106			
8 Principal occup	pation / Job title (See Instructions)		9 Employ	er (See Instructions)	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
04/16/2024	David Eastwood			\$500.00	
	6 Contributor address;	City; State;	Zip Code		
	17407 Highway 59 N Humble, TX 773	396-3008			
	pation / Job title (See Instructions)		, , ,	rer (See Instructions) eotech Engineering & Testing	
Engineer				cotech Englicering & Testing	

SCHEDULE A1

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The In	struction Guide explains how	Total pages Schedule A1: not available			
2 FILER NAME Dexter Lorance-N	Navario McCoy			3 Filer ID (Ethics Commission	Filers)
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
04/20/2024	EHRA Engineering PAC				\$2,500.00
	6 Contributor address;	City; State;	Zip Code		+=, 0 0 0 7 0 0
	10011 Meadowglen Ln Houston,	TX 77042-3760			
8 Principal occup	pation / Job title (See Instruction	s)	9 Emplo	yer (See Instructions)	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
03/27/2024	John English				\$1,000.00
	6 Contributor address;	City; State;	Zip Code		. ,
	7676 Hillmont St Houston, TX 7	7040-6400			
, ,	pation / Job title (See Instruction		yer (See Instructions)		
Civil Engineering & Land Surveying				EKHA Engineering Inc	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
06/13/2024	Omar Escobar				\$5,000.00
	6 Contributor address;	City; State;	Zip Code		
	16910 Roberts Dr Cypress, TX 7	7433			
8 Principal occup Engineer	pation / Job title (See Instruction	s)	, ,	yer (See Instructions) JA Engineering, 1nc	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
01/01/2024	Lois Essells				\$25.00
	6 Contributor address;	City; State;	Zip Code		
	902 Chateau Pl Richmond, TX 7'	7469-5108			
8 Principal occupation / Job title (See Instructions) 9			9 Employ	yer (See Instructions)	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
04/20/2024	Omega Foston				\$250.00
	6 Contributor address;	City; State;	Zip Code		
	6419 Carriagewood Ct Richmond	i, TX 77469-7321			
8 Principal occup	pation / Job title (See Instruction	s)	9 Employ	yer (See Instructions)	

SCHEDULE A1

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The Ins	struction Guide explains how t	Total pages Schedule A1: not available			
2 FILER NAME				3 Filer ID (Ethics Commission Filer	rs)
Dexter Lorance-N	Javario McCoy				
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
03/25/2024	Joseph Freudenberger				\$50.00
	6 Contributor address;	City; State;	Zip Code		
	5214 Valkeith Dr Houston, TX 77	7096-5109			
8 Principal occup	ation / Job title (See Instructions	3)	9 Employ	yer (See Instructions)	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
04/18/2024	Lauren Fuller				\$50.00
	6 Contributor address;	City; State;	Zip Code		
	9511 W Sam Houston Pkwy N Ho	ouston, TX 77064-539	98		
8 Principal occup	pation / Job title (See Instructions	3)	9 Employ	yer (See Instructions)	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
04/20/2024	April Gallien				\$75.00
	6 Contributor address;	City; State;	Zip Code		
	514 Little River Ct Richmond, TX	77406-2195			
8 Principal occup	pation / Job title (See Instructions	3)	9 Employ	yer (See Instructions)	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
04/03/2024	Gaurav Garg				\$1,500.00
	6 Contributor address;	City; State;	Zip Code		
	1500 S Dairy Ashford Rd Houston	n, TX 77077-3854			
•	pation / Job title (See Instructions	5)	1	yer (See Instructions)	
consulting	Γ		ca	ascade	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
04/16/2024	Mark Gehringer			:	\$2,500.00
	6 Contributor address;	City; State;	Zip Code		
	5714 Ashley Spring Ct Katy, TX	77494-2213			
	pation / Job title (See Instructions	5)		yer (See Instructions) .G. Miller	
President				.U. WIRKEI	

SCHEDULE A1

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2 FILER NAM				3 Filer ID (Ethics Commission	Filers)
Dexter Lorance	e-Navario McCoy				
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
04/20/2024	Tony Gelacio				\$5,000.00
	6 Contributor address;	City; State;	Zip Code		
	16360 Park Ten Pl Ste 230 Hous	ston, TX 77084-5095			
8 Principal occ President	cupation / Job title (See Instruction	ıs)		yer (See Instructions) ntech Civil Engineers, Inc.	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
03/04/2024	Costas Georghiou				\$2,500.00
	6 Contributor address;	City; State; Z	Zip Code		4=,000000
	12335 Meadow Lake Dr Houston	n, TX 77077-5935			
	cupation / Job title (See Instruction	ıs)		yer (See Instructions)	
Engineer			P	GAL Inc.	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
04/18/2024	Griselda Gonzales				\$200.00
	6 Contributor address;	City; State; 2	Zip Code		
	21011 Greyhawk Ct Richmond,	TX 77407-4514			
8 Principal occ	cupation / Job title (See Instruction	s)	9 Employ	yer (See Instructions)	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
04/20/2024	Greater Houston Builders Assoc				\$1,500.00
	6 Contributor address;	City; State; 2	Zip Code		
	9511 W Sam Houston Pkwy N F	łouston, TX 77064-5398			
8 Principal occ	cupation / Job title (See Instruction	s)	9 Employ	yer (See Instructions)	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
04/20/2024	Marquette Greene Scott				\$25.00
	6 Contributor address;	City; State; 2	Zip Code		
	1231 Diamond Drape Dr Iowa C	olony, TX 77583-1576			
8 Principal occ	cupation / Job title (See Instruction	s)	9 Employ	yer (See Instructions)	
L			 		

SCHEDULE A1

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The Ins	struction Guide explains how to complete this form.	Total pages Schedule A1: not available
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Dexter Lorance-N	Javario McCoy	
4 Date	5 Full name of contributorout-of-state PAC	7 Amount of contribution (\$)
06/06/2024	Halff Associates-State PAC	\$1,500.00
	6 Contributor address; City; State; Zip Code	e
	1201 N Bowser Rd Richardson, TX 75081-2220	1
8 Principal occup	pation / Job title (See Instructions) 9 Em	ployer (See Instructions)
4 Date	5 Full name of contributorout-of-state PAC	7 Amount of contribution (\$)
04/19/2024	Cory Hansen	\$50.00
	6 Contributor address; City; State; Zip Code	
	5826 Sonoma Rdg Missouri City, TX 77459-6132	
8 Principal occup	pation / Job title (See Instructions) 9 Em	ployer (See Instructions)
4 Date	5 Full name of contributorout-of-state PAC	7 Amount of contribution (\$)
03/20/2024	Aamir Hasanali	\$25.00
	6 Contributor address; City; State; Zip Code	e
	11510 Tarvie Path Richmond, TX 77407-1958	
8 Principal occup	pation / Job title (See Instructions) 9 Em	ployer (See Instructions)
4 Date	5 Full name of contributorout-of-state PAC	7 Amount of contribution (\$)
01/27/2024	Kevin Hattery	\$100.00
	6 Contributor address; City; State; Zip Code	e
	3819 Villanova St Houston, TX 77005-3639	
8 Principal occup	pation / Job title (See Instructions) 9 Em	ployer (See Instructions)
4 Date	5 Full name of contributorout-of-state PAC	7 Amount of contribution (\$)
02/27/2024	Kevin Hattery	\$100.00
	6 Contributor address; City; State; Zip Code	е
	3819 Villanova St Houston, TX 77005-3639	
8 Principal occup	pation / Job title (See Instructions) 9 Em	ployer (See Instructions)

SCHEDULE A1

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The I	nstruction Guide explains how	1 Total pages Schedule A1: not available			
2 FILER NAME				3 Filer ID (Ethics Commission	Filers)
Dexter Lorance	-Navario McCoy				
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
04/12/2024	Vickie Henkel				\$1,500.00
	6 Contributor address;	City; State;	Zip Code		
	8630 Wyndham Village Dr Jerse	y Village, TX 77040-1	1142		
8 Principal occi Principal	upation / Job title (See Instruction	ns)	, ,	yer (See Instructions) owman Consulting Group	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
04/09/2024	Jubair Hossain				\$2,500.00
	6 Contributor address;	City; State;	Zip Code		~,
	15627 Sand Bluestem Dr Cypres	ss, TX 77433-1883			
8 Principal occ	upation / Job title (See Instruction	is)		yer (See Instructions)	
President			Н	TS Inc Consultants	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
04/30/2024	HR Green Texas PAC				\$5,000.00
	6 Contributor address;	City; State;	Zip Code		
	11011 Richmond Ave Ste 200 H	ouston, TX 77042-660)1		
8 Principal occ	upation / Job title (See Instruction	is)	9 Employ	yer (See Instructions)	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
03/20/2024	Shou Hu				\$1,500.00
	6 Contributor address;	City; State;	Zip Code		
	105 Pamellia Dr Bellaire, TX 77	401-3711			
8 Principal occ Not Emplo	upation / Job title (See Instruction	ns)		yer (See Instructions) fot Employed	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
04/05/2024	Darryl Humphrey Jr.				\$150.00
	6 Contributor address;	City; State;	Zip Code		
	1302 Emilee Ct Rosenberg, TX	77471-2166			
8 Principal occ	upation / Job title (See Instruction	ns)	9 Employ	yer (See Instructions)	

SCHEDULE A1

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

The Ins	struction Guide explains how to complete this f	1 Total pages Schedule A1: not available		
2 FILER NAME Dexter Lorance-N	avario McCoy		3 Filer ID (Ethics Commission F	Filers)
4 Date	5 Full name of contributorout-of-state PAC		7 Amount of contribution (\$)	
04/20/2024	IEA PAC			\$5,000.00
	6 Contributor address; City; State;	Zip Code		. ,
	18383 Preston Rd Ste 500 Dallas, TX 75252-5490			
8 Principal occup	ation / Job title (See Instructions)	9 Emplo	yer (See Instructions)	
4 Date	5 Full name of contributorout-of-state PAC		7 Amount of contribution (\$)	
06/06/2024	Harish JaJoo			\$1,000.00
	6 Contributor address; City; State;	Zip Code		. ,
	62 Bradford Cir Sugar Land, TX 77479-2976			
	ation / Job title (See Instructions)	1 '	yer (See Instructions)	
Engineer		H	J Consulting	
4 Date	5 Full name of contributorout-of-state PAC		7 Amount of contribution (\$)	
04/20/2024	Larry Janak			\$2,500.00
	6 Contributor address; City; State;	Zip Code		
	19215 Cohen Green Ln Lan Houston, TX 77094-4127	,		
8 Principal occup Executive Vi	ation / Job title (See Instructions) ce President	1 .	yer (See Instructions) DCUS, Inc.	
4 Date	5 Full name of contributorout-of-state PAC		7 Amount of contribution (\$)	
04/22/2024	Telfryn John			\$2,500.00
	6 Contributor address; City; State;	Zip Code		
	15430 Woodland Orchard Ln Cypress, TX 77433-580	2		
8 Principal occup President	ation / Job title (See Instructions)	1 .	yer (See Instructions) leoscience	
4 Date	5 Full name of contributorout-of-state PAC		7 Amount of contribution (\$)	
04/06/2024	Charmaine Jones			\$50.00
	6 Contributor address; City; State;	Zip Code		
	20718 Pine Rain Ct Katy, TX 77449-1840			
8 Principal occup	ation / Job title (See Instructions)	9 Emplo	yer (See Instructions)	

SCHEDULE A1

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The	Instruction Guide explains how to	complete this fo	rm.	1 Total pages Schedule A1: not available	
2 FILER NAM				3 Filer ID (Ethics Commission Fi	ilers)
Dexter Lorance	e-Navario McCoy				
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
03/01/2024	Sharat Kalaga				\$50.00
	6 Contributor address;	City; State;	Zip Code		
	2000 W Sam Houston Pkwy S Houst	ton, TX 77042-361	5		
8 Principal oc	cupation / Job title (See Instructions)		9 Emplo	yer (See Instructions)	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
02/27/2024	Velia Kavalewitz				\$25.00
	6 Contributor address;	City; State;	Zip Code		Ψ25.00
	514 Saguaro Way Richmond, TX 77	469-2116			
8 Principal oc	cupation / Job title (See Instructions)		9 Emplo	yer (See Instructions)	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
04/20/2024	KCI Texas PAC				\$5,000.00
	6 Contributor address;	City; State;	Zip Code		
	11550 W Interstate 10 Ste 395 San A	antonio, TX 78230-	-1037		
8 Principal occ	cupation / Job title (See Instructions)		9 Employ	yer (See Instructions)	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
04/18/2024	Deysha Killebrew				\$50.00
	6 Contributor address;	City; State;	Zip Code		*
	8835 Arch Rock Dr Cypress, TX 774	33-7227			
8 Principal occ	cupation / Job title (See Instructions)		9 Employ	yer (See Instructions)	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
04/20/2024	Ursela Knox				\$25.00
	6 Contributor address;	City; State;	Zip Code		
	1402 Hemple Dr Rosenberg, TX 774	71-2176			
8 Principal occ	cupation / Job title (See Instructions)		9 Employ	yer (See Instructions)	

SCHEDULE A1

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The	Instruction Guide explains how to complete this f	Total pages Schedule A1: not available	
2 FILER NAM			3 Filer ID (Ethics Commission Filers)
	e-Navario McCoy		
4 Date	5 Full name of contributorout-of-state PAC	<u> </u>	7 Amount of contribution (\$)
03/29/2024	Mike Kurzy		\$500.00
	6 Contributor address; City; State;	Zip Code	
	11450 Compaq Center Dr Ste 660 Houston, TX 77070)	
8 Principal occ	cupation / Job title (See Instructions)	9 Emplo	yer (See Instructions)
4 Date	5 Full name of contributorout-of-state PAC	1	7 Amount of contribution (\$)
06/06/2024	Linebarger Goggin Blair & Sampson, LLP		\$1,500.00
	6 Contributor address; City; State;	Zip Code	
	PO Box 17428 Austin, TX 78760-7428		
8 Principal occ	cupation / Job title (See Instructions)	9 Emplo	yer (See Instructions)
4 Date	5 Full name of contributorout-of-state PAC		7 Amount of contribution (\$)
04/20/2024	Stephen Longoria		\$50.00
	6 Contributor address; City; State;	Zip Code	
	9414 Plaza Terrace Dr Missouri City, TX 77459-7247		
8 Principal occ	cupation / Job title (See Instructions)	9 Emplo	yer (See Instructions)
4 Date	5 Full name of contributor Out-of-state PAC		7 Amount of contribution (\$)
03/20/2024	Deidra Lyons-Lewis		\$70.00
	6 Contributor address; City; State;	Zip Code	
	8207 Dragonfly Dr Richmond, TX 77469-2140		
8 Principal occ	cupation / Job title (See Instructions)	9 Emplo	yer (See Instructions)
4 Date	5 Full name of contributorout-of-state PAC		7 Amount of contribution (\$)
03/26/2024	Kevin Matocha		\$5,000.00
	6 Contributor address; City; State;	Zip Code	
	1600 Highway 6 Ste 245 Sugar Land, TX 77478-4991		
8 Principal occ	cupation / Job title (See Instructions)	1 .	yer (See Instructions) tonehenge Holdings, LLC

SCHEDULE A1

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The ins	struction Guide explains how	1 Total pages Schedule A1: not available			
2 FILER NAME Dexter Lorance-N	lavario McCoy			3 Filer ID (Ethics Commission F	Filers)
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
03/13/2024	Ranney McDonough				\$7,500.00
	6 Contributor address;	City; State;	Zip Code		Ψ1,500.00
	3 Pin Oak Estates Dr Bellaire, TX	ζ 77401-4224			
8 Principal occup President	pation / Job title (See Instructions	s)		yer (See Instructions) fcDonough Engineering	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
04/18/2024	charles Mgbeike				\$100.00
	6 Contributor address;	City; State;	Zip Code		********
	6511 Broad Oaks Dr Richmond,	TX 77406-9628			
8 Principal occup	pation / Job title (See Instructions	5)	9 Employ	yer (See Instructions)	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
03/20/2024	Erik Miller				\$1,500.00
	6 Contributor address;	City; State;	Zip Code		
	5454 Jackwood St Houston, TX 7	77096-1236			
8 Principal occup Engineer	pation / Job title (See Instructions	3)		yer (See Instructions) ander Engineering Corp	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
04/16/2024	Jack Miller				\$2,500.00
	6 Contributor address;	City; State;	Zip Code		
	1146 Gardencrest Ln Ste 200 Ho	uston, TX 77077-1968			
	pation / Job title (See Instructions	5)	,	yer (See Instructions)	
Engineer	E Full name of analytic day		R	.G. Miller Engineers, Inc.	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
04/20/2024	Kevin Mineo		7 . 0 .		\$500.00
	6 Contributor address;	City; State;	Zip Code		
	870 W 41st St Houston, TX 7701				
8 Principal occup	pation / Job title (See Instructions	3)	9 Employ	yer (See Instructions)	

SCHEDULE A1

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The li	nstruction Guide explains how	1 Total pages Schedule A1:			
2 FILER NAME				3 Filer ID (Ethics Commission Fi	lers)
Dexter Lorance-	-Navario McCoy				•
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
03/12/2024	Rahmet Mohamed				\$5,000.00
	6 Contributor address;	City; State;	Zip Code		·
	2219 Hermina Radler Dr Richmo	nd, TX 77469-5180			
8 Principal occu Director	upation / Job title (See Instructions	s)		yer (See Instructions) Juited Engineers Inc.	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	*
02/27/2024	Michael Morgan				\$50.00
	6 Contributor address;	City; State;	Zip Code		\$50.00
	1966 S La Salle Ave Los Angeles	s, CA 90018-1623			
8 Principal occu	upation / Job title (See Instructions	s)	9 Emplo	yer (See Instructions)	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
04/30/2024	Bonnie Moss				\$5,000.00
	6 Contributor address;	City; State;	Zip Code		,
	1505 Highway 6 S Ste 180 Houst	on, TX 77077-1726			
-	upation / Job title (See Instructions usiness Owner	5)	1 .	yer (See Instructions) IBCO Engineering LLC	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
03/27/2024	Lindsay Munoz				\$525.00
	6 Contributor address;	City; State;	Zip Code		
	4234 Whitman St Houston, TX 7'	7027-6338			
8 Principal occu	pation / Job title (See Instructions	s)	9 Emplo	yer (See Instructions)	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
04/20/2024	Andres Novoa				\$50.00
	6 Contributor address;	City; State;	Zip Code		
	515 FM 359 Rd Richmond, TX 7	7406-2583			
8 Principal occu	pation / Job title (See Instructions	s)	9 Emplo	yer (See Instructions)	

SCHEDULE A1

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

2 FILER NAME		 		The Instruction Guide explains how to complete this form.				
			112 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		3 Filer ID (Ethics Commission Filers)			
Dexter Lorance	-Navario McCoy							
4 Date	5 Full name of contributor	out-of-s	state PAC	· · · · · · · · · · · · · · · · · · ·	7 Amount of contribution (\$)			
04/15/2024	Dwayne Pano				\$50.00			
	6 Contributor address;	City;	State;	Zip Code				
	6219 Carnaby Ln Rosenberg, TX	77471-4586	5					
8 Principal occ	upation / Job title (See Instruction	s)		9 Emplo	yer (See Instructions)			
4 Date	5 Full name of contributor	out-of-s	tate PAC		7 Amount of contribution (\$)			
04/30/2024	Pape-Dawson Engineers PAC				\$5,000.00			
·	6 Contributor address;	City;	State;	Zip Code				
	2000 NW Loop 410 San Antonio	, TX 78213-	2251					
8 Principal occ	upation / Job title (See Instruction	s)		9 Emplo	yer (See Instructions)			
4 Date	5 Full name of contributor	out-of-s	tate PAC _		7 Amount of contribution (\$)			
04/20/2024	Latoya Phillips				\$25.00			
	6 Contributor address;	City;	State;	Zip Code				
	3027 Crestone Dr Rosenberg, TX	<i>77471-</i> 1944	1					
8 Principal occ	upation / Job title (See Instruction	s)		9 Emplo	yer (See Instructions)			
4 Date	5 Full name of contributor	out-of-s	tate PAC		7 Amount of contribution (\$)			
05/14/2024	Satya Pilla				\$10,000.00			
	6 Contributor address;	City;	State;	Zip Code				
	4103 Oak Blossom Ct Houston, 7	ΓX 77059-32	265					
8 Principal occi Principal	upation / Job title (See Instruction	s)		1	yer (See Instructions) GET Services, LLC			
4 Date	5 Full name of contributor	out-of-s	tate PAC		7 Amount of contribution (\$)			
04/20/2024	James Grady Prestage				\$100.00			
	6 Contributor address;	City;	State;	Zip Code				
	36 Big Trl Missouri City, TX 774	459-6827						
8 Principal occ	upation / Job title (See Instruction	s)		9 Emplo	yer (See Instructions)			

SCHEDULE A1

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

2 FILER NAME Dexter Lorance-Navario McCoy 4 Date 5 Full name of contributor 6 Contributor address; City; State; Zip Code 1111 Mysterium Ln Rosenberg, TX 77469-2059 8 Principal occupation / Job title (See Instructions) 4 Date 5 Full name of contributor 6 Contributor address; City; State; Zip Code 1111 Mysterium Ln Rosenberg, TX 77469-2059 8 Principal occupation / Job title (See Instructions) 4 Date 5 Full name of contributor 6 Contributor address; City; State; Zip Code PO Box 690287 San Antonio, TX 78269-0287 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 9 Employer (See Instructions) 9 Employer (See Instructions) 17 Amount of contribution (\$) 18 Principal occupation / Job title (See Instructions) 19 Employer (See Instructions) 9 Employer (See Instructions) 9 Employer (See Instructions) 10 Employer (See Instructions) 11 Amount of contribution (\$) 12 Amount of contribution (\$) 13 Filer ID (Ethics Commission Filers) 7 Amount of contribution (\$) 14 Date 15 Full name of contributor 16 Contributor address; City; State; Zip Code 17 Amount of contribution (\$) 18 Principal occupation / Job title (See Instructions) 19 Employer (See Instructions) 10 Employer (See Instructions) 11 Amount of contribution (\$) 12 Employer (See Instructions) 13 Principal occupation / Job title (See Instructions) 14 Date 15 Full name of contributor 16 Contributor address; City; State; Zip Code 17 Amount of contribution (\$) 18 Principal occupation / Job title (See Instructions) 18 Principal occupation / Job title (See Instructions) 29 Employer (See Instructions) 20 Employer (See Instructions) 21 Amount of contribution (\$) 22 Employer (See Instructions) 23 Employer (See Instructions) 24 Date 25 Full name of contributor 26 Contributor address; City; State; Zip Code 27 Amount of contribution (\$) 28 Employer (See Instructions)
4 Date 04/19/2024 5 Full name of contributor
04/19/2024 Patrick Quincy 6 Contributor address; City; State; Zip Code 1111 Mysterium Ln Rosenberg, TX 77469-2059 8 Principal occupation / Job title (See Instructions) 4 Date 5 Full name of contributor Raba-Kistner PAC 6 Contributor address; City; State; Zip Code PO Box 690287 San Antonio, TX 78269-0287 8 Principal occupation / Job title (See Instructions) 4 Date 5 Full name of contributor O4/25/2024 Sanjay Ramabhadran 6 Contributor address; City; State; Zip Code 13718 Bayou Parkway Ct Houston, TX 77077-1129 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 9 Employer (See Instructions) 9 Employer (See Instructions) 9 Employer (See Instructions) \$2,500.00 \$7 Amount of contribution (\$) \$2,500.00 \$8 Principal occupation / Job title (See Instructions) Engineer 7 Amount of contribution (\$) \$1,500.00 \$1,500.00 6 Contributor address; City; State; Zip Code 8 Principal occupation / Job title (See Instructions) Engineer 7 Amount of contribution (\$) \$1,500.00 \$1,500.00
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 4 Date 5 Full name of contributor
B Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)
8 Principal occupation / Job title (See Instructions) 4 Date 04/20/2024 Raba-Kistner PAC 6 Contributor address; City; State; Zip Code PO Box 690287 San Antonio, TX 78269-0287 8 Principal occupation / Job title (See Instructions) 4 Date 5 Full name of contributor Out-of-state PAC Sanjay Ramabhadran 6 Contributor address; City; State; Zip Code 13718 Bayou Parkway Ct Houston, TX 77077-1129 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 7 Amount of contribution (\$) \$2,500.00 8 Principal occupation / Job title (See Instructions) 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) VERSA Infrastructure 4 Date 5 Full name of contributor Out-of-state PAC 7 Amount of contribution (\$) VERSA Infrastructure 4 Date 6 Contributor address; City; State; Zip Code 81,500.00 \$1,500.00
4 Date 04/20/2024 Raba-Kistner PAC 6 Contributor address; City; State; Zip Code PO Box 690287 San Antonio, TX 78269-0287 8 Principal occupation / Job title (See Instructions) 4 Date 04/25/2024 Sanjay Ramabhadran 6 Contributor address; City; State; Zip Code 13718 Bayou Parkway Ct Houston, TX 77077-1129 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 7 Amount of contribution (\$) \$2,500.00 \$2,500.00 8 Principal occupation / Job title (See Instructions) Engineer 9 Employer (See Instructions) VERSA Infrastructure 4 Date 03/13/2024 Randy Randermann 6 Contributor address; City; State; Zip Code 8 Randy Randermann 6 Contributor address; City; State; Zip Code 8 Principal occupation / Job title (See Instructions) VERSA Infrastructure 7 Amount of contribution (\$) \$1,500.00
Raba-Kistner PAC \$1,500.00
04/20/2024 Raba-Kistner PAC 6 Contributor address; City; State; Zip Code PO Box 690287 San Antonio, TX 78269-0287 8 Principal occupation / Job title (See Instructions) 4 Date 04/25/2024 Sanjay Ramabhadran 6 Contributor address; City; State; Zip Code 13718 Bayou Parkway Ct Houston, TX 77077-1129 8 Principal occupation / Job title (See Instructions) Engineer 4 Date 5 Full name of contributor Out-of-state PAC 17 Amount of contribution (\$) \$2,500.00 9 Employer (See Instructions) VERSA Infrastructure 4 Date 5 Full name of contributor Out-of-state PAC 7 Amount of contribution (\$) \$1,500.00 \$1,500.00
6 Contributor address; City; State; Zip Code PO Box 690287 San Antonio, TX 78269-0287 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 4 Date 04/25/2024 Sanjay Ramabhadran 6 Contributor address; City; State; Zip Code 13718 Bayou Parkway Ct Houston, TX 77077-1129 8 Principal occupation / Job title (See Instructions) Engineer 9 Employer (See Instructions) \$2,500.00 \$2,500.00 \$2,500.00 \$2,500.00 \$2,500.00 \$1,500.00 \$1,500.00 \$1,500.00
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 4 Date 04/25/2024 Sanjay Ramabhadran 6 Contributor address; City; State; Zip Code 13718 Bayou Parkway Ct Houston, TX 77077-1129 8 Principal occupation / Job title (See Instructions) Engineer 9 Employer (See Instructions) VERSA Infrastructure 4 Date 03/13/2024 Randy Randermann 6 Contributor address; City; State; Zip Code 5 Full name of contributor Out-of-state PAC 7 Amount of contribution (\$) \$1,500.00
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 4 Date 04/25/2024 5 Full name of contributor
Sanjay Ramabhadran 6 Contributor address; City; State; Zip Code 13718 Bayou Parkway Ct Houston, TX 77077-1129 8 Principal occupation / Job title (See Instructions) Engineer 9 Employer (See Instructions) VERSA Infrastructure 4 Date 5 Full name of contributor O3/13/2024 Randy Randermann 6 Contributor address; City; State; Zip Code \$1,500.00
Sanjay Ramabhadran 6 Contributor address; City; State; Zip Code 13718 Bayou Parkway Ct Houston, TX 77077-1129 8 Principal occupation / Job title (See Instructions) Engineer 9 Employer (See Instructions) VERSA Infrastructure 4 Date 5 Full name of contributor O3/13/2024 Randy Randermann 6 Contributor address; City; State; Zip Code \$1,500.00
6 Contributor address; City; State; Zip Code 13718 Bayou Parkway Ct Houston, TX 77077-1129 8 Principal occupation / Job title (See Instructions) Engineer 4 Date 5 Full name of contributor O3/13/2024 Randy Randermann 6 Contributor address; City; State; Zip Code \$2,300.00 9 Employer (See Instructions) VERSA Infrastructure 7 Amount of contribution (\$) \$1,500.00
8 Principal occupation / Job title (See Instructions) Engineer 9 Employer (See Instructions) VERSA Infrastructure 4 Date 5 Full name of contributor O3/13/2024 Randy Randermann 6 Contributor address; City; State; Zip Code 13718 Bayou Parkway Ct Houston, TX 77077-1129 9 Employer (See Instructions) VERSA Infrastructure 7 Amount of contribution (\$)
8 Principal occupation / Job title (See Instructions) Engineer 9 Employer (See Instructions) VERSA Infrastructure 4 Date 5 Full name of contributor O3/13/2024 Randy Randermann 6 Contributor address; City; State; Zip Code 9 Employer (See Instructions) VERSA Infrastructure 7 Amount of contribution (\$)
Engineer VERSA Infrastructure 4 Date 5 Full name of contributor out-of-state PAC 7 Amount of contribution (\$) 03/13/2024 Randy Randermann \$1,500.00 6 Contributor address; City; State; Zip Code
4 Date 5 Full name of contributor out-of-state PAC 7 Amount of contribution (\$) 03/13/2024 Randy Randermann \$1,500.00 6 Contributor address; City; State; Zip Code
03/13/2024 Randy Randermann \$1,500.00 6 Contributor address; City; State; Zip Code
6 Contributor address; City; State; Zip Code
903 Windsor Woods Ln Katy, TX 77494-5000
8 Principal occupation / Job title (See Instructions) Engineer 9 Employer (See Instructions) Brown & Gay
4 Date 5 Full name of contributorout-of-state PAC 7 Amount of contribution (\$)
04/19/2024 Vijaya Rapolu \$5,000.00
6 Contributor address; City; State; Zip Code
27822 Acacia Glen Ln Katy, TX 77494-3234
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)
Civil Engineer Kavi Consulting Inc.

SCHEDULE A1

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The I	nstruction Guide explains how	Total pages Schedule A1: not available			
2 FILER NAME Dexter Lorance	-Navario McCoy			3 Filer ID (Ethics Commission I	Filers)
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
04/22/2024	Philip Rehak				\$150.00
	6 Contributor address;	City; State;	Zip Code		\$150.00
	22414 Slate Oaks Ln Richmond,	TX 77469-1808			
8 Principal occ	upation / Job title (See Instruction	s)	9 Emplo	yer (See Instructions)	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
02/06/2024	James Robbins				\$1,000.00
	6 Contributor address;	City; State;	Zip Code		4-7 -1
	565 E Hillsboro Blvd Deerfield I	Beach, FL 33441-3543			
	upation / Job title (See Instruction Management	s)	1	yer (See Instructions) .shBritt	**************************************
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
04/15/2024	James Robbins				\$1,500.00
	6 Contributor address;	City; State;	Zip Code		
	565 E Hillsboro Blvd Deerfield E	Beach, FL 33441-3543			
	upation / Job title (See Instruction Management	s)		yer (See Instructions) shBritt	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
04/20/2024	Ali Roshanfekr				\$25.00
	6 Contributor address;	City; State;	Zip Code		
	14127 Kimberley Ln Houston, T.	X 77079-3240			
8 Principal occupation / Job title (See Instructions) Engineer 9 E		1 .	yer (See Instructions) ascade Civil Services LLC		
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
03/29/2024	Lina Sabouni				\$2,500.00
	6 Contributor address;	City; State;	Zip Code		·
	23 Palm Blvd Missouri City, TX	77459-4499			
8 Principal occu Principal in	upation / Job title (See Instructions Charge	s)		yer (See Instructions) utoarch Architects	

SCHEDULE A1

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The Ins	struction Guide explains how to complete this form.	1 Total pages Schedule A1: not available
2 FILER NAME Dexter Lorance-N	avario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributorout-of-state PAC	7 Amount of contribution (\$)
03/27/2024	Walt Sass	\$2,500.00
	6 Contributor address; City; State; Zip Code	
	2707 Autumn Lake Dr Katy, TX 77450-5781	
8 Principal occup Principal		yer (See Instructions) /eisser Engineering & Surveying
4 Date	5 Full name of contributorout-of-state PAC	7 Amount of contribution (\$)
03/17/2024	Daniel Signorelli	\$2,500.00
	6 Contributor address; City; State; Zip Code	
	1401 Woodlands Pkwy The Woodlands, TX 77380-1122	
8 Principal occup	, , ,	yer (See Instructions)
CEO		he Signorelli Company
4 Date	5 Full name of contributorout-of-state PAC	7 Amount of contribution (\$)
03/25/2024	Bobby Singh	\$10,000.00
	6 Contributor address; City; State; Zip Code	
	10448 Westoffice Dr Houston, TX 77042-5309	
8 Principal occup Consultant	, , , , , , , , , , , , , , , , , , , ,	yer (See Instructions) ani Consultants LP
4 Date	5 Full name of contributorout-of-state PAC	7 Amount of contribution (\$)
04/17/2024	Terri Southall	\$50.00
	6 Contributor address; City; State; Zip Code	
	23726 Masterson Garden Ln Richmond, TX 77469-3697	
8 Principal occup	ation / Job title (See Instructions) 9 Employ	yer (See Instructions)
4 Date	5 Full name of contributorout-of-state PAC	7 Amount of contribution (\$)
04/20/2024	Terri Southall	\$25.00
	6 Contributor address; City; State; Zip Code	
	23726 Masterson Garden Ln Richmond, TX 77469-3697	
8 Principal occup	pation / Job title (See Instructions) 9 Employ	yer (See Instructions)

SCHEDULE A1

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The Instruction Guide explains how to complete this form.			Total pages Schedule A1: not available		
2 FILER NAME				3 Filer ID (Ethics Commission F	ilers)
Dexter Lorance-N	·				
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
04/18/2024	Jerry Sowells				\$500.00
r	6 Contributor address;	City; State;	Zip Code		
	18022 Blue Ridge Shores Dr Cyp	ress, TX 77433-7056			
8 Principal occup	pation / Job title (See Instructions	s)	9 Emplo	yer (See Instructions)	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
04/20/2024	Jerry Sowells				\$75.00
	6 Contributor address;	City; State;	Zip Code		******
	18022 Blue Ridge Shores Dr Cyp	ress, TX 77433-7056			
8 Principal occup	pation / Job title (See Instructions	3)	9 Emplo	yer (See Instructions)	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
04/16/2024	Randy Sparks				\$1,000.00
	6 Contributor address;	City; State;	Zip Code		
	21020 Park Row Dr Katy, TX 774	149-5020			
8 Principal occup Engineer	ation / Job title (See Instructions	5)		yer (See Instructions) rooks & Sparks, Inc	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
04/16/2024	Herbert Stone				\$50.00
	6 Contributor address;	City; State;	Zip Code		
	4828 Loop Central Dr Houston, T	X 77081-2212			
8 Principal occup	ation / Job title (See Instructions	3)	9 Employ	yer (See Instructions)	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
04/03/2024	Jay Sunderwala				\$2,500.00
	6 Contributor address;	City; State;	Zip Code		
	16602 Arbor Oak Leaf Ct Cypress	s, TX 77433-0134			
8 Principal occup	ation / Job title (See Instructions	3)		yer (See Instructions)	
Engineer	· · · · · · · · · · · · · · · · · · ·		N	inyo & Moore	

SCHEDULE A1

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

The I	nstruction Guide explains how t	o complete this fo	orm.	1 Total pages Schedule A1: not available	
2 FILER NAME Dexter Lorance	-Navario McCoy			3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
03/28/2024	Issam Talje				\$500.00
	6 Contributor address;	City; State;	Zip Code		
	12042 Miramar Shores Dr Housto	n, TX 77065-3944			
8 Principal occ Vice Presid	upation / Job title (See Instructions lent)		yer (See Instructions) Voolpert Inc.	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
04/18/2024	Haddis Tewolde			\$	1,500.00
	6 Contributor address;	City; State;	Zip Code		
	16522 Teak Dr Missouri City, TX	77489-3928			
8 Principal occ Engineer	upation / Job title (See Instructions)		yer (See Instructions) .ll-Terra	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
04/20/2024	Andrew Throgmorton				\$50.00
	6 Contributor address;	City; State;	Zip Code		
	5806 Grand Saline Dr Richmond,	TX 77469-6172			
8 Principal occ	upation / Job title (See Instructions)	9 Emplo	yer (See Instructions)	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
06/13/2024	Todd Thurber			\$:	3,000.00
	6 Contributor address;	City; State;	Zip Code		
	2929 Briarpark Dr Ste 600 Housto	on, TX 77042-3768			
8 Principal occ Engineer	upation / Job title (See Instructions)		yer (See Instructions) JA Engineering, Inc.	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
03/13/2024	TREPAC/Texas Association of Re	ealtors Political Action	on Committee	\$	5,000.00
	6 Contributor address;	City; State;	Zip Code		
	PO Box 2246 Austin, TX 78768-2	246			
8 Principal occ	upation / Job title (See Instructions	;)	9 Emplo	yer (See Instructions)	PH-10-70-11-11-11-11-11-11-11-11-11-11-11-11-11

SCHEDULE A1

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

The li	nstruction Guide explains how	to complete this fo	rm.	1 Total pages Schedule A1: not available	**************************************
2 FILER NAME Dexter Lorance-	Navario McCoy			3 Filer ID (Ethics Commission Filers)	
4 Date	5 Full name of contributor	✓ out-of-state PAC	C00457853	7 Amount of contribution (\$)	
04/05/2024	TSVC, Inc. Political Action Committee (Terracon PAC)				\$2,500.00
	6 Contributor address;	City; State;	Zip Code		<i>\$2,500.00</i>
	10841 S Ridgeview Rd Olathe, I	KS 66061-6456			
8 Principal occu	upation / Job title (See Instruction	s)	9 Emplo	yer (See Instructions)	
4 Date	5 Full name of contributor	out-of-state PAC	1	7 Amount of contribution (\$)	
04/01/2024	Asim Tufail				\$2,500.00
	6 Contributor address;	City; State;	Zip Code		4,
	5447 Larkin St Houston, TX 770	07-1803			
8 Principal occu Engineer	pation / Job title (See Instruction	s)	I	yer (See Instructions) Blackline Engineering	**************************************
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
02/27/2024	Llarance Turner				\$2,500.00
	6 Contributor address;	City; State;	Zip Code		
	1311 Lodge Ct Missouri City, T	X 77489-1615			
8 Principal occu Surveyor/Ei	pation / Job title (See Instruction ngineer	s)		yer (See Instructions) aluza Inc	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
03/22/2024	Ahmed Valdez				\$2,500.00
	6 Contributor address;	City; State;	Zip Code		
	15310 Skyhill Dr Cypress, TX 7	7433-4073			
8 Principal occu Engineer	pation / Job title (See Instruction	s)		yer (See Instructions) .KV	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
02/27/2024	Judith VanHorn				\$25.00
	6 Contributor address;	City; State;	Zip Code		
	3222 Canella Cv Richmond, TX	77469-2118			
8 Principal occu	pation / Job title (See Instruction	s)	9 Emplo	yer (See Instructions)	

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: not available		
2 FILER NAME				3 Filer ID (Ethics Commission F	ilers)
Dexter Lorance-N	avario McCoy				
4 Date	5 Full name of contributorout-d	of-state PAC		7 Amount of contribution (\$)	
04/20/2024	Pawan Vuppala				\$50.00
	6 Contributor address; City;	State;	Zip Code		
	3834 Desert Springs Ln Fulshear, TX 7744	1-1716			
8 Principal occup	ation / Job title (See Instructions)		9 Employ	yer (See Instructions)	
4 Date	5 Full name of contributorout-c	of-state PAC		7 Amount of contribution (\$)	
05/29/2024	Joel Walker				\$1,000.00
	6 Contributor address; City;	State;	Zip Code		
	6510 Abilene Dr Katy, TX 77493-3002				
8 Principal occup	ation / Job title (See Instructions)			yer (See Instructions)	
Principal			W	est Belt Surveying, Inc.	
4 Date	5 Full name of contributorout-6	of-state PAC		7 Amount of contribution (\$)	
04/20/2024	Rainey Webster				\$125.00
	6 Contributor address; City;	State;	Zip Code		
	21114 Idle Wind Dr Richmond, TX 77406	-7161			
8 Principal occup	ation / Job title (See Instructions)		9 Employ	yer (See Instructions)	
4 Date	5 Full name of contributorout-	of-state PAC		7 Amount of contribution (\$)	
04/20/2024	Mary Whittaker				\$50.00
	6 Contributor address; City;	State;	Zip Code		
	226 Ormond Village Dr Destrehan, LA 700	047-3716			
8 Principal occup	ation / Job title (See Instructions)		9 Employ	yer (See Instructions)	
4 Date	5 Full name of contributorout-6	of-state PAC		7 Amount of contribution (\$)	
03/27/2024	Gerald Wilson				\$350.00
	6 Contributor address; City;	State;	Zip Code		
	4611 Biggam Dr Fresno, TX 77545-2172				
8 Principal occup	ation / Job title (See Instructions)		9 Employ	yer (See Instructions)	

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: not available		
2 FILER NAM	IE			3 Filer ID (Ethics Commission Fi	lers)
Dexter Lorance	ce-Navario McCoy				,
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
04/20/2024	Greg Wine				\$25.00
	6 Contributor address;	City; State;	Zip Code		•
	10350 Richmond Ave Houston,	TX 77042-4129			
8 Principal oc	cupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
04/20/2024	Janice Wright				\$35.00
	6 Contributor address;	City; State;	Zip Code		
	10026 Towne Brook Ln Sugar L	and, TX 77498-1643			
8 Principal oc	cupation / Job title (See Instruction	is)	9 Emplo	yer (See Instructions)	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
04/19/2024	Dietra Young				\$25.00
	6 Contributor address;	City; State;	Zip Code		
	18815 Allendale Forest Dr Richr	nond, TX 77407-3464			
8 Principal oc	cupation / Job title (See Instruction	s)	9 Employ	yer (See Instructions)	
4 Date	5 Full name of contributor	out-of-state PAC	1	7 Amount of contribution (\$)	
02/29/2024	Anwar Zahid				\$5,000.00
	6 Contributor address;	City; State;	Zip Code		
	19 Lake Como Dr Missouri City,	TX 77459-1484			
8 Principal occ Engineer	cupation / Job title (See Instruction	s)		yer (See Instructions) nfraTECH	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
03/20/2024	Giti Zarinkelk				\$1,500.00
	6 Contributor address;	City; State;	Zip Code		
	18 Berry Blossom Dr Spring, TX	77380-3388			
8 Principal occ Engineer/o	cupation / Job title (See Instruction	s)		yer (See Instructions) arinkelk Engineering Services Inc.	
				5 -5	

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 The Instruction Guid	Loan/Repayment/Reim Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	al act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.		
1 Total pages Schedule F1:	2 FILER NAME		3 File	er ID (Ethics Commission Filers)		
not available	Dexter Lorance-Navario McCo	у				
4 Date	5 Payee name					
01/28/2024	ActBlue					
6 Amount (\$) \$4.95	7 Payee address; 366 Summer St Somerville, MA	City; A 02144-3132	State:	Zip Code		
8 PURPOSE OF	(a) Category (See categories listed Fees	at the top of this schedule)	(b) Descri Service Fee	ption		
EXPENDITURE	(C) Check if travel outside of Texas	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	ot Office held		
4 Date	5 Payee name					
02/29/2024	ActBlue					
6 Amount (\$) \$304.16	7 Payee address; 366 Summer St Somerville, MA	City; A 02144-3132	State:	Zip Code		
PURPOSE OF	(a) Category (See categories listed Fees	at the top of this schedule)	(b) Descri Service Fee	ption		
EXPENDITURE	(C) Check if travel outside of Texas	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	it Office held		

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 y Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Loan/Repayment/Reim Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	al act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.			
1 Total pages Schedule F1:	2 FILER NAME		3 Fil	er ID (Ethics Commission Filers)			
not available	Dexter Lorance-Navario McCo	у		,			
4 Date	5 Payee name						
03/28/2024	ActBlue						
6 Amount (\$) \$1,189.77	7 Payee address;	City;	State:	Zip Code			
	366 Summer St Somerville, M.	A 02144-3132					
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descri	•			
PURPOSE OF	Fees		Service Fee				
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	ck if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	ht Office held			
4 Date	5 Payee name						
04/30/2024	ActBlue						
6 Amount (\$) \$1,243.81	7 Payee address; 366 Summer St Somerville, M.	City;	State:	Zip Code			
8 PURPOSE OF	(a) Category (See categories listed Fees	at the top of this schedule)	(b) Descri Service Fee	•			
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.		ck if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	ht Office held			

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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	Legal Services	Loan/Repayment/Reim Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	al act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.	
1 Total pages Schedule F1:	2 FILER NAME		3 File	er ID (Ethics Commission Filers)	
not available	Dexter Lorance-Navario McCo	У			
4 Date	5 Payee name				
01/09/2024	Amazon				
6 Amount (\$) \$191.24	7 Payee address; 410 Terry Ave N Seattle, WA 9	City; 98109-5210	State:	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Office Overhead/Rental Expense (C) Check if travel outside of Texa		(b) Descri		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	t Office held	
4 Date	5 Payee name				
01/17/2024	Amazon				
6 Amount (\$) \$84.90	7 Payee address; 410 Terry Ave N Seattle, WA 9	City; 98109-5210	State:	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Office Overhead/Rental Expense		(b) Descri	es	
9 Complete ONLY if direct expenditure to benefit C/OH	(C) Check if travel outside of Texa Candidate / Officeholder name	s. Complete Schedule T.	Office sough	k if Austin, TX, officeholder living expense t Office held	

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SCHEDULE F1

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

	EXPENDIT	TURE CATEGORIES	S FOR BOX	8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Loan/Repayment/Reir Office Overhead/Rent Polling Expense Printing Expense Salaries/Wages/Contr	al ract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
1 Total pages Schedule F1:	2 FILER NAME		3 File	er ID (Ethics Commission Filers)
not available	Dexter Lorance-Navario McCo	у		
4 Date 01/24/2024	5 Payee name			
	Amazon			
6 Amount (\$) \$212.48	7 Payee address; 410 Terry Ave N Seattle, WA 9	City; 98109-5210	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)	(b) Descri	•
EXPENDITORE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held
4 Date	5 Payee name			
04/16/2024	Amazon			
6 Amount (\$) \$133.04	7 Payee address; 410 Terry Ave N Seattle, WA 9	City; 98109-5210	State:	Zip Code
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descri	ption
PURPOSE OF	Office Overhead/Rental Expense		Office suppl	ies
EXPENDITURE	(C) Check if travel outside of Texas	s. Complete Schedule T.		k if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held

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SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment 1 Total pages Schedule F1: not available 5 Payee name 01/17/2024 6 Amount (\$) \$138.11 Purpose Office Overhead/Rental Fees Fees Food/Beverage Expense Gift/Awards/Memorials Expense Fees Gift/Awards/Memorials Expense Fees Gift/Awards/Memorials Expense Fees Gift/Awards/Memorials Expense Fees Gift/Awards/Memorials Expense Printing Expense Francy In District Travel In District Other (enter a category not listed about this form.) 3 Filler ID (Ethics Commission Fillers) 1 Total pages Schedule F1: not available 5 Payee name Best Buy 6 Amount (\$) \$138.11 Purpose Office Overhead/Rental Fees Fees Office Overhead/Rental Fees Polling Expense Printing Expense Francy In District Other (enter a category not listed about this form.) 3 Filler ID (Ethics Commission Fillers) Total pages Schedule F1: not available 5 Payee name Best Buy 6 Amount (\$) 6 Amount (\$) 6 Amount (\$) 6 Amount (\$) 7 Payee address; City; State: Zip Code 8 Purpose Office Overhead/Rental Expense Office Supplies	l
not available Dexter Lorance-Navario McCoy 4 Date 01/17/2024 Best Buy 7 Payee address; City; State: Zip Code 16980 Southwest Fwy Sugar Land, TX 77479-2350 8 PURPOSE OF EXPENDITURE (a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Office supplies	ove)
4 Date 01/17/2024 5 Payee name Best Buy 7 Payee address; City; State: Zip Code 16980 Southwest Fwy Sugar Land, TX 77479-2350 8 PURPOSE OF EXPENDITURE (a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Office supplies	
8 PURPOSE OF EXPENDITURE Best Buy 7 Payee address; City; State: Zip Code 16980 Southwest Fwy Sugar Land, TX 77479-2350 (a) Category (See categories listed at the top of this schedule) Office Supplies (b) Description Office supplies	
6 Amount (\$) \$138.11 7 Payee address; City; State: Zip Code 16980 Southwest Fwy Sugar Land, TX 77479-2350 8 PURPOSE OF EXPENDITURE (a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Office supplies	
\$138.11 16980 Southwest Fwy Sugar Land, TX 77479-2350 8 PURPOSE OF EXPENDITURE (a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Office supplies	
PURPOSE OF EXPENDITURE Office Overhead/Rental Expense Office supplies	
(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	
4 Date 5 Payee name	
05/06/2024 Black Bear Diner	
6 Amount (\$) 7 Payee address; City; State: Zip Code \$46.47 13590 University Blvd Sugar Land, TX 77479-6872	
8 PURPOSE OF (a) Category (See categories listed at the top of this schedule) Food/Beverage Expense (b) Description Lunch meeting	
EXPENDITURE (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	

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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 The Instruction Guid	Loan/Repayment/Rein Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	al act Labor	Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above)	
1 Total pages Schedule F1:	2 FILER NAME	· · · · · · · · · · · · · · · · · · ·	3 F	Filer ID (Ethics Commission Filers)	
not available	Dexter Lorance-Navario McCo	у		ŕ	
4 Date	5 Payee name				
05/08/2024	Blossom Hotel Houston				
6 Amount (\$) \$27.06	7 Payee address; 7118 Bertner Ave Houston, TX	City; 77030-4904	State	: Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Travel Out Of District		(b) Desc Event Parl	•	
	(C) Check if travel outside of Texas	s. Complete Schedule T.		eck if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sou	ght Office held	
4 Date	5 Payee name		****		
04/30/2024	Boys and Girls Club of Greater	Houston			
6 Amount (\$) \$1,000.00	7 Payee address; 815 Crosby St Houston, TX 770	City; 019-3054	State	: Zip Code	
8 PURPOSE OF	(a) Category (See categories listed Contributions/Donations Made By Candidate/Officeholder/Political Comm		(b) Desc Donation	cription	
EXPENDITURE	(C) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			eck if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sou	ght Office held	

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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services The Instruction Guid	Loan/Repayment/Rein Office Overhead/Rents Polling Expense Printing Expense Salaries/Wages/Contro de explains how to co	al act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.		
1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers)						
not available	Dexter Lorance-Navario McCo	У				
4 Date	5 Payee name	The state of the s				
01/01/2024	James Cardona					
6 Amount (\$) \$1,750.00	7 Payee address; 5216 Leeland St Houston, TX	City; 77023-2022	State:	Zip Code		
8 PURPOSE OF	(a) Category (See categories listed Consulting Expense	at the top of this schedule)	(b) Descr Consulting	•		
EXPENDITURE	(C) Check if travel outside of Texas	s. Complete Schedule T.	Chec	ck if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office soug	ht Office held		
4 Date	5 Payee name					
05/03/2024	James Cardona					
6 Amount (\$) \$4,000.00	7 Payee address; 5216 Leeland St Houston, TX 7	City; 77023-2022	State:	Zip Code		
8 PURPOSE OF	(a) Category (See categories listed Consulting Expense	at the top of this schedule)	(b) Descri Consulting	•		
EXPENDITURE	(C) Check if travel outside of Texas	s. Complete Schedule T.	Chec	ck if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	ht Office held		

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SCHEDULE F1

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

Advertising Expense Event Expense Loan/Repayment/Reimbursement Solicitation/Fundraising Expense Accounting/Banking Fees Office Overhead/Rental Transportation Equipment & Related						
Consulting Expense Food/Beverage Expense Polling Expense Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment The Instruction Guide explains how to complete this form.	·)					
1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers)						
not available Dexter Lorance-Navario McCoy						
4 Date 5 Payee name						
05/10/2024 Central Fort Bend Chamber						
6 Amount (\$) 7 Payee address; City; State: Zip Code \$1,000.00 4120 Avenue H Rosenberg, TX 77471-2833						
8 PURPOSE OF Candidate/Officeholder/Political Committee (a) Category (See categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Donation						
(C) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
9 Complete ONLY if direct candidate / Officeholder name Office sought Office held expenditure to benefit C/OH						
4 Date 5 Payee name	-					
05/31/2024 Central Fort Bend Chamber						
6 Amount (\$) 7 Payee address; City; State: Zip Code \$350.00 4120 Avenue H Rosenberg, TX 77471-2833						
8 PURPOSE OF Candidate/Officeholder/Political Committee (a) Category (See categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Donation						
EXPENDITURE (C) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	Check if Austin, TX, officeholder living expense					
9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held						

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE F1

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

	EXPENDIT	TURE 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 y Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Loan/Repayment/Rein Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	al act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.	
1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
not available	Dexter Lorance-Navario McCo	У			
4 Date	5 Payee name				
05/31/2024	Central Fort Bend Chamber				
6 Amount (\$) \$350.00	7 Payee address; 4120 Avenue H Rosenberg, TX	City;	State:	Zip Code	
8 PURPOSE OF	(a) Category (See categories listed Contributions/Donations Made By Candidate/Officeholder/Political Comm		(b) Descri Donation	ption	
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	***************************************	Office sough	t Office held	
4 Date	5 Payee name				
04/20/2024	City of Rosenberg				
6 Amount (\$) \$350.00	7 Payee address; 2220 4th St Rosenberg, TX 774	City; 171-5126	State:	Zip Code	
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descri	ption	
PURPOSE OF	Event Expense		Event permi	ts	
EXPENDITURE	(C) Check if travel outside of Texas	s. Complete Schedule T.		k if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held	

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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made E Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Loan/Repayment/Rein Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	al act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.	
1 Total pages Schedule F1:	2 FILER NAME		3 Fil	er ID (Ethics Commission Filers)	
not available	Dexter Lorance-Navario McCo	У			
4 Date 01/17/2024	5 Payee name CVS				
6 Amount (\$) \$50.00	7 Payee address; 4110 Richmond Pkwy Richmo	City; nd, TX 77469-2502	State:	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)	(b) Descri Supplies	ption	
EXPENDITORE	(C) Check if travel outside of Texas	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held	
4 Date 06/17/2024	5 Payee name Daily Gather		,		
6 Amount (\$) \$80.36	7 Payee address; 800 Sorella Ct Ste 940 Houston	City; n, TX 77024-1496	State:	Zip Code	
8 PURPOSE OF	(a) Category (See categories listed Food/Beverage Expense	at the top of this schedule)	(b) Descri Meeting	ption	
EXPENDITURE	(C) Check if travel outside of Texas	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Loan/Repayment/Reir Office Overhead/Rent Polling Expense Printing Expense Salaries/Wages/Contri de explains how to co	al act Labor	Expense Travel In District Travel Out of District Other (enter a cate	uipment & Related
1 Total pages Schedule F1:	2 FILER NAME		3 File	er ID (Ethics Com	mission Filers)
not available	Dexter Lorance-Navario McCo	у		•	•
4 Date	5 Payee name				
06/10/2024	DoubleTree by Hilton Hotel El	Paso Downtown			
6 Amount (\$) \$328.74	7 Payee address;	City;	State:	Z	ip Code
	600 N El Paso St El Paso, TX	79901-1122			
8 PURPOSE OF	(a) Category (See categories listed Travel Out Of District	at the top of this schedule)	1, ,	ption ate Party Convention	
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	k if Austin, TX, officeho	lder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt	Office held
4 Date	5 Payee name				
06/10/2024	DoubleTree by Hilton Hotel El	Paso Downtown			
6 Amount (\$) \$364.74	7 Payee address; 600 N El Paso St El Paso, TX 7	City; 79901-1122	State:	Z	ip Code
8 PURPOSE OF	(a) Category (See categories listed Travel Out Of District	at the top of this schedule)	(b) Descrip Hotel for Sta	ption te Party Convention	
EXPENDITURE	(C) Check if travel outside of Texas	s. Complete Schedule T.		k if Austin, TX, officeho	lder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt	Office held

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 B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Loan/Repayment/Reir Office Overhead/Rent Polling Expense Printing Expense Salaries/Wages/Contr de explains how to co	al act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
1 Total pages Schedule F1:	2 FILER NAME		3 File	er ID (Ethics Commission Filers)
not available	Dexter Lorance-Navario McCo	у		
4 Date	5 Payee name			
03/20/2024	Eventsured			
6 Amount (\$) \$119.20	7 Payee address; 24 S Newtown Street Rd Newt	City; own Square, PA 19073	State: 3-4114	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Event Expense		Event Insura	nce
	(C) Check if travel outside of Texa	s. Complete Schedule T.		k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held
4 Date	5 Payee name			
01/02/2024	Frost Bank			
6 Amount (\$) \$15.00	7 Payee address; PO Box 1600 San Antonio, TX	City; 78296-1600	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Fees (c) Check if travel outside of Texa		(b) Descri	•
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	

SCHEDULE F1

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

	EXPENDI	TURE CATEGORIES	FOR BOX	(8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Loan/Repayment/Reim Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	al act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) s form.
1 Total pages Schedule F1:	2 FILER NAME		3 Fi	ller ID (Ethics Commission Filers)
not available	Dexter Lorance-Navario McCo	у		
4 Date	5 Payee name			
01/08/2024	Frost Bank			
6 Amount (\$) \$15.00	7 Payee address;	City;	State:	Zip Code
	PO Box 1600 San Antonio, TX	C 78296-1600		
8 PURPOSE OF	(a) Category (See categories listed Fees	at the top of this schedule)	(b) Desci wire transfe	•
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Che	ck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office soug	ht Office held
4 Date	5 Payee name		· · · · · · · · · · · · · · · · · · ·	
01/29/2024	Frost Bank			
6 Amount (\$) \$15.00	7 Payee address;	City;	State:	Zip Code
	PO Box 1600 San Antonio, TX	78296-1600		
8 PURPOSE OF	(a) Category (See categories listed Fees	at the top of this schedule)	(b) Descr wire transfe	•
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Che	ck if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office soug	ht Office held

SCHEDULE F1

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

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	EXPENDIT	TURE CATEGORIES	FOR BOX	8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense by Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Loan/Repayment/Reir Office Overhead/Rent Polling Expense Printing Expense Salaries/Wages/Contri de explains how to co	al act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above form.	e)
1 Total pages Schedule F1:	2 FILER NAME		3 File	er ID (Ethics Commission Filers)	
not available	Dexter Lorance-Navario McCo	у			
4 Date	5 Payee name				
03/04/2024	Frost Bank				
6 Amount (\$) \$15.00	7 Payee address;	City;	State:	Zip Code	
	PO Box 1600 San Antonio, TX	78296-1600			
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descri	ption	
PURPOSE OF	Fees		wire transfer	fee	
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held	
4 Date	5 Payee name				
03/11/2024	Frost Bank				
6 Amount (\$) \$15.00	7 Payee address; PO Box 1600 San Antonio, TX	City;	State:	Zip Code	
8 PURPOSE OF	(a) Category (See categories listed Fees	at the top of this schedule)	(b) Descri	•	
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held	

SCHEDULE F1

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

	EXPENDIT	TURE CATEGORIES	FOR BOX	8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Loan/Repayment/Reim Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	al act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
1 Total pages Schedule F1:	2 FILER NAME		3 File	er ID (Ethics Commission Filers)
not available	Dexter Lorance-Navario McCo	у		
4 Date	5 Payee name			
03/18/2024	Frost Bank			
6 Amount (\$) \$15.00	7 Payee address; PO Box 1600 San Antonio, TX	City; 78296-1600	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed Fees	at the top of this schedule)	(b) Descri wire transfer	•
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held
4 Date	5 Payee name			
03/25/2024	Frost Bank			
6 Amount (\$) \$15.00	7 Payee address; PO Box 1600 San Antonio, TX	City; 78296-1600	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed Fees	at the top of this schedule)	(b) Descri wire transfer	
EXPENDITURE	(C) Check if travel outside of Texas	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	t Office held

SCHEDULE F1

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

Advertising Expense AccountingBanking Consulting Expense AccountingBanking Consulting Expense Consulting Exp			EVDENDIT	TUDE CATECODIES	FOD DOV	0/->	
Accounting/Banking Fees Food/Feverage Expense Fravel In District Travel In Distr		EXPENDITURE CATEGORIES FOR BOX 8(a)					
1 Total pages Schedule F1: not available 4 Date	Ad Cd Cd Cd	ccounting/Banking onsulting Expense ontributions/Donations Made By andidate/Officeholder/Political ommittee	Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Office Overhead/Rent Polling Expense Printing Expense Salaries/Wages/Contr	al act Labor	Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above)	
Dexter Lorance-Navario McCoy	1	Total pages Schedule F1					
6 Amount (\$) 8 PURPOSE OF EXPENDITURE 9 Complete ONLY if direct expenditure to benefit C/OH 4 Date 04/08/2024 6 Amount (\$) 8 PURPOSE EXPENDITURE 9 Candidate / Office holder name Frost Bank 7 Payee address; City; State: Zip Code (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office sought Office held 7 Payee name Frost Bank 7 Payee address; City; State: Zip Code 8 PURPOSE OF EXPENDITURE (a) Category (See categories listed at the top of this schedule) Frost Bank 7 Payee address; City; State: Zip Code 8 PURPOSE OF EXPENDITURE (a) Category (See categories listed at the top of this schedule) Frost Bank 7 Payee address; City; State: Zip Code (b) Description wire transfer fee wire transfer fee (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense 9 Complete ONLY if direct Candidate / Officeholder name Office sought Office held	_	. •	_ · · · · · -	у	3 7 11	er ib (Ethics Commission rilers)	
7 Payee address; City; State: Zip Code 8 PURPOSE OF EXPENDITURE (a) Category (See categories listed at the top of this schedule) Fees (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office sought Office sought Office held 7 Payee address; City; State: Zip Code Office held Office sought Office held PURPOSE OF EXPENDITURE (a) Category (See categories listed at the top of this schedule) Fees Candidate / Officeholder name Office sought Office sought Office held	4	Date	5 Payee name				
PURPOSE OF EXPENDITURE (a) Category (See categories listed at the top of this schedule) (b) Description wire transfer fee (c)	(04/01/2024	Frost Bank				
PURPOSE OF EXPENDITURE Co	6	` '			State:	Zip Code	
(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 4 Date	8	OF	.,	at the top of this schedule)	1''		
expenditure to benefit C/OH 4 Date		EXPENDITURE	(C) Check if travel outside of Texas	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense	
6 Amount (\$) PO Box 1600 San Antonio, TX 78296-1600 8 PURPOSE OF EXPENDITURE (a) Category (See categories listed at the top of this schedule) wire transfer fee (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense 9 Complete ONLY if direct Candidate / Officeholder name Office sought State: Zip Code (b) Description wire transfer fee (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			Candidate / Officeholder name		Office sough	t Office held	
7 Payee address; City; State: Zip Code PO Box 1600 San Antonio, TX 78296-1600 8 PURPOSE OF EXPENDITURE (a) Category (See categories listed at the top of this schedule) wire transfer fee (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense 9 Complete ONLY if direct Candidate / Officeholder name Office sought Office held	4	Date	5 Payee name				
\$15.00 PO Box 1600 San Antonio, TX 78296-1600 8 PURPOSE OF EXPENDITURE (a) Category (See categories listed at the top of this schedule) wire transfer fee (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense 9 Complete ONLY if direct Candidate / Officeholder name Office sought Office held	(04/08/2024	Frost Bank				
PURPOSE OF EXPENDITURE (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense 9 Complete ONLY if direct Candidate / Officeholder name Office sought Office held	6	` '	•	•	State:	Zip Code	
(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense 9 Complete ONLY if direct Candidate / Officeholder name Office sought Office held	8	OF		at the top of this schedule)			
		EXPENDITURE	(C) Check if travel outside of Texas	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense	
			Candidate / Officeholder name		Office sough	t Office held	

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 The Instruction Gui	Loan/Repayment/Reim Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	al act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.	
1 Total pages Schedule F1:	2 FILER NAME		3 Fil	er ID (Ethics Commission Filers)	
not available	Dexter Lorance-Navario McCo	У			
4 Date	5 Payee name				
04/15/2024	Frost Bank				
6 Amount (\$) \$15.00	7 Payee address; PO Box 1600 San Antonio, TX	City; 78296-1600	State:	Zip Code	
8 PURPOSE OF	(a) Category (See categories listed Fees	at the top of this schedule)	(b) Descri wire transfe	•	
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	ck if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office soug	nt Office held	
4 Date	5 Payee name				
04/22/2024	Frost Bank				
6 Amount (\$) \$15.00	7 Payee address; PO Box 1600 San Antonio, TX	City; 78296-1600	State:	Zip Code	
PURPOSE OF	(a) Category (See categories listed Fees	at the top of this schedule)	(b) Descri wire transfe	-	
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held	

SCHEDULE F1

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

	EXPERDIT	UKE CATEGORIES	FOR BOX	5(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 The Instruction Guid	Loan/Repayment/Reim Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	al act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
1 Total pages Schedule F1:	2 FILER NAME		3 File	er ID (Ethics Commission Filers)
not available	Dexter Lorance-Navario McCo	у		
4 Date	5 Payee name			
04/29/2024	Frost Bank			
6 Amount (\$) \$15.00	7 Payee address; PO Box 1600 San Antonio, TX	City; 78296-1600	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed Fees	at the top of this schedule)	(b) Descri	
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	t Office held
4 Date	5 Payee name			
05/03/2024	Grady Prestage Campaign			
6 Amount (\$) \$100.00	7 Payee address; PO Box 835 Missouri City, TX	City; 77459-0835	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Contributions/Donations Made By Candidate/Officeholder/Political Comm		(b) Description	otion
	(C) Check if travel outside of Texa	s. Complete Schedule T.		k if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	t Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEED	ATT	ACH ADDI1	TIONAL COPIES	OF THIS	SCHEDULE	AS NEEDE
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SCHEDULE F1

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

	EXPENDIT	TURE 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 y Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Loan/Repayment/Reim Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	il act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
1 Total pages Schedule F1:	2 FILER NAME		3 Fil	er ID (Ethics Commission Filers)
not available	Dexter Lorance-Navario McCo	у		
4 Date	5 Payee name			
01/22/2024	Н-Е-В			
6 Amount (\$) \$20.04	7 Payee address; 19988 Southwest Fwy Sugar L	City; and, TX 77479-6505	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)	(b) Descri Supplies	aption
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	ck if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	ht Office held
4 Date	5 Payee name			
01/16/2024	H-GAC			
6 Amount (\$) \$90.00	7 Payee address; PO Box 22777 Houston, TX 77	City; 7227-2777	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed Fees	at the top of this schedule)	(b) Descri Fees	iption
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	ck if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	it Office held

SCHEDULE F1

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	EXPENDIT	TURE CATEGORIES	FOR BOX	B(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Loan/Repayment/Rein Office Overhead/Rent Polling Expense Printing Expense Salaries/Wages/Contr de explains how to ce	al act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
1 Total pages Schedule F1:	2 FILER NAME		3 File	er ID (Ethics Commission Filers)
not available	Dexter Lorance-Navario McCo	у		
4 Date 06/12/2024	5 Payee name Hilton Garden Inn Washington	DC Downtown		
6 Amount (\$) \$391.33	7 Payee address; 815 14th St NW Washington, I	City; DC 20005-3301	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed Travel Out Of District	at the top of this schedule)	(b) Descri	ption for Juneteenth Whitehouse celebrat
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	t Office held
4 Date	5 Payee name			
05/03/2024	Hilton Houston Post Oak			
6 Amount (\$) \$22.00	7 Payee address; 2001 Post Oak Blvd Houston,	City; FX 77056-4401	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed Travel Out Of District	at the top of this schedule)	(b) Descrip Event parkin	
EXPENDITURE	(C) Check if travel outside of Texas	s. Complete Schedule T.	Check	k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	t Office held

SCHEDULE F1

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

	EXPENDIT	URE 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 The Instruction Guid	Loan/Repayment/Rein Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	al act Labor	Solicitation/Fundraising E Transportation Equipmer Expense Travel In District Travel Out of District Other (enter a category r form.	nt & Related
1 Total pages Schedule F1:	2 FILER NAME		3 Fi	er ID (Ethics Commission	on Filers)
not available	Dexter Lorance-Navario McCo	у			
4 Date	5 Payee name		<u></u>	A	
06/03/2024	Houston Furniture Bank				
6 Amount (\$) \$1,000.00	7 Payee address; 8220 Mosley Rd Houston, TX	City; 77075-1110	State:	Zip Cod	е
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Contributions/Donations Made By Candidate/Officeholder/Political Comm	nittee	(b) Descr Donation	iption	
	(C) Check if travel outside of Texas	s. Complete Schedule T.		ck if Austin, TX, officeholder livir	ng expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office soug	ht Offic	ce held
4 Date	5 Payee name				
04/20/2024	Houston Trackless Train				
6 Amount (\$) \$1,344.10	7 Payee address; 2426 Crossmill Ln Katy, TX 77	City; 7450-6794	State:	Zip Cod	e
8 PURPOSE OF	(a) Category (See categories listed Event Expense	at the top of this schedule)	(b) Descr Trackless tr	iption ain, Bouncehouse	
EXPENDITURE	(C) Check if travel outside of Texas	s. Complete Schedule T.	Che	ck if Austin, TX, officeholder livin	ng expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office soug	ht Offic	ce held

SCHEDULE F1

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

	EXPENDI	TURE CATEGORIES	FOR BOX	8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Loan/Repayment/Reim Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	ıl act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
1 Total pages Schedule F1:	2 FILER NAME		3 Fil	er ID (Ethics Commission Filers)
not available	Dexter Lorance-Navario McCo	ру		
4 Date	5 Payee name	X-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1		
01/29/2024	HP Instant Ink			
6 Amount (\$) \$7.57	7 Payee address; 1501 Page Mill Rd Palo Alto, 0	City; CA 94304-1126	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)	(b) Descri Printer ink	iption
CXI LIVERIONE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	ck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	ht Office held
4 Date	5 Payee name			
02/27/2024	HP Instant Ink			
6 Amount (\$) \$7.57	7 Payee address; 1501 Page Mill Rd Palo Alto, (City; CA 94304-1126	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)	(b) Descri Printer ink	ption
LAI LIADITORE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	ck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	ht Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Revised 1/1/2024

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 The Instruction Gui	Loan/Repayment/Reim Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	al act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above)	
1 Total pages Schedule F1:	2 FILER NAME		3 Fi	ler ID (Ethics Commission Filers)	
not available	Dexter Lorance-Navario McCo	у			
4 Date	5 Payee name				
03/27/2024	HP Instant Ink				
6 Amount (\$) \$7.57	7 Payee address; 1501 Page Mill Rd Palo Alto, (City; CA 94304-1126	State:	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)	(b) Descr Printer ink	iption	
EXPENDITORE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Che	ck if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office soug	ht Office held	
4 Date	5 Payee name				
04/29/2024	HP Instant Ink				
6 Amount (\$) \$7.57	7 Payee address; 1501 Page Mill Rd Palo Alto, (City; CA 94304-1126	State:	Zip Code	
8 PURPOSE OF	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)	(b) Descr Printer ink	iption	
EXPENDITURE	(C) Check if travel outside of Texas	s. Complete Schedule T.	Che	ck if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office soug	ht Office held	

SCHEDULE F1

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	EXPENDIT	URE CATEGORIES	FOR BOX	8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Fees Food/Beverage Expense y Gift/Awards/Memorials Expense	Salaries/Wages/Contra	al act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME		3 Fi	ler ID (Ethics Commission Filers)
not available	Dexter Lorance-Navario McCoy	Y		
4 Date	5 Payee name			
05/28/2024	HP Instant Ink			
6 Amount (\$) \$7.57	7 Payee address; 1501 Page Mill Rd Palo Alto, C	City; A 94304-1126	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed a Office Overhead/Rental Expense	at the top of this schedule)	(b) Descr Printer ink	iption
EXTENDITORE	(C) Check if travel outside of Texas	. Complete Schedule T.	Che	ck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office soug	ht Office held
4 Date	5 Payee name			
01/08/2024	Human Age Digital			
6 Amount (\$) \$1,800.00	7 Payee address; 2700 Post Oak Blvd Fl 21 Hous	City; ton, TX 77056-5798	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed a Advertising Expense	at the top of this schedule)	(b) Descr Digital Adv	•
EXPENDITURE	(C) Check if travel outside of Texas	. Complete Schedule T.	Che	ck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office soug	ht Office held

SCHEDULE F1

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

Human Age Digital Human Age Digital Payee address; City; State: Zip Code Z700 Post Oak Blvd Fl 21 Houston, TX 77056-5798		EXPENDI	TURE CATEGORIES	FOR BOX	8(a)	
Dexter Lorance-Navario McCoy 4 Date 02/14/2024 5 Payee name Human Age Digital 6 Amount (\$) \$10,000.00 7 Payee address; City; State: Zip Code 2700 Post Oak Blvd Fl 21 Houston, TX 77056-5798 8 PURPOSE OF EXPENDITURE (c) Check if travel outside of Texas. Complete Schedule T. Office sought Office held 9 Complete ONLY if direct expenditure to benefit C/OH 4 Date 04/03/2024	Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee	Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services	Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra	al act Labor	Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above)	
4 Date 02/14/2024 6 Amount (\$) 7 Payee address; City; State: Zip Code 8 PURPOSE OF EXPENDITURE (a) Category (See categories listed at the top of this schedule) Advertising Expense (c) Check if travel outside of Texas. Complete Schedule T. 4 Date 04/03/2024 5 Payee name Human Age Digital (b) Description Digital Advertising (c) Check if travel outside of Texas. Complete Schedule T. Candidate / Office hold 7 Payee address; City; State: Zip Code 8 PURPOSE 04/03/2024 6 Amount (\$) \$2,500.00 7 Payee address; City; State: Zip Code 8 PURPOSE OF EXPENDITURE (a) Category (See categories listed at the top of this schedule) Advertising Expense (c) City; State: Zip Code (b) Description Digital Advertising (b) Description Digital Advertising (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	1 Total pages Schedule F1:	2 FILER NAME		3 File	er ID (Ethics Commission Filers)	
Human Age Digital	not available	Dexter Lorance-Navario McCo	у			
6 Amount (\$) \$10,000.00 7 Payee address; City; State: Zip Code 2700 Post Oak Blvd Fl 21 Houston, TX 77056-5798 8 PURPOSE OF EXPENDITURE 9 Complete ONLY if direct expenditure to benefit C/OH 4 Date O4/03/2024 6 Amount (\$) \$2,500.00 8 PURPOSE OF EXPENDITURE 9 Complete ONLY if direct expenditure to benefit C/OH 4 Date O4/03/2024 6 Amount (\$) \$2,500.00 8 PURPOSE OF EXPENDITURE (a) Category (See categories listed at the top of this schedule) (b) Description Digital Advertising Office sought Office held 7 Payee address; City: State: Zip Code 2700 Post Oak Blvd Fl 21 Houston, TX 77056-5798 8 PURPOSE OF EXPENDITURE (a) Category (See categories listed at the top of this schedule) (b) Description Digital Advertising Expense (a) Category (See categories listed at the top of this schedule) (b) Description Digital Advertising Expense (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense 9 Complete ONLY if direct Candidate / Officeholder name Office sought Office held	4 Date	5 Payee name				
Second	02/14/2024	Human Age Digital				
PURPOSE OF EXPENDITURE Advertising Expense Advertising Expense Digital Advertising	6 Amount (\$) \$10,000.00		·	State:	Zip Code	
(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 4 Date 04/03/2024	OF	1	at the top of this schedule)	1. /	•	
expenditure to benefit C/OH 4 Date 04/03/2024 5 Payee name Human Age Digital 6 Amount (\$) \$2,500.00 7 Payee address; City; State: Zip Code 2700 Post Oak Blvd Fl 21 Houston, TX 77056-5798 8 PURPOSE OF EXPENDITURE (a) Category (See categories listed at the top of this schedule) Advertising Expense (b) Description Digital Advertising (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense 9 Complete ONLY if direct Candidate / Officeholder name Office sought Office held	EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense	
Human Age Digital 6 Amount (\$) 7 Payee address; City; State: Zip Code 2700 Post Oak Blvd Fl 21 Houston, TX 77056-5798 8 PURPOSE OF EXPENDITURE (a) Category (See categories listed at the top of this schedule) Advertising Expense (b) Description Digital Advertising (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense 9 Complete ONLY if direct Candidate / Officeholder name Office sought Oddress Oddress	9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held	
7 Payee address; City; State: Zip Code \$2,500.00 2700 Post Oak Blvd Fl 21 Houston, TX 77056-5798 8 PURPOSE OF EXPENDITURE (a) Category (See categories listed at the top of this schedule) Advertising Expense (b) Description Digital Advertising (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense 9 Complete ONLY if direct Candidate / Officeholder name Office sought Odde	4 Date	5 Payee name				
\$2,500.00 2700 Post Oak Blvd Fl 21 Houston, TX 77056-5798 8 PURPOSE OF EXPENDITURE (a) Category (See categories listed at the top of this schedule) Advertising Expense (b) Description Digital Advertising (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense 9 Complete ONLY if direct Candidate / Officeholder name Office sought Office held	04/03/2024	Human Age Digital				
PURPOSE OF EXPENDITURE Advertising Expense Digital Advertising Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held	6 Amount (\$) \$2,500.00		·	State:	Zip Code	
(C) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense 9 Complete ONLY if direct Candidate / Officeholder name Office sought Office held			at the top of this schedule)	1	•	
	EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense	
	9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held	

SCHEDULE F1

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	EXPENDIT	TURE CATEGORIES	FOR BOX	8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Loan/Repayment/Reir Office Overhead/Rent Polling Expense Printing Expense Salaries/Wages/Contr de explains how to co	al act Labor	Transportation Expense Travel In Distric Travel Out of D Other (enter a c	
1 Total pages Schedule F1:	2 FILER NAME		3 File	er ID (Ethics Co	ommission Filers)
not available	Dexter Lorance-Navario McCo	у		(2	
4 Date	5 Payee name				
04/20/2024	Jaguar Tent & Events LLC				
6 Amount (\$) \$1,556.71	7 Payee address; 17016 Bamwood Dr Houston,	City; TX 77090-2428	State:		Zip Code
8 PURPOSE OF	(a) Category (See categories listed Event Expense	at the top of this schedule)		ption , Chairs rentals	
EXPENDITURE	(C) Check if travel outside of Texas	s. Complete Schedule T.	Chec	k if Austin, TX, office	eholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt	Office held
4 Date	5 Payee name			-	
01/11/2024	Jimmy Johns				
6 Amount (\$) \$106.63	7 Payee address; 3623 S Main St Ste 114 Staffor	City; d, TX 77477-5406	State:		Zip Code
8 PURPOSE OF	(a) Category (See categories listed Food/Beverage Expense	at the top of this schedule)	(b) Descri Lunch meeti	•	
EXPENDITURE	(C) Check if travel outside of Texas	s. Complete Schedule T.	Chec	k if Austin, TX, office	eholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt	Office held

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 The Instruction Gui	Loan/Repayment/Reim Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	al act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.	
1 Total pages Schedule F1:	2 FILER NAME		3 File	er ID (Ethics Commission Filers)	
not available	Dexter Lorance-Navario McCo	ny			
4 Date	5 Payee name				
05/21/2024	Juawn Jackson for Georgia Ho	use			
6 Amount (\$) \$200.00	7 Payee address; 5580 Thomaston Rd Macon, G	City; A 31220-8106	State:	Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed Contributions/Donations Made By Candidate/Officeholder/Political Communications) (c) Check if travel outside of Texas	nittee	(b) Description	ption k if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough		
4 Date 04/20/2024	5 Payee name Kickin' Crawfish, LLC				
6 Amount (\$) \$5,850.00	7 Payee address; 16218 Waiting Spring Cir Hou	City; ston, TX 77095-4548	State:	Zip Code	
8 PURPOSE OF	(a) Category (See categories listed Food/Beverage Expense	at the top of this schedule)	(b) Descri Catering	ption	
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	t Office held	

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SCHEDULE F1

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	EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Loan/Repayment/Reim Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	il act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.		
1 Total pages Schedule F1:	2 FILER NAME		3 File	er ID (Ethics Commission Filers)		
not available	Dexter Lorance-Navario McCo	у				
4 Date	5 Payee name					
04/20/2024	Kwik Covers					
6 Amount (\$) \$296.60	7 Payee address; 811 Ridge Rd Webster, NY 14:	City; 580-2401	State:	Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Event Expense	at the top of this schedule)	(b) Descri	•		
EXPENDITURE	(C) Check if travel outside of Texas	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	t Office held		
4 Date	5 Payee name					
06/11/2024	Metro Supermarket					
6 Amount (\$) \$15.00	7 Payee address; 2130 P St NW Ste 5 Washingto	City; on, DC 20037-1035	State:	Zip Code		
8 PURPOSE OF	(a) Category (See categories listed Food/Beverage Expense	at the top of this schedule)	(b) Descri Meal while t	•		
EXPENDITURE	(C) Check if travel outside of Texas	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	t Office held		

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 The Instruction Gui	Loan/Repayment/Rein Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contro de explains how to co	al act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.	
1 Total pages Schedule F1:	2 FILER NAME		3 Fi	ler ID (Ethics Commission Filers)	
not available	Dexter Lorance-Navario McCo	у			
4 Date	5 Payee name				
03/29/2024	Mimi's New Orleans Cafe				
6 Amount (\$) \$51.65	7 Payee address; 1833 Richmond Pkwy Richmon	City; nd, TX 77469-3643	State:	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Food/Beverage Expense	at the top of this schedule)	(b) Descr Lunch meet	•	
EXPERIENCE	(C) Check if travel outside of Texas	s. Complete Schedule T.	Che	ck if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office soug	ht Office held	
4 Date	5 Payee name				
05/16/2024	Merci Mohagheghi				
6 Amount (\$) \$30.90	7 Payee address; 1010 Rosine St Apt 25 Houston	City; n, TX 77019-3871	State:	Zip Code	
8 PURPOSE	(a) Category (See categories listed Loan Repayment/Reimbursement	at the top of this schedule)	(b) Descr Reimbursen	•	
OF EXPENDITURE	(C) Check if travel outside of Texas	s. Complete Schedule T.	Che	ck if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office soug	ht Office held	

SCHEDULE F1

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	EXPENDIT	TURE 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 The Instruction Guid	Loan/Repayment/Reimb Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contract de explains how to con	ct Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
1 Total pages Schedule F1:	2 FILER NAME		3 Fil	er ID (Ethics Commission Filers)
not available	Dexter Lorance-Navario McCo	У		
4 Date	5 Payee name			
01/16/2024	NAACP Missouri City and Vic		····	
6 Amount (\$) \$600.00	7 Payee address; PO Box 1053 Missouri City, T	City; X 77459-1053	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed Contributions/Donations Made By Candidate/Officeholder/Political Comm		(b) Descri Donation	iption
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	ck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office soug	ht Office held
4 Date	5 Payee name			
01/08/2024	Danish Nelson			
6 Amount (\$) \$510.00	7 Payee address; 9900 S Mason Rd Apt 5312 Ric	City; chmond, TX 77406-586	State:	Zip Code
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descr	•
PURPOSE OF	Salaries/Wages/Contract Labor		Photo/Video	o service
EXPENDITURE	(C) Check if travel outside of Texa			ck if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office soug	ht Office held

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 The Instruction Gui	Loan/Repayment/Reim Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.	
1 Total pages Schedule F1:	2 FILER NAME		3 File	er ID (Ethics Commission Filers)	
not available	Dexter Lorance-Navario McCo	у			
4 Date	5 Payee name				
01/03/2024	NGP VAN				
6 Amount (\$) \$262.50	7 Payee address; 1445 New York Ave NW Ste 2	City; 200 Washington, DC 20	State: 005-2158	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Office Overhead/Rental Expense (c) Check if travel outside of Texa		(b) Descrip	ption k if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	a. Complete Scriedulo 1.	Office sough		
4 Date 02/05/2024	5 Payee name NGP VAN				
6 Amount (\$) \$262.50	7 Payee address; 1445 New York Ave NW Ste 2	City;	State: 005-2158	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Office Overhead/Rental Expense (C) Check if travel outside of Texa		(b) Descrip	otion k if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	t Office held	

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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 The Instruction Guid	Loan/Repayment/Reim Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	il act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
1 Total pages Schedule F1:	2 FILER NAME		3 File	er ID (Ethics Commission Filers)
not available	Dexter Lorance-Navario McCo	У		
4 Date	5 Payee name			
03/04/2024	NGP VAN			
6 Amount (\$) \$262.50	7 Payee address;	City;	State:	Zip Code
	1445 New York Ave NW Ste 2			
8 PURPOSE OF	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)	(b) Descri Database	ption
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.		k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held
4 Date	5 Payee name			
04/03/2024	NGP VAN			
6 Amount (\$) \$262.50	7 Payee address; 1445 New York Ave NW Ste 2	City; 00 Washington, DC 20	State: 005-2158	Zip Code
8 PURPOSE OF	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)	(b) Descri Database	ption
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held

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SCHEDULE F1

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	EXPENDIT	TURE 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 The Instruction Gui	Loan/Repayment/Rein Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	al act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
1 Total pages Schedule F1:	2 FILER NAME		3 Fil	er ID (Ethics Commission Filers)
not available	Dexter Lorance-Navario McCo	у		
4 Date	5 Payee name			
05/03/2024	NGP VAN			
6 Amount (\$) \$262.50	7 Payee address; 1445 New York Ave NW Ste 2	City; 200 Washington, DC 20	State: 0005-2158	Zip Code
PURPOSE OF	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)	(b) Descri Database	ption
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held
4 Date	5 Payee riame			
06/03/2024	NGP VAN			
6 Amount (\$) \$262.50	7 Payee address; 1445 New York Ave NW Ste 2	City; 200 Washington, DC 20	State: 0005-2158	Zip Code
8 PURPOSE OF	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)	(b) Descri Database	ption
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held

SCHEDULE F1

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

	EXPENDIT	TURE 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 y Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Loan/Repayment/Rein Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	al act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
1 Total pages Schedule F1:	2 FILER NAME		3 Fil	er ID (Ethics Commission Filers)
not available	Dexter Lorance-Navario McCo	у		,
4 Date	5 Payee name			
05/13/2024	Red Barn Picture Framing			
6 Amount (\$) \$580.76	7 Payee address;	City;	State:	Zip Code
	9850 S TEXAS 6 Sugar Land,	TX 77498		
PURPOSE OF	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)	(b) Descri Framing	ption
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	ck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office soug	nt Office held
4 Date	5 Payee name			
01/23/2024	Resonance Campaigns, LLC			
6 Amount (\$) \$2,816.25	7 Payee address; 913 Florida Ave NW Washing	City; ton, DC 20001-4001	State:	Zip Code
8 PURPOSE	(a) Category (See categories listed Advertising Expense	at the top of this schedule)	(b) Descr	iption and Design, New Year post card
OF EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.		ck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office soug	ht Office held

SCHEDULE F1

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

	EXPENDIT	TURE 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 y Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Loan/Repayment/Reir Office Overhead/Rent Polling Expense Printing Expense Salaries/Wages/Contr de explains how to co	al act Labor		uipment & Related
1 Total pages Schedule F1:	2 FILER NAME		3 Fil	ler ID (Ethics Com	mission Filers)
not available	Dexter Lorance-Navario McCo	ру	1	•	,
4 Date	5 Payee name				
01/25/2024	ReStream Inc.				
6 Amount (\$) \$19.00	7 Payee address; 515 Congress Ave Ste 1050 Au	City; ustin, TX 78701-3504	State:	Z	ip Code
8 PURPOSE OF	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)	(b) Descr Live stream	•	
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	ck if Austin, TX, officeho	lder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office soug	ht	Office held
4 Date	5 Payee name				
02/26/2024	ReStream Inc.				
6 Amount (\$) \$19.00	7 Payee address; 515 Congress Ave Ste 1050 Au	City; ustin, TX 78701-3504	State:	Z	ip Code
8 PURPOSE OF	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)	(b) Descr Live stream	•	
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	ck if Austin, TX, officeho	lder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt	Office held

ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDEL)
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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 B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services The Instruction Guid	Loan/Repayment/Reir Office Overhead/Rent Polling Expense Printing Expense Salaries/Wages/Contr	al act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
1 Total pages Schedule F1:	2 FILER NAME		3 Fil	er ID (Ethics Commission Filers)
not available	Dexter Lorance-Navario McCo	y _		
4 Date	5 Payee name			
03/25/2024	ReStream Inc.			
6 Amount (\$) \$19.00	7 Payee address; 515 Congress Ave Ste 1050 Au	City; astin, TX 78701-3504	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)	(b) Descri	•
EXPENDITURE	(C) Check if travel outside of Texas	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held
4 Date	5 Payee name			
04/25/2024	ReStream Inc.			
6 Amount (\$) \$19.00	7 Payee address; 515 Congress Ave Ste 1050 Au	City; astin, TX 78701-3504	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)	(b) Descri	•
EXPENDITURE	(C) Check if travel outside of Texas	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held

SCHEDULE F1

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

	EXPENDIT	TURE 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 y Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Loan/Repayment/Rein Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contro de explains how to co	ai act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
1 Total pages Schedule F1:	2 FILER NAME		3 Fil	er ID (Ethics Commission Filers)
not available	Dexter Lorance-Navario McCo	ру		,
4 Date	5 Payee name			
05/28/2024	ReStream Inc.			
6 Amount (\$) \$19.00	7 Payee address; 515 Congress Ave Ste 1050 Au	City; ustin, TX 78701-3504	State:	Zip Code
8	(a) Cotogony (See entergrise listed	at the top of this set	(b) Descri	ption
PURPOSE OF	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)	Live stream	•
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	ck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held
4 Date	5 Payee name			
06/25/2024	ReStream Inc.			
6 Amount (\$) \$19.00	7 Payee address; 515 Congress Ave Ste 1050 Au	City; ustin, TX 78701-3504	State:	Zip Code
PURPOSE OF	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)	(b) Descri	•
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	ck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held

SCHEDULE F1

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	EXPENDI	URE CALEGORIES	FUR BUX	o(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 The Instruction Gui	Loan/Repayment/Rein Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	al act Labor	Expense Travel In District Travel Out of Dis Other (enter a ca	quipment & Related
1 Total pages Schedule F1:	2 FILER NAME		3 Fil	er ID (Ethics Co	mmission Filers)
not available	Dexter Lorance-Navario McCo	у			
4 Date	5 Payee name				
04/20/2024	Rosenberg Railroad Museum				
6 Amount (\$) \$2,000.00	7 Payee address;	City;	State:		Zip Code
	PO Box 369 Rosenberg, TX 77				
8 PURPOSE	(a) Category (See categories listed	at the wp of this schedule)	(b) Descr	•	
OF	Event Expense		Crawfish B	oil venue	
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Che	ck if Austin, TX, office	holder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office soug	ht	Office held
4 Date	5 Payee name				
04/19/2024	Sam's Club				
6 Amount (\$) \$348.64	7 Payee address;	City;	State:		Zip Code
	351 Highway 6 Sugar Land, T.	X 77478-4933			
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descr	iption	
PURPOSE OF	Event Expense		Crawfish Be	oil supplies	
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.		ck if Austin, TX, office	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office soug	nt	Office held

SCHEDULE F1

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	EXPENDIT	URE 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 The Instruction Guid	Loan/Repayment/Rein Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	al act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME			ler ID (Ethics Commission Filers)
not available	Dexter Lorance-Navario McCo	у		or is (Euros commission inclo)
4 Date	5 Payee name			
05/30/2024	Sheriff Eric Fagan Campaign			
6 Amount (\$) \$1,000.00	7 Payee address; PO Box 2204 Sugar Land, TX	City;	State:	Zip Code
	10 box 2204 Sugai Land, 1X	77407-2204		
8 PURPOSE OF	(a) Category (See categories listed Contributions/Donations Made By Candidate/Officeholder/Political Comm		(b) Descr Donation	iption
EXPENDITURE	(C) Check if travel outside of Texas	s. Complete Schedule T.	Che	ck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office soug	ht Office held
4 Date	5 Payee name			
04/20/2024	Skai Shadow			
6 Amount (\$) \$300.00	7 Payee address; 20914 Montana Bend Ln Cypre	City; ess, TX 77433-7706	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed Event Expense	at the top of this schedule)	(b) Descr Event DJ	iption
EXPENDITURE	(C) Check if travel outside of Texas	s. Complete Schedule T.	Che	ck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office soug	ht Office held

SCHEDULE F1

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

	EXPENDIT	TURE CATEGORIES	FOR BOX	8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services The Instruction Guid	Loan/Repayment/Rein Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contro de explains how to co	al act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
1 Total pages Schedule F1:	2 FILER NAME		3 File	er ID (Ethics Commission Filers)
not available	Dexter Lorance-Navario McCo	у		
4 Date	5 Payee name			
04/20/2024	Terri Southall			
6 Amount (\$) \$150.00	7 Payee address; 23726 Masterson Garden Ln Ri	City; ichmond, TX 77469-36	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed Salaries/Wages/Contract Labor	at the top of this schedule)	(b) Descri Event Secur	•
EXPENDITURE	(C) Check if travel outside of Texas	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held
4 Date 05/22/2024	5 Payee name Southwest Airlines			
6 Amount (\$) \$951.92	7 Payee address; 2702 Love Field Dr Dallas, TX	City; 75235-1908	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Travel Out Of District	at the top of this schedule)	(b) Descri Airfare	ption
	(C) Check if travel outside of Texas	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held

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	ising Expense Event Expense Loan/Repayment/Reimbursement Transportation Equipment & Related Expense Event Expense Polling Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Expense Expense Expense Expense Travel In District Travel Out of District Other (enter a category not listed above)			
1 Total pages Schedule F1:	2 FILER NAME		3 Fil	er ID (Ethics Commission Filers)
not available	Dexter Lorance-Navario McCo	y		
4 Date	5 Payee name			
05/31/2024	Southwest Airlines			
6 Amount (\$) \$228.98	7 Payee address; 2702 Love Field Dr Dallas, TX	City; 75235-1908	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed Travel Out Of District	at the top of this schedule)	(b) Descri	ption
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	ck if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	ht Office held
4 Date	5 Payee name			
05/31/2024	Southwest Airlines			
6 Amount (\$) \$289.98	7 Payee address; 2702 Love Field Dr Dallas, TX	City; 75235-1908	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed Travel Out Of District	at the top of this schedule)	(b) Descri	iption
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	ck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	ht Office held

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense			
1 Total pages Schedule F1:	2 FILER NAME		3 Fil	er ID (Ethics Commission Filers)
not available	Dexter Lorance-Navario McCo	У		
4 Date 06/10/2024	5 Payee name Southwest Airlines			
6 Amount (\$) \$50.00	7 Payee address; 2702 Love Field Dr Dallas, TX	City; 75235-1908	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed Travel Out Of District	at the ωρ of this schedule)	(b) Descr Airfare	iption
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	ck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office soug	ht Office held
4 Date	5 Payee name			
02/12/2024	Starbucks			
6 Amount (\$) \$48.30	7 Payee address; 28211 Southwest Fwy Rosenbe	City; erg, TX 77471-9630	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed Food/Beverage Expense	at the top of this schedule)	(b) Descr Coffee for r	•
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	ck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office soug	ht Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Revised 1/1/2024

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 The Instruction Guid	Loan/Repayment/Reim Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	al act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.	
1 Total pages Schedule F1:	2 FILER NAME		3 Fil	er ID (Ethics Commission Filers)	
not available	Dexter Lorance-Navario McCo	у		,	
4 Date	5 Payee name				
06/11/2024	STK Steakhouse				
6 Amount (\$) \$141.24	7 Payee address; 901 Massachusetts Ave NW W	City; ashington, DC 20001-4	State: 1307	Zip Code	
8 PURPOSE OF	(a) Category (See categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Meal while traveling for Juneteenth event		
EXPENDITURE	(C) Check if travel outside of Texas	s. Complete Schedule T.	Chec	ck if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held	
4 Date	5 Payee name				
06/05/2024	Texas Democratic Party				
6 Amount (\$) \$500.00	7 Payee address; PO Box 15707 Austin, TX 7876	City; 61-5707	State:	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Contributions/Donations Made By Candidate/Officeholder/Political Comm	nittee	(b) Description	•	
9 Complete ONLY if cirrect expenditure to benefit C/OH	(C) Check if travel outside of Texas Candidate / Officeholder name	s. Complete achequie 1.	Office sough	ck if Austin, TX, officeholder living expense Office held	

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	Fees Office Overhead/Rental Tran Food/Beverage Expense Polling Expense Expe Gift/Awards/Memorials Expense Printing Expense Trav Legal Services Salaries/Wages/Contract Labor Trav		Transportati Expense Travel In Dis Travel Out o Other (enter		
1 Total pages Schedule F1:	2 FILER NAME		3	Filer ID (Ethics	Commission Filers)
not available	Dexter Lorance-Navario McCo	у			
4 Date	5 Payee name				
06/24/2024	Texas Monthly				
6 Amount (\$) \$45.00	7 Payee address; PO Box 1569 Austin, TX 7876	City; 7-1569	Stat	te:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)	(b) Des	scription otion	
EXPENDITURE	(C) Check if travel outside of Texas	s. Complete Schedule T.		Check if Austin, TX,	officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office so	ought	Office held
4 Date	5 Payee name				
05/01/2024	Texas Organizing Project PAC				
6 Amount (\$) \$2,500.00	7 Payee address; PO Box 120296 San Antonio, 7	City; FX 78212-9496	Stat	te:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed Contributions/Donations Made By Candidate/Officeholder/Political Comm		(b) Des	scription n	
EXPENDITURE	(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 so	ought	Office held

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Polling Expense Expense pense Printing Expense Travel In District Salaries/Wages/Contract Labor Travel Out of District		Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME	· · · · · · · · · · · · · · · · · · ·	3 Fil	er ID (Ethics Commission Filers)
not available	Dexter Lorance-Navario McCo	ру		
4 Date	5 Payee name			
06/10/2024	The Roost			
6 Amount (\$) \$26.88	7 Payee address; 1401 Pennsylvania Ave SE Wa	City; ashington, DC 20003-49	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed Food/Beverage Expense	at the top of this schedule)	(b) Descri	•
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held
4 Date	5 Payee name		· · · · · · · · · · · · · · · · · · ·	
05/08/2024	Tira Thomas			
6 Amount (\$) \$65.00	7 Payee address; 18014 Portlethan Ln Richmond	City; I, TX 77407-3126	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Salaries/Wages/Contract Labor (C) Check if travel outside of Texa	s. Complete Schedule T.		il k if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held

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 The Instruction Guid	Loan/Repayment/Reim Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	l ct Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
1 Total pages Schedule F1:	2 FILER NAME		3 File	er ID (Ethics Commission Filers)
not available	Dexter Lorance-Navario McCo	у		
4 Date	5 Payee name			
06/07/2024	Uber			
6 Amount (\$) \$7.58	7 Payee address; 412 Howard St San Francisco,	City; CA 94105-2618	State:	Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See categories listed Travel Out Of District (C) Check if travel outside of Texa		(b) Descri	otion
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	t Office held
4 Date 06/07/2024	5 Payee name Uber			
6 Amount (\$) \$7.58	7 Payee address; 412 Howard St San Francisco,	City; CA 94105-2618	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Travel Out Of District (c) Check if travel outside of Texa		(b) Descri	otion
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	and the state of t	Office sough	t Office held

SCHEDULE F1

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	EXPENDIT	TURE 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 y Gift/Awards/Memorials Expense Legal Services The Instruction Guid	Loan/Repayment/Reim Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	il act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
1 Total pages Schedule F1:	2 FILER NAME		3 File	er ID (Ethics Commission Filers)
not available	Dexter Lorance-Navario McCo	у		
4 Date	5 Payee name	than bank 145 Million Hall to debah kita milia mendana kenanda ada ada ada ada ada ada ada ada ad		
06/07/2024	Uber			
6 Amount (\$) \$7.58	7 Payee address; 412 Howard St San Francisco,	City; CA 94105-2618	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Travel Out Of District	at the top of this schedule)	(b) Descri Rideshare	ption
	(C) Check if travel outside of Texas	s. Complete Schedule T.		k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	t Office held
4 Date	5 Payee name			
06/07/2024	Uber			
6 Amount (\$) \$8.59	7 Payee address; 412 Howard St San Francisco,	City; CA 94105-2618	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed Travel Out Of District	at the top of this schedule)	(b) Descri Rideshare	ption
EXPENDITURE	(C) Check if travel outside of Texas	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	t Office held

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 B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Loan/Repayment/Rein Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	al act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
1 Total pages Schedule F1:	2 FILER NAME		3 File	er ID (Ethics Commission Filers)
not available	Dexter Lorance-Navario McCo	у		
4 Date	5 Payee name			
06/07/2024	Uber			
6 Amount (\$) \$34.93	7 Payee address; 412 Howard St San Francisco,	City; CA 94105-2618	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Travel Out Of District	at the top of this schedule)	(b) Descri Rideshare	ption
EXPENDITORE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held
4 Date	5 Payee name			
06/11/2024	Uber			
6 Amount (\$) \$14.92	7 Payee address; 412 Howard St San Francisco,	City; CA 94105-2618	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed Travel Out Of District	at the top of this schedule)	(b) Descri Rideshare	ption
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held

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 B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Loan/Repayment/Reim Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	al act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.	
1 Total pages Schedule F1:	2 FILER NAME		3 File	er ID (Ethics Commission Filers)	
not available	Dexter Lorance-Navario McCo	у			
4 Date	5 Payee name				
06/11/2024	Uber				
6 Amount (\$) \$24.04	7 Payee address; 412 Howard St San Francisco,	City; CA 94105-2618	State:	Zip Code	
8 PURPOSE OF	(a) Category (See categories listed Travel Out Of District	at the top of this schedule)	(b) Descri Rideshare	ption	
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held	
4 Date	5 Payee name				
06/11/2024	Uber				
6 Amount (\$) \$66.93	7 Payee address; 412 Howard St San Francisco,	City; CA 94105-2618	State:	Zip Code	
8 PURPOSE OF	(a) Category (See categories listed Travel Out Of District	at the top of this schedule)	(b) Descri Rideshare	ption	
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held	

SCHEDULE F1

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

	EXPENDI	TURE CATEGORIES	PLOK BOX 8	a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Legal Services	Loan/Repayment/Rein Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	al I act Labor (Solicitation/Fundraising Expense Fransportation Equipment & Related Expense Fravel In District Fravel Out of District Other (enter a category not listed above)	
1 Total pages Schedule F1:	2 FILER NAME	•		ID (Ethics Commission Filers)	
not available	Dexter Lorance-Navario McCo	ру		TD (Editor Commission Files)	
4 Date	5 Payee name				-
01/03/2024	USPS				
6 Amount (\$) \$226.00	7 Payee address; 5560 FM 1640 Rd Richmond,	City; TX 77469-5424	State:	Zip Code	
8 PURPOSE OF	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)	(b) Descript PO Box rental	ion	
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Check	f Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought	Office held	
4 Date	5 Payee name				
05/28/2024	USPS				
6 Amount (\$) \$106.00	7 Payee address; 5560 FM 1640 Rd Richmond, 7	City; TX 77469-5424	State:	Zip Code	
8 PURPOSE OF	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)	(b) Descript Postage	ion	
EXPENDITURE	(C) Check if travel outside of Texas	s. Complete Schedule T.	Check i	f Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought	Office held	

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 B Candidate/Officeholder/Political Committee Credit Card Payment	Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services	Loan/Repayment/Reim Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	il act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
1 Total pages Schedule F1:	2 FILER NAME			er ID (Ethics Commission Filers)
not available	Dexter Lorance-Navario McCo	y		2.12 (2.1.05 00.111.1100.01.11 110.10)
4 Date	5 Payee name	\$ 100 to		
01/23/2024	WIX.COM			
6 Amount (\$) \$12.99	7 Payee address; 500 Terry A Francois Blvd Fl 6	City; San Francisco, CA 94	State: 158-2354	Zip Code
8 PURPOSE OF	(a) Category (See categories listed and Office Overhead/Rental Expense	at the top of this schedule)	(b) Descri	ption
EXPENDITURE	(C) Check if travel outside of Texas	. Complete Schedule T.	Check	k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	t Office held
4 Date	5 Payee name			
02/23/2024	WIX.COM			
6 Amount (\$) \$12.99	7 Payee address;500 Terry A Francois Blvd Fl 6	City;	State:	Zip Code
		·	-	
8 PURPOSE OF	(a) Category (See categories listed a Office Overhead/Rental Expense	at the top of this schedule)	(b) Descrip Website	otion
EXPENDITURE	(C) Check if travel outside of Texas	. Complete Schedule T.	Check	k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	t Office held

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 The Instruction Guid	Loan/Repayment/Reimb Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contract de explains how to cor	ct Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
1 Total pages Schedule F1:	2 FILER NAME		3 File	er ID (Ethics Commission Filers)
not available	Dexter Lorance-Navario McCo	у		
4 Date	5 Payee name			
03/25/2024	WIX.COM			
6 Amount (\$) \$12.99	7 Payee address; 500 Terry A Francois Blvd Fl 6	City; 5 San Francisco, CA 941	State: 58-2354	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)	(b) Descrip Website	otion
EXPERIENTIONE	(C) Check if travel outside of Texas	s. Complete Schedule T.	Check	k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	t Office held
4 Date	5 Payee name			
04/23/2024	WIX.COM			
6 Amount (\$) \$12.99	7 Payee address;500 Terry A Francois Blvd Fl 6	City; 5 San Francisco, CA 941	State: 58-2354	Zip Code
8 PURPOSE OF	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)	(b) Descrip	λ ⁱ on
EXPENDITURE	(c) Check if travel outside of Texas	s. Complete Schedule T.	Check	k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	(Office sough	t Office held

SCHEDULE F1

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

		EXPENDIT	URE CATEGORIES	FOR BOX	8(a)	
A 0 0 0	dvertising Expense accounting/Banking consulting Expense contributions/Donations Made By andidate/Officeholder/Political ommittee redit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guid	Loan/Repayment/Reim Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	al act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.	
1	Total pages Schedule F1:	2 FILER NAME		3 Fi	er ID (Ethics Commission Filers)	
	not available	Dexter Lorance-Navario McCo	у		, ,	
4	Date	5 Payee name				-
	05/25/2024	WIX.COM				
6	Amount (\$) \$12.99	7 Payee address; 500 Terry A Francois Blvd Fl 6	City; San Francisco, CA 94	State: 158-2354	Zip Code	
8	PURPOSE OF EXPENDITURE	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)	(b) Descr Website	iption	
	EXPERDITORE	(C) Check if travel outside of Texas	s. Complete Schedule T.	Che	ck if Austin, TX, officeholder living expense	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office soug	ht Office held	
4	Date	5 Payee name				
	04/20/2024	WOW Party Art				
6	Amount (\$) \$280.00	7 Payee address;2802 Hardy St Apt C Houston,	City; TX 77009-7065	State:	Zip Code	
8	PURPOSE OF	(a) Category (See categories listed Event Expense	at the top of this schedule)	(b) Descr Face painter	•	
	EXPENDITURE	(C) Check if travel outside of Texas	s. Complete Schedule T.	Chec	ck if Austin, TX, officeholder living expense	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office soug	ht Office held	

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 B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Loan/Repayment/Reim Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra ide explains how to co	al act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
1 Total pages Schedule F1:	2 FILER NAME		3 File	er ID (Ethics Commission Filers)
not available	Dexter Lorance-Navario McCo	oy		
4 Date	5 Payee name			
05/06/2024	XI Kappa Lambda Education I	Foundation		
6 Amount (\$) \$325.00	7 Payee address; PO Box 31022 Houston, TX 7	City; 7231-1022	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed Contributions/Donations Made By Candidate/Officeholder/Political Com-		(b) Descrip	ption
EXPENDITURE	(C) Check if travel outside of Texa	as. Complete Schedule T.		k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	t Office held
4 Date	5 Payee name			
01/05/2024	Zoom			
6 Amount (\$) \$16.79	7 Payee address; 6601 College Blvd Leawood, I	City; KS 66211-1504	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)	(b) Descrip Video confer	otion encing software
EXPENDITURE	(C) Check if travel outside of Texa	as. Complete Schedule T.	Check	r if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	t Office held

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 B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Loan/Repayment/Reim Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	al act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.	
1 Total pages Schedule F1:	2 FILER NAME		3 File	er ID (Ethics Commission Filers)	
not available	Dexter Lorance-Navario McCo	ру		3,33,4	
4 Date	5 Payee name				
02/05/2024	Zoom				
6 Amount (\$) \$16.79	7 Payee address; 6601 College Blvd Leawood, I	City; CS 66211-1504	State:	Zip Code	
8 PURPOSE OF	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)	(b) Descri Video confe	ption rencing software	
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	t Office held	
4 Date	5 Payee name				
03/05/2024	Zoom				
6 Amount (\$) \$16.79	7 Payee address; 6601 College Blvd Leawood, R	City; KS 66211-1504	State:	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)	(b) Descri Video confe	ption rencing software	
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	t Office held	

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 B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services The Instruction Guid	Loan/Repayment/Reim Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	al act Labor	Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above)	
1 Total pages Schedule F1:	2 FILER NAME		3 F	iler ID (Ethics Commission Filers)	
not available	Dexter Lorance-Navario McCo	У			
4 Date	5 Payee name				
04/05/2024	Zoom				
6 Amount (\$) \$16.79	7 Payee address;	City;	State:	: Zip Code	
	6601 College Blvd Leawood, k	SS 66211-1504			
8	(a) Category (See categories listed	at the top of this schedule)	(b) Desc	cription	
PURPOSE OF	Office Overhead/Rental Expense		Video con	ferencing software	
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Che	eck if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office soug	ght Office held	
4 Date	5 Payee name				
05/06/2024	Zoom				
6 Amount (\$) \$16.79	7 Payee address;	City;	State:	Zip Code	
	6601 College Blvd Leawood, K	XS 66211-1504			
8	(a) Category (See categories listed	at the top of this schedule)	(b) Desc	ription	
PURPOSE OF	Office Overhead/Rental Expense		Video cont	ferencing software	
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Che	eck if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sou	ght Office held	

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 B Candidate/Officeholder/Political Committee Credit Card Payment	Legal Services	Loan/Repayment/Reimbursement Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contract Labor ide explains how to complete this		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above)		
Total pages Schedule F1: not available	2 FILER NAME Dexter Lorance-Navario McCo	ру	3 Fi	ler ID (Ethics Commission Filers)		
4 Date 06/05/2024	5 Payee name Zoom					
6 Amount (\$) \$16.79	7 Payee address; 6601 College Blvd Leawood, R	City; KS 66211-1504	State:	Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Office Overhead/Rental Expense		Video conf	erencing software		
9 Complete ONLY if direct expenditure to benefit C/OH	(C) Check if travel outside of Texa Candidate / Officeholder name	s. Complete Schedule T.	Office soug	ck if Austin, TX, officeholder living expense tht Office held		

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

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

i ne instruction Guide explains now to complete this form.		Total pages Schedule K: not available B Filer ID (Ethics Commission Filers)	
01/24/2024	Frost Bank		\$30.15
	6 Address of person from whom amount is received; City; State; Zip Cod PO Box 1600 San Antonio, TX 78296-1600	е	
	7 Purpose for which amount is received	Check if	political contribution returned to filer
	Monthly interest		
4 Date	5 Name of person from whom amount is received		8 Amount (\$)
02/23/2024	Frost Bank		\$26.79
	6 Address of person from whom amount is received; City; State; Zip Cod PO Box 1600 San Antonio, TX 78296-1600	е	
	7 Purpose for which amount is received	Check if	political contribution returned to filer
	Monthly interest		
4 Date	5 Name of person from whom amount is received		8 Amount (\$)
03/22/2024	Frost Bank		\$25.40
	6 Address of person from whom amount is received; City; State; Zip Cod PO Box 1600 San Antonio, TX 78296-1600	е	
	7 Purpose for which amount is received	Check if	political contribution returned to filer
	Monthly interest		•
4 Date	5 Name of person from whom amount is received		8 Amount (\$)
04/22/2024	Frost Bank		\$32.01
	6 Address of person from whom amount is received; City; State; Zip Code PO Box 1600 San Antonio, TX 78296-1600	е	
	7 Purpose for which amount is received	Check if	political contribution returned to filer
	Monthly interest		
4 Date	5 Name of person from whom amount is received		8 Amount (\$)
05/22/2024	Frost Bank		\$35.63
	6 Address of person from whom amount is received; City; State; Zip Cod PO Box 1600 San Antonio, TX 78296-1600	е	
	7 Purpose for which amount is received	Check if	political contribution returned to filer
	Monthly interest		

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

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

The Instruction Guide explains how to complete this form. 2 FILER NAME Dexter Lorance-Navario McCoy		Total pages Schedule K: not available Filer ID (Ethics Commission Filers)	
06/25/2024	6 Address of person from whom amount is received; City; State; Zip Co PO Box 1600 San Antonio, TX 78296-1600	de	\$41.22
	7 Purpose for which amount is received Monthly interest	Check if political contribution returned to filer	