

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

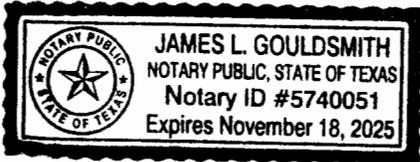
The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 86					
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR	FIRST Dexter Lorance-Navario	MI	OFFICE USE ONLY				
	NICKNAME	LAST McCoy	SUFFIX					
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX:	APT/SUITE #	CITY	STATE:	ZIP CODE	JUL 15 2024 4:00 PM		
	P.O. Box 1398		Richmond	TX	77406			
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		Receipt #	Amount \$		
6 CAMPAIGN TREASURER NAME	MS/MRS/MR	FIRST Joseph	MI		Date Processed	Date Imaged		
	NICKNAME	LAST Killebrew	SUFFIX					
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE):		APT/SUITE #	CITY	STATE:	ZIP CODE		
	8835 Arch Rock Dr.			Cypress	TX	77433		
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION					
		(407) 376-0352						
9 REPORT TYPE	<input type="checkbox"/> January 15		<input type="checkbox"/> 30th day before election		<input type="checkbox"/> Runoff			
	<input checked="" type="checkbox"/> July 15		<input type="checkbox"/> 8th day before election		<input type="checkbox"/> Exceeded Modified Reporting limit			
10 PERIOD COVERED	Month	Day	Year	THROUGH		Month	Day	Year
		01/01/2024					06/30/2024	
11 ELECTION	ELECTION DATE			ELECTION TYPE				
	Month	Day	Year	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other		
			3/3/2026	<input type="checkbox"/> General	<input type="checkbox"/> Special			
12 OFFICE	OFFICE HELD (if any)				13 OFFICE SOUGHT (if known)			
	Fort Bend County Commissioner Pct. 4							
14 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.							
	COMMITTEE TYPE		COMMITTEE NAME					
	<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC		COMMITTEE ADDRESS					
			COMMITTEE CAMPAIGN TREASURER NAME					
			COMMITTEE CAMPAIGN TREASURER ADDRESS					
GO TO PAGE 2								

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME	Dexter Lorange-Navario McCoy	16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1 TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$75.00
	2 TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$200,205.00
EXPENDITURE TOTALS	3 TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$0.00
	4 TOTAL POLITICAL EXPENDITURES	\$55,028.63
CONTRIBUTION BALANCE	5 TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$562,098.84
OUTSTANDING LOAN TOTALS	6 TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$0.00

18 SIGNATURE I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



[Handwritten Signature]
Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Dexter L-N McCoy this the 15 day of July 20 24 to certify which, witness my hand and seal of office.

[Signature] Signature of officer administering oath
James L. Gouldsmith Printed name of officer administering oath
Notary Title of officer administering oath

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____

My address is _____ (street) _____ (city) _____ (state) _____ (zip code) _____ (country)

Executed in _____ County, State of _____ on the _____ day of _____ 20 _____ (month) (year)

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - COH

FORM C/OH COVER SHEET PG 3

19 FILER NAME Dexter Lorance-Navario McCoy	20 Filer ID (Ethics 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 CONTRIBUTIONS	\$55,028.63
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$0.00
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$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 BUSINESS OF C/OH	\$0.00
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$0.00
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS AND CONTRIBUTIONS RETURNED TO FILER	\$191.20

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: not available
2 FILER NAME Dexter Lorange-Navario McCoy		3 Filer ID (Ethics Commission Filers)
4 Date 04/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Huitt-Zollars, Inc. Texas PAC 6 Contributor address; City; State; Zip Code 1717 Mckinney Ave Ste 1400 Dallas, TX 75202-1239	7 Amount of contribution (\$) \$1,500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 04/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Delilah Agho-Otoghile 6 Contributor address; City; State; Zip Code 11615 Radford Ln Houston, TX 77099-4640	7 Amount of contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 04/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Nick Alanis 6 Contributor address; City; State; Zip Code 8519 Woods Hollow Trl Richmond, TX 77406-2536	7 Amount of contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) Chairman		9 Employer (See Instructions) Entech Civil Engineers, Inc.
4 Date 06/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Allen Boone Humphries Robinson, LLP 6 Contributor address; City; State; Zip Code 3200 Southwest Fwy Ste 2600 Houston, TX 77027-7537	7 Amount of contribution (\$) \$1,500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 03/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Cherita Andrews 6 Contributor address; City; State; Zip Code 9023 Covent Garden St Houston, TX 77031-3015	7 Amount of contribution (\$) \$550.00
8 Principal occupation / Job title (See Instructions) CXO		9 Employer (See Instructions) MV Engineering

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: not available
2 FILER NAME Dexter Lorange-Navario McCoy		3 Filer ID (Ethics Commission Filers)
4 Date 04/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Ardurra Group PAC 6 Contributor address; City; State; Zip Code 5851 San Felipe St Ste 425 Houston, TX 77057-8018	7 Amount of contribution (\$) \$1,500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 04/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Manuela Arroyos 6 Contributor address; City; State; Zip Code 5515 Cunningham Ln Rosenberg, TX 77471-2664	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 03/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Mohan Ballagere 6 Contributor address; City; State; Zip Code 10306 Logan Bridge Ln Sugar Land, TX 77498-4078	7 Amount of contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) Vice President		9 Employer (See Instructions) Geotest Engineering, Inc.
4 Date 04/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ David Balmos 6 Contributor address; City; State; Zip Code 13623 Waverly Crest Ct Cypress, TX 77429-6830	7 Amount of contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) WSB
4 Date 04/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Raj Basavaraju 6 Contributor address; City; State; Zip Code 13518 Fawn Lily Dr Ste 900 Cypress, TX 77429-5419	7 Amount of contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Transportation Engineer		9 Employer (See Instructions) HNTB

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: not available
2 FILER NAME Dexter Lorance-Navario McCoy		3 Filer ID (Ethics Commission Filers)
4 Date 04/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Levi Benton 6 Contributor address; City; State; Zip Code 3417 Milam St Houston, TX 77002-9531	7 Amount of contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) Levi Benton & Associates PLLC
4 Date 04/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ william bobrick 6 Contributor address; City; State; Zip Code PO Box 637 Sugar Land, TX 77487-0637	7 Amount of contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 06/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Jeff Cannon 6 Contributor address; City; State; Zip Code 4315 Whickham Dr Fulshear, TX 77441-4058	7 Amount of contribution (\$) \$2,000.00
8 Principal occupation / Job title (See Instructions) Senior Vice President		9 Employer (See Instructions) LJA
4 Date 04/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Darryl Carter 6 Contributor address; City; State; Zip Code 5651 Willers Way Houston, TX 77056-2608	7 Amount of contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self
4 Date 03/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Santiago Castaneda 6 Contributor address; City; State; Zip Code 2426 Mills Creek Dr Kingwood, TX 77339-3095	7 Amount of contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Omega Engineers

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: not available
2 FILER NAME Dexter Lorance-Navario McCoy		3 Filer ID (Ethics Commission Filers)
4 Date 04/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Maria Cerana 6 Contributor address; City; State; Zip Code 11714 Wickhollow Ln Houston, TX 77043-4534	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 03/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Cobb Fendley PAC 6 Contributor address; City; State; Zip Code 13430 Northwest Fwy Ste 1100 Houston, TX 77040-6153	7 Amount of contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 04/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Robin Cole 6 Contributor address; City; State; Zip Code 6023 Hansford Ln Sugar Land, TX 77479-5075	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 04/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ CONSOR Engineering, LLC 6 Contributor address; City; State; Zip Code 15310 Park Row Houston, TX 77084-2887	7 Amount of contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 04/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Marty Cristofaro 6 Contributor address; City; State; Zip Code 17923 Windy Canyon Ln Houston, TX 77084-7027	7 Amount of contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) Vice President/Program Director		9 Employer (See Instructions) Stuart Consulting Group

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: not available
2 FILER NAME Dexter Lorance-Navario McCoy		3 Filer ID (Ethics Commission Filers)
4 Date 04/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Antoinette Davis 6 Contributor address; City; State; Zip Code 5438 Plantation Forest Dr Katy, TX 77449-6444	7 Amount of contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 04/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Barry Davis Jr 6 Contributor address; City; State; Zip Code 964 Ringold St Houston, TX 77088	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 04/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Maxine Dawkins 6 Contributor address; City; State; Zip Code 6831 River Bluff Dr Houston, TX 77085-1313	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 04/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ DEC PAC 6 Contributor address; City; State; Zip Code 1 Greenway Plz Ste 225 Houston, TX 77046-0106	7 Amount of contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 04/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ David Eastwood 6 Contributor address; City; State; Zip Code 17407 Highway 59 N Humble, TX 77396-3008	7 Amount of contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Geotech Engineering & Testing

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: not available
2 FILER NAME Dexter Lorange-Navario McCoy		3 Filer ID (Ethics Commission Filers)
4 Date 04/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ EHRA Engineering PAC 6 Contributor address; City; State; Zip Code 10011 Meadowglen Ln Houston, TX 77042-3760	7 Amount of contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 03/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ John English 6 Contributor address; City; State; Zip Code 7676 Hillmont St Houston, TX 77040-6400	7 Amount of contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Civil Engineering & Land Surveying		9 Employer (See Instructions) REKHA Engineering Inc
4 Date 06/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Omar Escobar 6 Contributor address; City; State; Zip Code 16910 Roberts Dr Cypress, TX 77433	7 Amount of contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) LJA Engineering, Inc
4 Date 01/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Lois Essells 6 Contributor address; City; State; Zip Code 902 Chateau Pl Richmond, TX 77469-5108	7 Amount of contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 04/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Omega Foston 6 Contributor address; City; State; Zip Code 6419 Carriagewood Ct Richmond, TX 77469-7321	7 Amount of contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: not available
2 FILER NAME Dexter Lorance-Navario McCoy		3 Filer ID (Ethics Commission Filers)
4 Date 03/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Joseph Freudenberger 6 Contributor address; City; State; Zip Code 5214 Valkeith Dr Houston, TX 77096-5109	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 04/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Lauren Fuller 6 Contributor address; City; State; Zip Code 9511 W Sam Houston Pkwy N Houston, TX 77064-5398	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 04/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ April Gallien 6 Contributor address; City; State; Zip Code 514 Little River Ct Richmond, TX 77406-2195	7 Amount of contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 04/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Gaurav Garg 6 Contributor address; City; State; Zip Code 1500 S Dairy Ashford Rd Houston, TX 77077-3854	7 Amount of contribution (\$) \$1,500.00
8 Principal occupation / Job title (See Instructions) consulting		9 Employer (See Instructions) cascade
4 Date 04/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Mark Gehringer 6 Contributor address; City; State; Zip Code 5714 Ashley Spring Ct Katy, TX 77494-2213	7 Amount of contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) R.G. Miller

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: not available
2 FILER NAME Dexter Lorance-Navario McCoy		3 Filer ID (Ethics Commission Filers)
4 Date 04/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Tony Gelacio 6 Contributor address; City; State; Zip Code 16360 Park Ten Pl Ste 230 Houston, TX 77084-5095	7 Amount of contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) Entech Civil Engineers, Inc.
4 Date 03/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Costas Georghiou 6 Contributor address; City; State; Zip Code 12335 Meadow Lake Dr Houston, TX 77077-5935	7 Amount of contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) PGAL Inc.
4 Date 04/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Griselda Gonzales 6 Contributor address; City; State; Zip Code 21011 Greyhawk Ct Richmond, TX 77407-4514	7 Amount of contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 04/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Greater Houston Builders Assoc. 6 Contributor address; City; State; Zip Code 9511 W Sam Houston Pkwy N Houston, TX 77064-5398	7 Amount of contribution (\$) \$1,500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 04/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Marquette Greene Scott 6 Contributor address; City; State; Zip Code 1231 Diamond Drape Dr Iowa Colony, TX 77583-1576	7 Amount of contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Dexter Lorange-Navario McCoy		3 Filer ID (Ethics Commission Filers)
4 Date 04/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Vickie Henkel 6 Contributor address; City; State; Zip Code 8630 Wyndham Village Dr Jersey Village, TX 77040-1142	7 Amount of contribution (\$) \$1,500.00
8 Principal occupation / Job title (See Instructions) Principal		9 Employer (See Instructions) Bowman Consulting Group
4 Date 04/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Jubair Hossain 6 Contributor address; City; State; Zip Code 15627 Sand Bluestem Dr Cypress, TX 77433-1883	7 Amount of contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) HTS Inc Consultants
4 Date 04/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ HR Green Texas PAC 6 Contributor address; City; State; Zip Code 11011 Richmond Ave Ste 200 Houston, TX 77042-6601	7 Amount of contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 03/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Shou Hu 6 Contributor address; City; State; Zip Code 105 Pamellia Dr Bellaire, TX 77401-3711	7 Amount of contribution (\$) \$1,500.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
4 Date 04/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Darryl Humphrey Jr. 6 Contributor address; City; State; Zip Code 1302 Emilee Ct Rosenberg, TX 77471-2166	7 Amount of contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: not available
2 FILER NAME Dexter Lorange-Navario McCoy		3 Filer ID (Ethics Commission Filers)
4 Date 04/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ IEA PAC 6 Contributor address; City; State; Zip Code 18383 Preston Rd Ste 500 Dallas, TX 75252-5490	7 Amount of contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 06/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Harish JaJoo 6 Contributor address; City; State; Zip Code 62 Bradford Cir Sugar Land, TX 77479-2976	7 Amount of contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) HJ Consulting
4 Date 04/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Larry Janak 6 Contributor address; City; State; Zip Code 19215 Cohen Green Ln Lan Houston, TX 77094-4127	7 Amount of contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) Executive Vice President		9 Employer (See Instructions) IDCUS, Inc.
4 Date 04/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Telfryn John 6 Contributor address; City; State; Zip Code 15430 Woodland Orchard Ln Cypress, TX 77433-5802	7 Amount of contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) Geoscience
4 Date 04/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Charmaine Jones 6 Contributor address; City; State; Zip Code 20718 Pine Rain Ct Katy, TX 77449-1840	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: not available
2 FILER NAME Dexter Lorance-Navario McCoy		3 Filer ID (Ethics Commission Filers)
4 Date 03/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Sharat Kalaga 6 Contributor address; City; State; Zip Code 2000 W Sam Houston Pkwy S Houston, TX 77042-3615	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 02/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Velia Kavalewitz 6 Contributor address; City; State; Zip Code 514 Saguaro Way Richmond, TX 77469-2116	7 Amount of contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 04/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ KCI Texas PAC 6 Contributor address; City; State; Zip Code 11550 W Interstate 10 Ste 395 San Antonio, TX 78230-1037	7 Amount of contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 04/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Deysha Killebrew 6 Contributor address; City; State; Zip Code 8835 Arch Rock Dr Cypress, TX 77433-7227	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 04/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Ursela Knox 6 Contributor address; City; State; Zip Code 1402 Hemple Dr Rosenberg, TX 77471-2176	7 Amount of contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Dexter Lorance-Navario McCoy		3 Filer ID (Ethics Commission Filers)
4 Date 03/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Ranney McDonough 6 Contributor address; City; State; Zip Code 3 Pin Oak Estates Dr Bellaire, TX 77401-4224	7 Amount of contribution (\$) \$7,500.00
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) McDonough Engineering
4 Date 04/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ charles Mgbeike 6 Contributor address; City; State; Zip Code 6511 Broad Oaks Dr Richmond, TX 77406-9628	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 03/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Erik Miller 6 Contributor address; City; State; Zip Code 5454 Jackwood St Houston, TX 77096-1236	7 Amount of contribution (\$) \$1,500.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Sander Engineering Corp
4 Date 04/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Jack Miller 6 Contributor address; City; State; Zip Code 1146 Gardencrest Ln Ste 200 Houston, TX 77077-1968	7 Amount of contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) R.G. Miller Engineers, Inc.
4 Date 04/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Kevin Mineo 6 Contributor address; City; State; Zip Code 870 W 41st St Houston, TX 77018-5308	7 Amount of contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Dexter Lorance-Navario McCoy		3 Filer ID (Ethics Commission Filers)
4 Date 03/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Rahmet Mohamed 6 Contributor address; City; State; Zip Code 2219 Hermina Radler Dr Richmond, TX 77469-5180	7 Amount of contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) Director		9 Employer (See Instructions) United Engineers Inc.
4 Date 02/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Michael Morgan 6 Contributor address; City; State; Zip Code 1966 S La Salle Ave Los Angeles, CA 90018-1623	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 04/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Bonnie Moss 6 Contributor address; City; State; Zip Code 1505 Highway 6 S Ste 180 Houston, TX 77077-1726	7 Amount of contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) Engineer/Business Owner		9 Employer (See Instructions) MBCO Engineering LLC
4 Date 03/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Lindsay Munoz 6 Contributor address; City; State; Zip Code 4234 Whitman St Houston, TX 77027-6338	7 Amount of contribution (\$) \$525.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 04/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Andres Novoa 6 Contributor address; City; State; Zip Code 515 FM 359 Rd Richmond, TX 77406-2583	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Dexter Lorance-Navario McCoy		3 Filer ID (Ethics Commission Filers)
4 Date 04/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Dwayne Pano 6 Contributor address; City; State; Zip Code 6219 Carnaby Ln Rosenberg, TX 77471-4586	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 04/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Pape-Dawson Engineers PAC 6 Contributor address; City; State; Zip Code 2000 NW Loop 410 San Antonio, TX 78213-2251	7 Amount of contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 04/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Latoya Phillips 6 Contributor address; City; State; Zip Code 3027 Crestone Dr Rosenberg, TX 77471-1944	7 Amount of contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 05/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Satya Pilla 6 Contributor address; City; State; Zip Code 4103 Oak Blossom Ct Houston, TX 77059-3265	7 Amount of contribution (\$) \$10,000.00
8 Principal occupation / Job title (See Instructions) Principal		9 Employer (See Instructions) IGET Services, LLC
4 Date 04/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ James Grady Prestage 6 Contributor address; City; State; Zip Code 36 Big Trl Missouri City, TX 77459-6827	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

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2 FILER NAME Dexter Lorance-Navario McCoy		3 Filer ID (Ethics Commission Filers)
4 Date 04/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Patrick Quincy 6 Contributor address; City; State; Zip Code 1111 Mysterium Ln Rosenberg, TX 77469-2059	7 Amount of contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 04/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Raba-Kistner PAC 6 Contributor address; City; State; Zip Code PO Box 690287 San Antonio, TX 78269-0287	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 <input type="checkbox"/> out-of-state PAC _____ Sanjay Ramabhadran 6 Contributor address; City; State; Zip Code 13718 Bayou Parkway Ct Houston, TX 77077-1129	7 Amount of contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) VERSA Infrastructure
4 Date 03/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Randy Randermann 6 Contributor address; City; State; Zip Code 903 Windsor Woods Ln Katy, TX 77494-5000	7 Amount of contribution (\$) \$1,500.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Brown & Gay
4 Date 04/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Vijaya Rapolu 6 Contributor address; City; State; Zip Code 27822 Acacia Glen Ln Katy, TX 77494-3234	7 Amount of contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) Civil Engineer		9 Employer (See Instructions) Kavi Consulting Inc.

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: not available
2 FILER NAME Dexter Lorance-Navario McCoy		3 Filer ID (Ethics Commission Filers)
4 Date 04/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Philip Rehak 6 Contributor address; City; State; Zip Code 22414 Slate Oaks Ln Richmond, TX 77469-1808	7 Amount of contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 02/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ James Robbins 6 Contributor address; City; State; Zip Code 565 E Hillsboro Blvd Deerfield Beach, FL 33441-3543	7 Amount of contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Emergency Management		9 Employer (See Instructions) AshBritt
4 Date 04/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ James Robbins 6 Contributor address; City; State; Zip Code 565 E Hillsboro Blvd Deerfield Beach, FL 33441-3543	7 Amount of contribution (\$) \$1,500.00
8 Principal occupation / Job title (See Instructions) Emergency Management		9 Employer (See Instructions) AshBritt
4 Date 04/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Ali Roshanfekar 6 Contributor address; City; State; Zip Code 14127 Kimberley Ln Houston, TX 77079-3240	7 Amount of contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Cascade Civil Services LLC
4 Date 03/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Lina Sabouni 6 Contributor address; City; State; Zip Code 23 Palm Blvd Missouri City, TX 77459-4499	7 Amount of contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) Principal in Charge		9 Employer (See Instructions) Autoarch Architects

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: not available
2 FILER NAME Dexter Lorance-Navario McCoy		3 Filer ID (Ethics Commission Filers)
4 Date 03/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Walt Sass 6 Contributor address; City; State; Zip Code 2707 Autumn Lake Dr Katy, TX 77450-5781	7 Amount of contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) Principal		9 Employer (See Instructions) Weisser Engineering & Surveying
4 Date 03/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Daniel Signorelli 6 Contributor address; City; State; Zip Code 1401 Woodlands Pkwy The Woodlands, TX 77380-1122	7 Amount of contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) The Signorelli Company
4 Date 03/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Bobby Singh 6 Contributor address; City; State; Zip Code 10448 Westoffice Dr Houston, TX 77042-5309	7 Amount of contribution (\$) \$10,000.00
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Isani Consultants LP
4 Date 04/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Terri Southall 6 Contributor address; City; State; Zip Code 23726 Masterson Garden Ln Richmond, TX 77469-3697	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 04/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Terri Southall 6 Contributor address; City; State; Zip Code 23726 Masterson Garden Ln Richmond, TX 77469-3697	7 Amount of contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: not available
2 FILER NAME Dexter Lorance-Navario McCoy		3 Filer ID (Ethics Commission Filers)
4 Date 04/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Jerry Sowell 6 Contributor address; City; State; Zip Code 18022 Blue Ridge Shores Dr Cypress, TX 77433-7056	7 Amount of contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 04/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Jerry Sowell 6 Contributor address; City; State; Zip Code 18022 Blue Ridge Shores Dr Cypress, TX 77433-7056	7 Amount of contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 04/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Randy Sparks 6 Contributor address; City; State; Zip Code 21020 Park Row Dr Katy, TX 77449-5020	7 Amount of contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Brooks & Sparks, Inc
4 Date 04/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Herbert Stone 6 Contributor address; City; State; Zip Code 4828 Loop Central Dr Houston, TX 77081-2212	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 04/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Jay Sunderwala 6 Contributor address; City; State; Zip Code 16602 Arbor Oak Leaf Ct Cypress, TX 77433-0134	7 Amount of contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Ninyo & Moore

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MONETARY POLITICAL CONTRIBUTIONS

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2 FILER NAME Dexter Lorance-Navario McCoy		3 Filer ID (Ethics Commission Filers)
4 Date 03/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Issam Talje 6 Contributor address; City; State; Zip Code 12042 Miramar Shores Dr Houston, TX 77065-3944	7 Amount of contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Vice President		9 Employer (See Instructions) Woolpert Inc.
4 Date 04/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Haddis Tewolde 6 Contributor address; City; State; Zip Code 16522 Teak Dr Missouri City, TX 77489-3928	7 Amount of contribution (\$) \$1,500.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) All-Terra
4 Date 04/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Andrew Throgmorton 6 Contributor address; City; State; Zip Code 5806 Grand Saline Dr Richmond, TX 77469-6172	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 06/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Todd Thurber 6 Contributor address; City; State; Zip Code 2929 Briarpark Dr Ste 600 Houston, TX 77042-3768	7 Amount of contribution (\$) \$3,000.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) LJA Engineering, Inc.
4 Date 03/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ TREPAC/Texas Association of Realtors Political Action Committee 6 Contributor address; City; State; Zip Code PO Box 2246 Austin, TX 78768-2246	7 Amount of contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: not available
2 FILER NAME Dexter Lorange-Navario McCoy		3 Filer ID (Ethics Commission Filers)
4 Date 04/05/2024	5 Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC C00457853 TSVC, Inc. Political Action Committee (Terracon PAC) 6 Contributor address; City; State; Zip Code 10841 S Ridgeview Rd Olathe, KS 66061-6456	7 Amount of contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 04/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Asim Tufail 6 Contributor address; City; State; Zip Code 5447 Larkin St Houston, TX 77007-1803	7 Amount of contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Blackline Engineering
4 Date 02/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Llarance Turner 6 Contributor address; City; State; Zip Code 1311 Lodge Ct Missouri City, TX 77489-1615	7 Amount of contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) Surveyor/Engineer		9 Employer (See Instructions) Kaluza Inc
4 Date 03/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Ahmed Valdez 6 Contributor address; City; State; Zip Code 15310 Skyhill Dr Cypress, TX 77433-4073	7 Amount of contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) AKV
4 Date 02/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Judith VanHorn 6 Contributor address; City; State; Zip Code 3222 Canella Cv Richmond, TX 77469-2118	7 Amount of contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

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2 FILER NAME Dexter Lorange-Navario McCoy		3 Filer ID (Ethics Commission Filers)
4 Date 04/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Pawan Vuppala 6 Contributor address; City; State; Zip Code 3834 Desert Springs Ln Fulshear, TX 77441-1716	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 05/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Joel Walker 6 Contributor address; City; State; Zip Code 6510 Abilene Dr Katy, TX 77493-3002	7 Amount of contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Principal		9 Employer (See Instructions) West Belt Surveying, Inc.
4 Date 04/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Rainey Webster 6 Contributor address; City; State; Zip Code 21114 Idle Wind Dr Richmond, TX 77406-7161	7 Amount of contribution (\$) \$125.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 04/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Mary Whittaker 6 Contributor address; City; State; Zip Code 226 Ormond Village Dr Destrehan, LA 70047-3716	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 03/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Gerald Wilson 6 Contributor address; City; State; Zip Code 4611 Biggam Dr Fresno, TX 77545-2172	7 Amount of contribution (\$) \$350.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

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2 FILER NAME Dexter Lorange-Navario McCoy		3 Filer ID (Ethics Commission Filers)
4 Date 04/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Greg Wine 6 Contributor address; City; State; Zip Code 10350 Richmond Ave Houston, TX 77042-4129	7 Amount of contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 04/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Janice Wright 6 Contributor address; City; State; Zip Code 10026 Towne Brook Ln Sugar Land, TX 77498-1643	7 Amount of contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 04/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Dietra Young 6 Contributor address; City; State; Zip Code 18815 Allendale Forest Dr Richmond, TX 77407-3464	7 Amount of contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 02/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Anwar Zahid 6 Contributor address; City; State; Zip Code 19 Lake Como Dr Missouri City, TX 77459-1484	7 Amount of contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) infraTECH
4 Date 03/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Giti Zarinkelk 6 Contributor address; City; State; Zip Code 18 Berry Blossom Dr Spring, TX 77380-3388	7 Amount of contribution (\$) \$1,500.00
8 Principal occupation / Job title (See Instructions) Engineer/owner		9 Employer (See Instructions) Zarinkelk Engineering Services Inc.

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorance-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 01/28/2024	5 Payee name ActBlue	
6 Amount (\$) \$4.95	7 Payee address; City: State: Zip Code 366 Summer St Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description Service Fee
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 02/29/2024	5 Payee name ActBlue	
6 Amount (\$) \$304.16	7 Payee address; City: State: Zip Code 366 Summer St Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description Service Fee
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorange-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 03/28/2024	5 Payee name ActBlue	
6 Amount (\$) \$1,189.77	7 Payee address; City: State: Zip Code 366 Summer St Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description Service Fee
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 04/30/2024	5 Payee name ActBlue	
6 Amount (\$) \$1,243.81	7 Payee address; City: State: Zip Code 366 Summer St Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description Service Fee
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorance-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 01/09/2024	5 Payee name Amazon	
6 Amount (\$) \$191.24	7 Payee address; City; State: Zip Code 410 Terry Ave N Seattle, WA 98109-5210	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Office supplies
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 01/17/2024	5 Payee name Amazon	
6 Amount (\$) \$84.90	7 Payee address; City; State: Zip Code 410 Terry Ave N Seattle, WA 98109-5210	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Office supplies
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorance-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 01/24/2024	5 Payee name Amazon	
6 Amount (\$) \$212.48	7 Payee address; City: State: Zip Code 410 Terry Ave N Seattle, WA 98109-5210	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Office supplies
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 04/16/2024	5 Payee name Amazon	
6 Amount (\$) \$133.04	7 Payee address; City: State: Zip Code 410 Terry Ave N Seattle, WA 98109-5210	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Office supplies
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorance-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 01/17/2024	5 Payee name Best Buy	
6 Amount (\$) \$138.11	7 Payee address; City: State: Zip Code 16980 Southwest Fwy Sugar Land, TX 77479-2350	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Office supplies
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 05/06/2024	5 Payee name Black Bear Diner	
6 Amount (\$) \$46.47	7 Payee address; City: State: Zip Code 13590 University Blvd Sugar Land, TX 77479-6872	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Lunch meeting
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorange-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 05/08/2024	5 Payee name Blossom Hotel Houston	
6 Amount (\$) \$27.06	7 Payee address; City: State: Zip Code 7118 Bertner Ave Houston, TX 77030-4904	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Travel Out Of District	(b) Description Event Parking
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 04/30/2024	5 Payee name Boys and Girls Club of Greater Houston	
6 Amount (\$) \$1,000.00	7 Payee address; City: State: Zip Code 815 Crosby St Houston, TX 77019-3054	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description Donation
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorance-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 01/01/2024	5 Payee name James Cardona	
6 Amount (\$) \$1,750.00	7 Payee address; City: State: Zip Code 5216 Leeland St Houston, TX 77023-2022	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Consulting Expense	(b) Description Consulting fee
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 05/03/2024	5 Payee name James Cardona	
6 Amount (\$) \$4,000.00	7 Payee address; City: State: Zip Code 5216 Leeland St Houston, TX 77023-2022	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Consulting Expense	(b) Description Consulting fee
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorange-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 05/10/2024	5 Payee name Central Fort Bend Chamber	
6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 4120 Avenue H Rosenberg, TX 77471-2833	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description Donation
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 05/31/2024	5 Payee name Central Fort Bend Chamber	
6 Amount (\$) \$350.00	7 Payee address; City; State; Zip Code 4120 Avenue H Rosenberg, TX 77471-2833	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description Donation
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorance-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 05/31/2024	5 Payee name Central Fort Bend Chamber	
6 Amount (\$) \$350.00	7 Payee address; City: State: Zip Code 4120 Avenue H Rosenberg, TX 77471-2833	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description Donation
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 04/20/2024	5 Payee name City of Rosenberg	
6 Amount (\$) \$350.00	7 Payee address; City: State: Zip Code 2220 4th St Rosenberg, TX 77471-5126	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Event Expense	(b) Description Event permits
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorange-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 01/17/2024	5 Payee name CVS	
6 Amount (\$) \$50.00	7 Payee address; City; State: Zip Code 4110 Richmond Pkwy Richmond, TX 77469-2502	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Supplies
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 06/17/2024	5 Payee name Daily Gather	
6 Amount (\$) \$80.36	7 Payee address; City; State: Zip Code 800 Sorella Ct Ste 940 Houston, TX 77024-1496	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Meeting
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorange-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 06/10/2024	5 Payee name DoubleTree by Hilton Hotel El Paso Downtown	
6 Amount (\$) \$328.74	7 Payee address; City; State: Zip Code 600 N El Paso St El Paso, TX 79901-1122	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Travel Out Of District	(b) Description Hotel for State Party Convention
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 06/10/2024	5 Payee name DoubleTree by Hilton Hotel El Paso Downtown	
6 Amount (\$) \$364.74	7 Payee address; City; State: Zip Code 600 N El Paso St El Paso, TX 79901-1122	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Travel Out Of District	(b) Description Hotel for State Party Convention
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorange-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 03/20/2024	5 Payee name Eventsured	
6 Amount (\$) \$119.20	7 Payee address; City; State: Zip Code 24 S Newtown Street Rd Newtown Square, PA 19073-4114	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Event Expense	(b) Description Event Insurance
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 01/02/2024	5 Payee name Frost Bank	
6 Amount (\$) \$15.00	7 Payee address; City; State: Zip Code PO Box 1600 San Antonio, TX 78296-1600	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description wire transfer fee
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorange-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 01/08/2024	5 Payee name Frost Bank	
6 Amount (\$) \$15.00	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) Fees	(b) Description wire transfer fee
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 01/29/2024	5 Payee name Frost Bank	
6 Amount (\$) \$15.00	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) Fees	(b) Description wire transfer fee
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorange-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 03/04/2024	5 Payee name Frost Bank	
6 Amount (\$) \$15.00	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) Fees	(b) Description wire transfer fee
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 03/11/2024	5 Payee name Frost Bank	
6 Amount (\$) \$15.00	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) Fees	(b) Description wire transfer fee
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorange-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 03/18/2024	5 Payee name Frost Bank	
6 Amount (\$) \$15.00	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) Fees	(b) Description wire transfer fee
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 03/25/2024	5 Payee name Frost Bank	
6 Amount (\$) \$15.00	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) Fees	(b) Description wire transfer fee
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorange-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 04/01/2024	5 Payee name Frost Bank	
6 Amount (\$) \$15.00	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) Fees	(b) Description wire transfer fee
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 04/08/2024	5 Payee name Frost Bank	
6 Amount (\$) \$15.00	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) Fees	(b) Description wire transfer fee
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorance-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 04/15/2024	5 Payee name Frost Bank	
6 Amount (\$) \$15.00	7 Payee address; City; State; Zip Code PO Box 1600 San Antonio, TX 78296-1600	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description wire transfer fee
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 04/22/2024	5 Payee name Frost Bank	
6 Amount (\$) \$15.00	7 Payee address; City; State; Zip Code PO Box 1600 San Antonio, TX 78296-1600	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description wire transfer fee
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorange-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 04/29/2024	5 Payee name Frost Bank	
6 Amount (\$) \$15.00	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) Fees	(b) Description wire transfer fee
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 05/03/2024	5 Payee name Grady Prestage Campaign	
6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code PO Box 835 Missouri City, TX 77459-0835	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description Donation
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorange-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 01/22/2024	5 Payee name H-E-B	
6 Amount (\$) \$20.04	7 Payee address; City; State: Zip Code 19988 Southwest Fwy Sugar Land, TX 77479-6505	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Supplies
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 01/16/2024	5 Payee name H-GAC	
6 Amount (\$) \$90.00	7 Payee address; City; State: Zip Code PO Box 22777 Houston, TX 77227-2777	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description Fees
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorange-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 06/12/2024	5 Payee name Hilton Garden Inn Washington DC Downtown	
6 Amount (\$) \$391.33	7 Payee address; City: State: Zip Code 815 14th St NW Washington, DC 20005-3301	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Travel Out Of District	(b) Description Hotel room for Juneteenth Whitehouse celebrat
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 05/03/2024	5 Payee name Hilton Houston Post Oak	
6 Amount (\$) \$22.00	7 Payee address; City: State: Zip Code 2001 Post Oak Blvd Houston, TX 77056-4401	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Travel Out Of District	(b) Description Event parking.
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorange-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 06/03/2024	5 Payee name Houston Furniture Bank	
6 Amount (\$) \$1,000.00	7 Payee address; City: State: Zip Code 8220 Mosley Rd Houston, TX 77075-1110	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description Donation
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 04/20/2024	5 Payee name Houston Trackless Train	
6 Amount (\$) \$1,344.10	7 Payee address; City: State: Zip Code 2426 Crossmill Ln Katy, TX 77450-6794	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Event Expense	(b) Description Trackless train, Bouncehouse
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorange-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 01/29/2024	5 Payee name HP Instant Ink	
6 Amount (\$) \$7.57	7 Payee address; City; State: Zip Code 1501 Page Mill Rd Palo Alto, CA 94304-1126	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Printer ink
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 02/27/2024	5 Payee name HP Instant Ink	
6 Amount (\$) \$7.57	7 Payee address; City; State: Zip Code 1501 Page Mill Rd Palo Alto, CA 94304-1126	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Printer ink
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorance-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 03/27/2024	5 Payee name HP Instant Ink	
6 Amount (\$) \$7.57	7 Payee address; City: State: Zip Code 1501 Page Mill Rd Palo Alto, CA 94304-1126	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Printer ink
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 04/29/2024	5 Payee name HP Instant Ink	
6 Amount (\$) \$7.57	7 Payee address; City: State: Zip Code 1501 Page Mill Rd Palo Alto, CA 94304-1126	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Printer ink
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorange-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 05/28/2024	5 Payee name HP Instant Ink	
6 Amount (\$) \$7.57	7 Payee address; City; State; Zip Code 1501 Page Mill Rd Palo Alto, CA 94304-1126	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Printer ink
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 01/08/2024	5 Payee name Human Age Digital	
6 Amount (\$) \$1,800.00	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) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorance-Navario McCoy	3 Filer ID (Ethics Commission Filers)
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	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Digital Advertising
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
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	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Digital Advertising
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorange-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 04/20/2024	5 Payee name Jaguar Tent & Events LLC	
6 Amount (\$) \$1,556.71	7 Payee address; City; State; Zip Code 17016 Bamwood Dr Houston, TX 77090-2428	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Event Expense	(b) Description Tent, Tables, Chairs rentals
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 01/11/2024	5 Payee name Jimmy Johns	
6 Amount (\$) \$106.63	7 Payee address; City; State; Zip Code 3623 S Main St Ste 114 Stafford, TX 77477-5406	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Lunch meeting
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorange-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 05/21/2024	5 Payee name Juawn Jackson for Georgia House	
6 Amount (\$) \$200.00	7 Payee address; City: State: Zip Code 5580 Thomaston Rd Macon, GA 31220-8106	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description Donation
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 04/20/2024	5 Payee name Kickin' Crawfish, LLC	
6 Amount (\$) \$5,850.00	7 Payee address; City: State: Zip Code 16218 Waiting Spring Cir Houston, TX 77095-4548	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Catering
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorance-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 04/20/2024	5 Payee name Kwik Covers	
6 Amount (\$) \$296.60	7 Payee address; City: State: Zip Code 811 Ridge Rd Webster, NY 14580-2401	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Event Expense	(b) Description Table covers
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 06/11/2024	5 Payee name Metro Supermarket	
6 Amount (\$) \$15.00	7 Payee address; City: State: Zip Code 2130 P St NW Ste 5 Washington, DC 20037-1035	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Meal while traveling
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorance-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 03/29/2024	5 Payee name Mimi's New Orleans Cafe	
6 Amount (\$) \$51.65	7 Payee address; City: State: Zip Code 1833 Richmond Pkwy Richmond, TX 77469-3643	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Lunch meeting
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 05/16/2024	5 Payee name Merci Mohagheghi	
6 Amount (\$) \$30.90	7 Payee address; City: State: Zip Code 1010 Rosine St Apt 25 Houston, TX 77019-3871	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description Reimbursement
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorange-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 01/16/2024	5 Payee name NAACP Missouri City and Vicinity Branch	
6 Amount (\$) \$600.00	7 Payee address; City: State: Zip Code PO Box 1053 Missouri City, TX 77459-1053	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description Donation
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 01/08/2024	5 Payee name Danish Nelson	
6 Amount (\$) \$510.00	7 Payee address; City: State: Zip Code 9900 S Mason Rd Apt 5312 Richmond, TX 77406-5866	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Photo/Video service
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorange-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 01/03/2024	5 Payee name NGP VAN	
6 Amount (\$) \$262.50	7 Payee address; City: State: Zip Code 1445 New York Ave NW Ste 200 Washington, DC 20005-2158	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Database
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 02/05/2024	5 Payee name NGP VAN	
6 Amount (\$) \$262.50	7 Payee address; City: State: Zip Code 1445 New York Ave NW Ste 200 Washington, DC 20005-2158	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Database
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorange-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 03/04/2024	5 Payee name NGP VAN	
6 Amount (\$) \$262.50	7 Payee address; City: State: Zip Code 1445 New York Ave NW Ste 200 Washington, DC 20005-2158	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Database
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 04/03/2024	5 Payee name NGP VAN	
6 Amount (\$) \$262.50	7 Payee address; City: State: Zip Code 1445 New York Ave NW Ste 200 Washington, DC 20005-2158	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Database
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorange-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 05/03/2024	5 Payee name NGP VAN	
6 Amount (\$) \$262.50	7 Payee address; City: State: Zip Code 1445 New York Ave NW Ste 200 Washington, DC 20005-2158	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Database
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 06/03/2024	5 Payee name NGP VAN	
6 Amount (\$) \$262.50	7 Payee address; City: State: Zip Code 1445 New York Ave NW Ste 200 Washington, DC 20005-2158	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Database
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorange-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 05/13/2024	5 Payee name Red Barn Picture Framing	
6 Amount (\$) \$580.76	7 Payee address; City: State: Zip Code 9850 S TEXAS 6 Sugar Land, TX 77498	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Framing
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 01/23/2024	5 Payee name Resonance Campaigns, LLC	
6 Amount (\$) \$2,816.25	7 Payee address; City: State: Zip Code 913 Florida Ave NW Washington, DC 20001-4001	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Production and Design, New Year post card
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorraine-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 01/25/2024	5 Payee name ReStream Inc.	
6 Amount (\$) \$19.00	7 Payee address; City; State: Zip Code 515 Congress Ave Ste 1050 Austin, TX 78701-3504	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Live streaming service
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 02/26/2024	5 Payee name ReStream Inc.	
6 Amount (\$) \$19.00	7 Payee address; City; State: Zip Code 515 Congress Ave Ste 1050 Austin, TX 78701-3504	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Live streaming service
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorange-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 03/25/2024	5 Payee name ReStream Inc.	
6 Amount (\$) \$19.00	7 Payee address; City; State: Zip Code 515 Congress Ave Ste 1050 Austin, TX 78701-3504	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Live streaming service
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 04/25/2024	5 Payee name ReStream Inc.	
6 Amount (\$) \$19.00	7 Payee address; City; State: Zip Code 515 Congress Ave Ste 1050 Austin, TX 78701-3504	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Live streaming service
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorange-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 05/28/2024	5 Payee name ReStream Inc.	
6 Amount (\$) \$19.00	7 Payee address; City; State; Zip Code 515 Congress Ave Ste 1050 Austin, TX 78701-3504	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Live streaming service
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 06/25/2024	5 Payee name ReStream Inc.	
6 Amount (\$) \$19.00	7 Payee address; City; State; Zip Code 515 Congress Ave Ste 1050 Austin, TX 78701-3504	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Live streaming service
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorange-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 04/20/2024	5 Payee name Rosenberg Railroad Museum	
6 Amount (\$) \$2,000.00	7 Payee address; City: State: Zip Code PO Box 369 Rosenberg, TX 77471-0369	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Event Expense	(b) Description Crawfish Boil venue
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 04/19/2024	5 Payee name Sam's Club	
6 Amount (\$) \$348.64	7 Payee address; City: State: Zip Code 351 Highway 6 Sugar Land, TX 77478-4933	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Event Expense	(b) Description Crawfish Boil supplies
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorance-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 05/30/2024	5 Payee name Sheriff Eric Fagan Campaign	
6 Amount (\$) \$1,000.00	7 Payee address; City: State: Zip Code PO Box 2204 Sugar Land, TX 77487-2204	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description Donation
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 04/20/2024	5 Payee name Skai Shadow	
6 Amount (\$) \$300.00	7 Payee address; City: State: Zip Code 20914 Montana Bend Ln Cypress, TX 77433-7706	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Event Expense	(b) Description Event DJ
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorance-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 04/20/2024	5 Payee name Terri Southall	
6 Amount (\$) \$150.00	7 Payee address; City: State: Zip Code 23726 Masterson Garden Ln Richmond, TX 77469-3697	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Event Security
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 05/22/2024	5 Payee name Southwest Airlines	
6 Amount (\$) \$951.92	7 Payee address; City: State: Zip Code 2702 Love Field Dr Dallas, TX 75235-1908	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Travel Out Of District	(b) Description Airfare
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorance-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 05/31/2024	5 Payee name Southwest Airlines	
6 Amount (\$) \$228.98	7 Payee address; City: State: Zip Code 2702 Love Field Dr Dallas, TX 75235-1908	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Travel Out Of District	(b) Description Airfare
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 05/31/2024	5 Payee name Southwest Airlines	
6 Amount (\$) \$289.98	7 Payee address; City: State: Zip Code 2702 Love Field Dr Dallas, TX 75235-1908	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Travel Out Of District	(b) Description Airfare
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorance-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 06/10/2024	5 Payee name Southwest Airlines	
6 Amount (\$) \$50.00	7 Payee address; City: State: Zip Code 2702 Love Field Dr Dallas, TX 75235-1908	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Travel Out Of District	(b) Description Airfare
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 02/12/2024	5 Payee name Starbucks	
6 Amount (\$) \$48.30	7 Payee address; City: State: Zip Code 28211 Southwest Fwy Rosenberg, TX 77471-9630	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Coffee for meeting
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorange-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 06/11/2024	5 Payee name STK Steakhouse	
6 Amount (\$) \$141.24	7 Payee address; City: State: Zip Code 901 Massachusetts Ave NW Washington, DC 20001-4307	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Meal while traveling for Juneteenth event
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 06/05/2024	5 Payee name Texas Democratic Party	
6 Amount (\$) \$500.00	7 Payee address; City: State: Zip Code PO Box 15707 Austin, TX 78761-5707	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description Donation
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorraine-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 06/24/2024	5 Payee name Texas Monthly	
6 Amount (\$) \$45.00	7 Payee address; City; State; Zip Code PO Box 1569 Austin, TX 78767-1569	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Subscription
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 05/01/2024	5 Payee name Texas Organizing Project PAC	
6 Amount (\$) \$2,500.00	7 Payee address; City; State; Zip Code PO Box 120296 San Antonio, TX 78212-9496	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description Donation
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorance-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 06/10/2024	5 Payee name The Roost	
6 Amount (\$) \$26.88	7 Payee address; City: State: Zip Code 1401 Pennsylvania Ave SE Washington, DC 20003-4939	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage Expense	(b) Description meal while traveling
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 05/08/2024	5 Payee name Tira Thomas	
6 Amount (\$) \$65.00	7 Payee address; City: State: Zip Code 18014 Portlethan Ln Richmond, TX 77407-3126	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Crawfish boil
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorance-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 06/07/2024	5 Payee name Uber	
6 Amount (\$) \$7.58	7 Payee address; City; State: Zip Code 412 Howard St San Francisco, CA 94105-2618	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Travel Out Of District	(b) Description Rideshare
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 06/07/2024	5 Payee name Uber	
6 Amount (\$) \$7.58	7 Payee address; City; State: Zip Code 412 Howard St San Francisco, CA 94105-2618	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Travel Out Of District	(b) Description Rideshare
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorance-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 06/07/2024	5 Payee name Uber	
6 Amount (\$) \$7.58	7 Payee address; City: State: Zip Code 412 Howard St San Francisco, CA 94105-2618	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Travel Out Of District	(b) Description Rideshare
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 06/07/2024	5 Payee name Uber	
6 Amount (\$) \$8.59	7 Payee address; City: State: Zip Code 412 Howard St San Francisco, CA 94105-2618	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Travel Out Of District	(b) Description Rideshare
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorance-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 06/07/2024	5 Payee name Uber	
6 Amount (\$) \$34.93	7 Payee address; City: State: Zip Code 412 Howard St San Francisco, CA 94105-2618	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Travel Out Of District	(b) Description Rideshare
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 06/11/2024	5 Payee name Uber	
6 Amount (\$) \$14.92	7 Payee address; City: State: Zip Code 412 Howard St San Francisco, CA 94105-2618	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Travel Out Of District	(b) Description Rideshare
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Loranca-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 06/11/2024	5 Payee name Uber	
6 Amount (\$) \$24.04	7 Payee address; City: State: Zip Code 412 Howard St San Francisco, CA 94105-2618	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Travel Out Of District	(b) Description Rideshare
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 06/11/2024	5 Payee name Uber	
6 Amount (\$) \$66.93	7 Payee address; City: State: Zip Code 412 Howard St San Francisco, CA 94105-2618	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Travel Out Of District	(b) Description Rideshare
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorance-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 01/03/2024	5 Payee name USPS	
6 Amount (\$) \$226.00	7 Payee address; City; State: Zip Code 5560 FM 1640 Rd Richmond, TX 77469-5424	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description PO Box rental
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 05/28/2024	5 Payee name USPS	
6 Amount (\$) \$106.00	7 Payee address; City; State: Zip Code 5560 FM 1640 Rd Richmond, TX 77469-5424	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Postage
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorance-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 01/23/2024	5 Payee name WIX.COM	
6 Amount (\$) \$12.99	7 Payee address; City: State: Zip Code 500 Terry A Francois Blvd Fl 6 San Francisco, CA 94158-2354	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Website
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 02/23/2024	5 Payee name WIX.COM	
6 Amount (\$) \$12.99	7 Payee address; City: State: Zip Code 500 Terry A Francois Blvd Fl 6 San Francisco, CA 94158-2354	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Website
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorance-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 03/25/2024	5 Payee name WIX.COM	
6 Amount (\$) \$12.99	7 Payee address; City; State: Zip Code 500 Terry A Francois Blvd Fl 6 San Francisco, CA 94158-2354	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Website
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 04/23/2024	5 Payee name WIX.COM	
6 Amount (\$) \$12.99	7 Payee address; City; State: Zip Code 500 Terry A Francois Blvd Fl 6 San Francisco, CA 94158-2354	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Website
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorance-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 05/25/2024	5 Payee name WIX.COM	
6 Amount (\$) \$12.99	7 Payee address; City: State: Zip Code 500 Terry A Francois Blvd Fl 6 San Francisco, CA 94158-2354	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Website
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 04/20/2024	5 Payee name WOW Party Art	
6 Amount (\$) \$280.00	7 Payee address; City: State: Zip Code 2802 Hardy St Apt C Houston, TX 77009-7065	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Event Expense	(b) Description Face painter
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorance-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 05/06/2024	5 Payee name XI Kappa Lambda Education Foundation	
6 Amount (\$) \$325.00	7 Payee address; City: State: Zip Code PO Box 31022 Houston, TX 77231-1022	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description Donation
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 01/05/2024	5 Payee name Zoom	
6 Amount (\$) \$16.79	7 Payee address; City: State: Zip Code 6601 College Blvd Leawood, KS 66211-1504	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Video conferencing software
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorance-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 02/05/2024	5 Payee name Zoom	
6 Amount (\$) \$16.79	7 Payee address; City: State: Zip Code 6601 College Blvd Leawood, KS 66211-1504	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Video conferencing software
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 03/05/2024	5 Payee name Zoom	
6 Amount (\$) \$16.79	7 Payee address; City: State: Zip Code 6601 College Blvd Leawood, KS 66211-1504	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Video conferencing software
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorance-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 04/05/2024	5 Payee name Zoom	
6 Amount (\$) \$16.79	7 Payee address; City: State: Zip Code 6601 College Blvd Leawood, KS 66211-1504	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Video conferencing software
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 05/06/2024	5 Payee name Zoom	
6 Amount (\$) \$16.79	7 Payee address; City: State: Zip Code 6601 College Blvd Leawood, KS 66211-1504	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Video conferencing software
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorance-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 06/05/2024	5 Payee name Zoom	
6 Amount (\$) \$16.79	7 Payee address; City: State: Zip Code 6601 College Blvd Leawood, KS 66211-1504	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Video conferencing software
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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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.		1 Total pages Schedule K: not available
2 FILER NAME Dexter Lorance-Navario McCoy		3 Filer ID (Ethics Commission Filers)
4 Date 01/24/2024	5 Name of person from whom amount is received Frost Bank 6 Address of person from whom amount is received; City; State; Zip Code PO Box 1600 San Antonio, TX 78296-1600	8 Amount (\$) \$30.15
7 Purpose for which amount is received Monthly interest		<input type="checkbox"/> Check if political contribution returned to filer
4 Date 02/23/2024	5 Name of person from whom amount is received Frost Bank 6 Address of person from whom amount is received; City; State; Zip Code PO Box 1600 San Antonio, TX 78296-1600	8 Amount (\$) \$26.79
7 Purpose for which amount is received Monthly interest		<input type="checkbox"/> Check if political contribution returned to filer
4 Date 03/22/2024	5 Name of person from whom amount is received Frost Bank 6 Address of person from whom amount is received; City; State; Zip Code PO Box 1600 San Antonio, TX 78296-1600	8 Amount (\$) \$25.40
7 Purpose for which amount is received Monthly interest		<input type="checkbox"/> Check if political contribution returned to filer
4 Date 04/22/2024	5 Name of person from whom amount is received Frost Bank 6 Address of person from whom amount is received; City; State; Zip Code PO Box 1600 San Antonio, TX 78296-1600	8 Amount (\$) \$32.01
7 Purpose for which amount is received Monthly interest		<input type="checkbox"/> Check if political contribution returned to filer
4 Date 05/22/2024	5 Name of person from whom amount is received Frost Bank 6 Address of person from whom amount is received; City; State; Zip Code PO Box 1600 San Antonio, TX 78296-1600	8 Amount (\$) \$35.63
7 Purpose for which amount is received Monthly interest		<input type="checkbox"/> Check if political contribution returned to filer

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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.		1 Total pages Schedule K: not available
2 FILER NAME Dexter Lorance-Navario McCoy		3 Filer ID (Ethics Commission Filers)
4 Date 06/25/2024	5 Name of person from whom amount is received Frost Bank 6 Address of person from whom amount is received; City; State; Zip Code PO Box 1600 San Antonio, TX 78296-1600	8 Amount (\$) \$41.22
7 Purpose for which amount is received Monthly interest		<input type="checkbox"/> Check if political contribution returned to filer

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