# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

#### FORM C/OH COVER SHEET PG 1

7	The C/OH Instruction Guide explains how to complete this form.  1 Filer ID (Ethics Commission Filers)					2 Total pages filed: 87	
3	CANDIDATE/ OFFICEHOLDER NAME	MS/MRS/MR NICKNAME	FIRST  Dexter Lorance-N  LAST  McCoy	avario	MI	OFFICE L	JSE ONLY
4	CANDIDATE / OFFICEHOLDER MAILING ADDRESS  Change of Address	ADDRESS /PO BOX: P.O. Box 1398	APT/SUITE # CITY Richmond		ZIP CODE 77406	Date Hand-delivered	or Date Postmarked JAN 15 2025
5	CANDIDATE / OFFICEHOLDER PHONE	AREA CODE P	HONE NUMBER	EXTENSIO	DN	Receipt #	Amount \$
6	CAMPAIGN TREASURER NAME	MS/MRS/MR NICKNAME	FIRST Joseph LAST Killebrew		MI SUFFIX	Date Processed  Date Imaged	
7	CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO 8835 Arch Rock Dr.	BOX PLEASE): APT/SUITE	# CITY Cypress	STATE: TX	ZIP CODE 77433	
8	CAMPAIGN TREASURER PHONE	AREA CODE (407) 376	PHONE NUMBER i-0352	EXTENSIO	DN		
9	REPORT TYPE	✓ January 15 ☐ July 15	30th day before election	, <u> </u>	unoff ceeded Modified eporting limit	appointment ( Final report (A	campaign treasurer officeholder only) ktach- COH-FR)
10	PERIOD COVERED	Month Day 07/01/2024	Year TH	ROUGH	Month	Day Yea 12/31/2024	ır
11	ELECTION	ELECTION DATE Month Day 3/3/2026	Year ELECTION  Year Prima  Gene	rv 🔲	Runoff C	Other	
12	OFFICE	OFFICE HELD (if any) Fort Bend County	Commissioner Pct. 4	1	3 OFFICE SOUGH Fort Bend Co	T (if known) ounty Commissione	er Pct. 4
14	NOTICE FROM POLITICAL COMMITTEE(S) Additional Pages	THIS BOX IS FOR NOTICE OF SUPPORT THE CANDIDATE /	POLITICAL CONTRIBUTIONS ACCOFFICEHOLDER. THESE EXPENDICANDIDATES AND OFFICEHOLDER.  COMMITTEE NAME  COMMITTEE ADDRESS  COMMITTEE CAMPAIGN  COMMITTEE CAMPAIGN	ITURES MAY HAVE ERS ARE REQUIREI	CAL EXPENDITURES ME BEEN MADE WITHOUT DITOREPORT THIS INF	ADE BY POLITICAL COM	MMITTEES TO OFFICEHOLDER'S
		<u> </u>			DIVEOG		
	GO TO PAGE 2						

## CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

### FORM C/OH COVER SHEET PG 2

			CO	VER SHEET PG 2		
15 C/OH NAME	Dexter Lorance-Navario McCoy		16 F	iler ID (Ethics Commission Filers)		
17 CONTRIBUTION TOTALS	1 TOTAL UNITEMIZED POLITICAL CO OR GUARANTEES OF LOANS OR C			\$0.00		
	2 TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, C			\$170,499.00		
EXPENDITURE TOTALS	3 TOTAL UNITEMIZED POLITICAL EX	PENDITURES		\$590.60		
	4 TOTAL POLITICAL EXPENDITURES			\$152,624.02		
CONTRIBUTION BALANCE	5 TOTAL POLITICAL CONTRIBUTIONS OF REPORTING PERIOD	MAINTAINED AS OF THE LAST (	DAY	\$577,877.79		
OUTSTANDING LOAN TOTALS						
	swear, or affirm, under penalty of perjury, equired to be reported by me under Title		rt is true and corre	ect and includes all information		
		(10	at I			
		Signati	ure of Candidate of	or Officeholder		
(1) Affidavit	Please complete either option below:  MIMI ARCE  Notary Public, State of Texas  Comm. Expires 11-13-2028					
NOTARY STAMP / SEAL						
	before me by DEXTER 1		this th	ie 15th		
day of JAN 20 2	to certify which, witness my hand an	d seal of office.				
mi-ae	MIMI MIMI	ARCE	TEXAS	NOTBRY PUBLIC		
Signature of officer admini		cer administering oath OR	Title of office	r administering oath		
(2) Unsworn Declaration		JK				
•						
My address is						
	(street)	(city)	(state)	(zip code) (country)		
Executed in	County, State of	on the	day of(month	20		
		Signati	re of Candidate/C	Officeholder (Declarant)		

### SUBTOTALS - COH

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

	FILER NAME xter Lorance-Navario McCoy	20 Filer ID (Ethi	ics Commission Filers)
21 8	SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$170,499.00
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 CONTRIBU	JTIONS	\$152,624.02
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$0.00
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRI	BUTIONS	\$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 BUSI	\$0.00	
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTR	\$0.00	
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS AND CONTRIBUTIONS F TO FILER	RETURNED	\$173.23

## SCHEDULE A1

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

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: not available
2 FILER NAM Dexter Lorance	E e-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC	7 Amount of contribution (\$)
10/16/2024	Huitt-Zollars, Inc. Texas PAC	\$1,500.00
	6 Contributor address; City; State; Zip Cod	· ·
	1717 Mckinney Ave Ste 1400 Dallas, TX 75202-1239	
8 Principal occ	cupation / Job title (See Instructions) 9 Er	mployer (See Instructions)
4 Date	5 Full name of contributorout-of-state PAC	7 Amount of contribution (\$)
11/09/2024	Nick Alanis	\$10,000.00
	6 Contributor address; City; State; Zip Cod	·
	8519 Woods Hollow Trl Richmond, TX 77406-2536	
8 Principal occ Chairman	cupation / Job title (See Instructions) 9 Er	mployer (See Instructions)  Entech Civil Engineers, Inc.
4 Date	5 Full name of contributorout-of-state PAC	7 Amount of contribution (\$)
11/08/2024	Allen Boone Humphries Robinson, LLP	\$1,000.00
	6 Contributor address; City; State; Zip Cod	de
	3200 Southwest Fwy Ste 2600 Houston, TX 77027-7537	
8 Principal occ	cupation / Job title (See Instructions) 9 Er	mployer (See Instructions)
4 Date	5 Full name of contributorout-of-state PAC	7 Amount of contribution (\$)
09/24/2024	Cherita Andrews	\$500.00
	6 Contributor address; City; State; Zip Cod	de
	9023 Covent Garden St Houston, TX 77031-3015	
8 Principal occ	cupation / Job title (See Instructions) 9 Er	mployer (See Instructions) MV Engineering
4 Date	5 Full name of contributor Out-of-state PAC	7 Amount of contribution (\$)
11/08/2024	Leslie Bacon	\$250.00
	6 Contributor address; City; State; Zip Coo	
	737 E 12th St Houston, TX 77008-7123	
8 Principal occ		mployer (See Instructions)

SCHEDULE A1

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The Ins	truction Guide explains how t	Total pages Schedule A1:     not available				
2 FILER NAME			3 Filer ID (Ethics Commission F	ilers)		
Dexter Lorance-N	avario McCoy					
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)		
10/17/2024	Mohan Ballagere				\$2,000.00	
	6 Contributor address;	City; State;	Zip Code			
	10306 Logan Bridge Ln Sugar La	nd, TX 77498-4078				
8 Principal occup Vice Presider	ation / Job title (See Instructions	)	1	yer (See Instructions) eotest Engineering, Inc.		
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)		
10/30/2024	David Balmos				\$2,500.00	
	6 Contributor address;	City; State;	Zip Code		<b></b> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	19119 Cardinal Grove Ct Cypress	, TX 77429-5547				
8 Principal occup	ation / Job title (See Instructions	s)	9 Employ	yer (See Instructions)		
Engineer			W	/SB LLC		
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)		
10/09/2024	Levi Benton				\$1,000.00	
	6 Contributor address;	City; State;	Zip Code			
	3417 Milam St Houston, TX 7700	2-9531				
8 Principal occup	ation / Job title (See Instructions	)	,	yer (See Instructions)		
Attorney			L. L.	evi Benton & Associates PLLC		
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)		
11/08/2024	Bracewell PAC				\$2,500.00	
	6 Contributor address;	City; State;	Zip Code			
	711 Louisiana St Ste 2300 Housto	n, TX 77002-2770				
8 Principal occup	ation / Job title (See Instructions	)	9 Employ	yer (See Instructions)		
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)		
10/16/2024	Theldon Branch III				\$2,500.00	
	6 Contributor address;	City; State;	Zip Code			
	3651 Maroneal St Houston, TX 7	7025-1324				
8 Principal occup	Principal occupation / Job title (See Instructions)  9 Employer (See Instructions)					
President and CEO				he Branch Companies		

SCHEDULE A1

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

The Ins	struction Guide explains how to	Total pages Schedule A1:     not available			
2 FILER NAME		3 Filer ID (Ethics Commission	Filers)		
Dexter Lorance-N	<del>,</del>				
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
09/12/2024	John Calhoun				\$2,500.00
	6 Contributor address;	City; State;	Zip Code		
	126 E Amite St Jackson, MS 3920	1-2101			
8 Principal occup President	eation / Job title (See Instructions)	)		ver (See Instructions) AS Engineers	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
10/16/2024	Darryl Carter				\$2,500.00
	6 Contributor address;	City; State;	Zip Code		<b>,</b>
	5651 Willers Way Houston, TX 77	7056-2608			
8 Principal occup	ation / Job title (See Instructions)	)	9 Employ	ver (See Instructions)	
Attorney			Se	elf	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
10/08/2024	Ellen Carter				\$250.00
	6 Contributor address;	City; State;	Zip Code		
	485 Malcolm X Blvd Apt 3J New	York, NY 10037-24	19		
8 Principal occup	ation / Job title (See Instructions)	)	9 Employ	er (See Instructions)	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
11/05/2024	Santiago Castaneda				\$10,000.00
	6 Contributor address;	City; State;	Zip Code		
	2426 Mills Creek Dr Kingwood, T	X 77339-3095			
		1	rer (See Instructions) MEGA ENGINEERS INC.		
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
10/30/2024	Mujahid Chandoo				\$500.00
	6 Contributor address;	City; State;	Zip Code		
	17411 Fechser Ln Richmond, TX	77407-2656			
8 Principal occup	ation / Job title (See Instructions)		9 Employ	er (See Instructions)	

SCHEDULE A1

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

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The Ins	truction Guide explains how to complete this form	Total pages Schedule A1:     not available		
2 FILER NAME Dexter Lorance-N	avario McCoy		3 Filer ID (Ethics Commission File	ers)
4 Date	5 Full name of contributorout-of-state PAC		7 Amount of contribution (\$)	
11/08/2024	Cobb Fendley PAC			\$500.00
	6 Contributor address; City; State; 2	Zip Code		
	13430 Northwest Fwy Ste 1100 Houston, TX 77040-6153			
8 Principal occup	ation / Job title (See Instructions)	9 Employ	ver (See Instructions)	
4 Date	5 Full name of contributorout-of-state PAC		7 Amount of contribution (\$)	
10/19/2024	Walter Criner			\$100.00
	6 Contributor address; City; State; 2	Zip Code		
	16243 Mission Glen Dr Houston, TX 77083-5261			
8 Principal occup	ation / Job title (See Instructions)	9 Employ	ver (See Instructions)	
4 Date	5 Full name of contributorout-of-state PAC		7 Amount of contribution (\$)	
10/22/2024	Barry Davis Jr			\$500.00
	6 Contributor address; City; State; 2	Zip Code		
	12828 Willow Centre Dr Ste # D Houston, TX 77066-304	13		
8 Principal occup	ation / Job title (See Instructions)	9 Employ	ver (See Instructions)	
4 Date	5 Full name of contributorout-of-state PAC		7 Amount of contribution (\$)	
11/13/2024	Maxine Dawkins			\$100.00
	6 Contributor address; City; State; 2	Zip Code		
	6831 River Bluff Dr Houston, TX 77085-1313			
8 Principal occup	ation / Job title (See Instructions)	9 Employ	yer (See Instructions)	
4 Date	5 Full name of contributorout-of-state PAC		7 Amount of contribution (\$)	
11/08/2024	David Eastwood			\$500.00
	6 Contributor address; City; State;	Zip Code		-
	17407 Highway 59 N Humble, TX 77396-3008			
	ation / Job title (See Instructions)	1	yer (See Instructions)	
Engineer		G	eotech Engineering & Testing	

SCHEDULE A1

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The In	struction Guide explains how to complete this	1 Total pages Schedule A1: not available		
2 FILER NAME Dexter Lorance-1	Navario McCoy		3 Filer ID (Ethics Commission I	Filers)
4 Date	5 Full name of contributorout-of-state PA	C	7 Amount of contribution (\$)	
12/16/2024	Sam Eaton			\$5,000.00
	6 Contributor address; City; Sta	te; Zip Code		40,000,00
	1300 Mcgowen St Houston, TX 77004-1141			
8 Principal occup CEO	pation / Job title (See Instructions)		yer (See Instructions) NE Green Team	
4 Date	5 Full name of contributorout-of-state PA	ю	7 Amount of contribution (\$)	
11/17/2024	Sandra Edwards			\$33.00
	6 Contributor address; City; Sta	te; Zip Code		455.00
	23303 Millcross Ln Katy, TX 77494-2165			
8 Principal occup	pation / Job title (See Instructions)	9 Employ	yer (See Instructions)	
4 Date	5 Full name of contributorout-of-state PA	.c	7 Amount of contribution (\$)	
11/08/2024	EHRA Engineering PAC			\$2,500.00
	6 Contributor address; City; Sta	te; Zip Code		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	10011 Meadowglen Ln Houston, TX 77042-3760			
8 Principal occup	pation / Job title (See Instructions)	9 Employ	yer (See Instructions)	
4 Date	5 Full name of contributorout-of-state PA	С	7 Amount of contribution (\$)	
11/05/2024	John English			\$1,000.00
	6 Contributor address; City; Star	te; Zip Code		
	7676 Hillmont St Houston, TX 77040-6400			
	pation / Job title (See Instructions)		ver (See Instructions)	
Ciivl & surve			EKHA Engineering Inc	
4 Date	5 Full name of contributorout-of-state PA	c	7 Amount of contribution (\$)	
10/04/2024	Debo Folorunsho			\$500.00
	6 Contributor address; City; Stat	te; Zip Code		
	3014 Wickwood Dr Pearland, TX 77584-5984			
8 Principal occup	pation / Job title (See Instructions)	9 Employ	ver (See Instructions)	

SCHEDULE A1

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The Instruction Guide explains how to complete this form.				1 Total pages Schedule A1: not available	
2 FILER NAM Dexter Lorance	E e-Navario McCoy			3 Filer ID (Ethics Commission File	rs)
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
11/08/2024	Matthew Froehlich				\$250.00
	6 Contributor address;	City; State;	Zip Code		\$230.00
	22943 Provincial Blvd Katy, TX		Zip Oddo		
8 Principal occ	cupation / Job title (See Instruction	s)	9 Emplo	yer (See Instructions)	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
11/08/2024	Front Porch Democrats				\$200.00
	6 Contributor address;	City; State;	Zip Code		
	707 Del Web Blvd Richmond, T	X 77469-5886			
8 Principal occ	cupation / Job title (See Instruction	s)	9 Emplo	yer (See Instructions)	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
11/08/2024	Mark Gehringer				\$2,500.00
	6 Contributor address;	City; State;	Zip Code		
	5714 Ashley Spring Ct Katy, TX	77494-2213			
8 Principal occ President	cupation / Job title (See Instruction	s)	1	yer (See Instructions) .G. Miller	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
11/08/2024	Costas Georghiou				\$1,500.00
	6 Contributor address;	City; State;	Zip Code		
	12335 Meadow Lake Dr Houston	n, TX 77077-5935			
8 Principal occ Engineer	cupation / Job title (See Instruction	s)		yer (See Instructions) GAL Inc.	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
10/29/2024	Cynthia Ginyard				\$50.00
	6 Contributor address;	City; State;	Zip Code		45 0.00
	11418 Oak Lake Ridge Ct Sugar				
8 Principal occ	cupation / Job title (See Instruction	s)	9 Emplo	yer (See Instructions)	nd nie

### SCHEDULE A1

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The Ins	truction Guide explains how to complete this for	Total pages Schedule A1:     not available		
2 FILER NAME Dexter Lorance-N	avario McCoy		3 Filer ID (Ethics Commission Filers)	
4 Date	5 Full name of contributorout-of-state PAC		7 Amount of contribution (\$)	
11/15/2024	Greater Houston Builders Assoc.		\$1,000.00	
	6 Contributor address; City; State;	Zip Code		
	9511 W Sam Houston Pkwy N Houston, TX 77064-539	8		
8 Principal occup	ation / Job title (See Instructions)	9 Employ	yer (See Instructions)	
4 Date	5 Full name of contributorout-of-state PAC		7 Amount of contribution (\$)	
11/08/2024	Halff Associates-State PAC		\$500.00	
	6 Contributor address; City; State;	Zip Code		
	1201 N Bowser Rd Richardson, TX 75081-2220			
8 Principal occup	ation / Job title (See Instructions)	9 Employ	yer (See Instructions)	
4 Date	5 Full name of contributorout-of-state PAC _		7 Amount of contribution (\$)	***************************************
11/08/2024	David Hamilton		\$250.00	
	6 Contributor address; City; State;	Zip Code		
	12315 Woodthorpe Ln Houston, TX 77024-4108			
	ation / Job title (See Instructions)	1	yer (See Instructions)	
Executive Vic		В	inkley & Barfield	
4 Date	5 Full name of contributorout-of-state PAC		7 Amount of contribution (\$)	
08/26/2024	Michael Harris		\$3,000.00	
	6 Contributor address; City; State;	Zip Code		
	1200 Smith St Ste 1550 Houston, TX 77002-4319			
8 Principal occup	ation / Job title (See Instructions)		yer (See Instructions)	
Attorney		Т	he Harris Law Firm	
4 Date	5 Full name of contributorout-of-state PAC _		7 Amount of contribution (\$)	
11/17/2024	Kevin Hattery		\$33.00	
	6 Contributor address; City; State;	Zip Code		
	3819 Villanova St Houston, TX 77005-3639			
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)				

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-1	Navario McCoy			3 Filer ID (Ethics Commission I	Filers)
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
11/05/2024	Vickie Henkel				\$1,500.00
	6 Contributor address;	City; State;	Zip Code		<b>\$1,00000</b>
	8630 Wyndham Village Dr Jersey	Village, TX 77040-1	142		
8 Principal occup Principal	pation / Job title (See Instructions	)		yer (See Instructions) sowman Consulting Group	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
11/08/2024	Jubair Hossain				\$2,500.00
	6 Contributor address;	City; State;	Zip Code		,-
	15627 Sand Bluestem Dr Cypress,	TX 77433-1883			
	pation / Job title (See Instructions	)		yer (See Instructions)	
President	E Cull name of contributor		Н Н	TS Inc Consultants	
4 Date	5 Full name of contributor	out-of-state PAC _		7 Amount of contribution (\$)	
11/21/2024	HR Green Texas PAC				\$500.00
	6 Contributor address;	City; State;	Zip Code		
	11011 Richmond Ave Ste 200 Hou	uston, TX 77042-660	1		
8 Principal occup	pation / Job title (See Instructions)	)	9 Employ	yer (See Instructions)	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
11/07/2024	John Hull				\$500.00
	6 Contributor address;	City; State;	Zip Code		
	7811 Dashwood Dr Houston, TX 7	77036-4939			
8 Principal occup	pation / Job title (See Instructions)	)	9 Employ	yer (See Instructions)	A THE STATE OF THE
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
11/08/2024	HVJ Political Action Committee				\$2,500.00
	6 Contributor address;	City; State;	Zip Code		
	6120 S Dairy Ashford Rd Houston	, TX 77072-1010			
8 Principal occup	pation / Job title (See Instructions)	)	9 Employ	yer (See Instructions)	
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SCHEDULE A1

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The	Instruction Guide explains how	to complete this fo	rm.	Total pages Schedule A1:     not available	
2 FILER NAM Dexter Lorance	E e-Navario McCoy			3 Filer ID (Ethics Commission Fil	ers)
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
12/05/2024	Harish JaJoo				\$2,500.00
	6 Contributor address;	City; State;	Zip Code		<b></b> ,
	62 Bradford Cir Sugar Land, TX	77479-2976			
8 Principal occ Engineer	cupation / Job title (See Instruction	is)		yer (See Instructions)  IJ Consulting	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
11/08/2024	Larry Janak				\$500.00
	6 Contributor address;	City; State;	Zip Code		\$550.00
	19215 Cohen Green Ln Lan Hou	ston, TX 77094-4127			
l	cupation / Job title (See Instruction	s)		yer (See Instructions)	
	Vice President		II	DCUS, Inc.	2-17-17-1
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
11/16/2024	Edna Jones-Webb				\$33.00
	6 Contributor address;	City; State;	Zip Code		
	8714 Petersburg Ln Houston, TX	77083-7212			
8 Principal occ	cupation / Job title (See Instruction	s)	9 Employ	yer (See Instructions)	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
11/06/2024	Nathan Junius				\$1,500.00
	6 Contributor address;	City; State;	Zip Code		·
	4 Thrush St New Orleans, LA 70	124-4117			
-	cupation / Job title (See Instruction	s)		yer (See Instructions)	
Civil Engi	<del></del>			infield Hunter & Junius Inc.	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)	
11/08/2024	KCI Texas PAC				\$2,500.00
	6 Contributor address;	City; State;	Zip Code		
	11550 W Interstate 10 Ste 395 Sa	an Antonio, TX 78230-	-1037		
8 Principal occ	cupation / Job title (See Instruction	s)	9 Employ	yer (See Instructions)	

SCHEDULE A1

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The Ins	struction Guide explains how to complete this for	Total pages Schedule A1:     not available		
2 FILER NAME Dexter Lorance-N	avario McCoy		3 Filer ID (Ethics Commission F	ilers)
4 Date	5 Full name of contributorout-of-state PAC _		7 Amount of contribution (\$)	
11/05/2024	Paul Kwan			\$1,500.00
	6 Contributor address; City; State;	Zip Code		
\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\parallel{\	13423 Amber Queen Ln Houston, TX 77041-5550			
8 Principal occup Engineer	ation / Job title (See Instructions)		ver (See Instructions) andtech Consultants, Inc	
4 Date	5 Full name of contributorout-of-state PAC _		7 Amount of contribution (\$)	
10/29/2024	Jason Lentz		!	\$500.00
	6 Contributor address; City; State;	Zip Code		
	7210 Meadow Lake Ave Dallas, TX 75214-3526			
8 Principal occup	ation / Job title (See Instructions)	9 Employ	ver (See Instructions)	A Commission of the Commission
4 Date	5 Full name of contributorout-of-state PAC _		7 Amount of contribution (\$)	
11/08/2024	Linebarger Goggin Blair & Sampson, LLP			\$1,500.00
	6 Contributor address; City; State;	Zip Code		
	PO Box 17428 Austin, TX 78760-7428			
8 Principal occup	ation / Job title (See Instructions)	9 Employ	ver (See Instructions)	
4 Date	5 Full name of contributorout-of-state PAC		7 Amount of contribution (\$)	
10/16/2024	Kevin Matocha			\$3,000.00
	6 Contributor address; City; State;	Zip Code		
	1600 Highway 6 Ste 245 Sugar Land, TX 77478-4991			
8 Principal occup President	ation / Job title (See Instructions)		ver (See Instructions) onehenge Holdings, LLC	
4 Date	5 Full name of contributorout-of-state PAC		7 Amount of contribution (\$)	
11/15/2024	Frank Mbachu			\$5,000.00
	6 Contributor address; City; State;	Zip Code		
	4419 April Meadow Way Sugar Land, TX 77479-3119			
8 Principal occup Civil Enginee	ation / Job title (See Instructions)	, ,	ver (See Instructions)	
CI.II DIIBIIO	-	^`		

#### 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.				Total pages Schedule A1:     not available		
2 FILER NAME Dexter Lorance-N	Javario McCoy				3 Filer ID (Ethics Commission F	ilers)
4 Date	5 Full name of contributor	out-of-state PA	/C		7 Amount of contribution (\$)	
11/08/2024	Dimitri Millas					\$500.00
	6 Contributor address;	City; Sta	te; Z	p Code		
	4408 Greeley St Houston, TX 77	006-5906				
8 Principal occup Partner	pation / Job title (See Instruction	s)		1	yer (See Instructions) forton Rose Fulbright	
4 Date	5 Full name of contributor	out-of-state PA	vc		7 Amount of contribution (\$)	
11/01/2024	Erik Miller					\$500.00
	6 Contributor address;	City; Sta	te; Zi	p Code		<b>4</b> - 2- 2- 2- 2- 2- 2- 2- 2- 2- 2- 2- 2- 2-
	5454 Jackwood St Houston, TX	77096-1236				
8 Principal occup	eation / Job title (See Instruction	s)			yer (See Instructions)	
Engineer	y			S	ander Engineering Corp	
4 Date	5 Full name of contributor	out-of-state PA	vс		7 Amount of contribution (\$)	
11/08/2024	Jack Miller					\$2,500.00
	6 Contributor address;	City; Sta	te; Zi	p Code		
	1146 Gardencrest Ln Ste 200 Ho	uston, TX 77077-1	1968			
8 Principal occup Engineer	pation / Job title (See Instruction	s)			yer (See Instructions) .G. Miller Engineers, Inc.	
4 Date	5 Full name of contributor	out-of-state PA	\С		7 Amount of contribution (\$)	
11/08/2024	Kevin Mineo					\$250.00
	6 Contributor address;	City; Sta	te; Zi	p Code		
	870 W 41st St Houston, TX 7701	8-5308				
8 Principal occupation / Job title (See Instructions) 9 Employ				yer (See Instructions)		
4 Date	5 Full name of contributor	out-of-state PA	\С		7 Amount of contribution (\$)	
11/08/2024	Marcelo Moacyr					\$250.00
	6 Contributor address;	City; Sta	te; Zi	p Code		
	5719 Martinique Pass Sugar Land	i, TX 77479-4158				
8 Principal occup Engineer	pation / Job title (See Instruction	s)			yer (See Instructions) GE Inc.	

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.				Total pages Schedule A1:     not available			
2 FILER NAME Dexter Lorance-N	lavario McCoy					3 Filer ID (Ethics Commission F	ilers)
4 Date	5 Full name of contributor	out-of-	state PAC			7 Amount of contribution (\$)	
09/26/2024	Rahmet Mohamed						\$5,000.00
	6 Contributor address;	City;	State;	Zip	Code		
	2219 Hermina Radler Dr Richmo	nd, TX 774	69-5180				
8 Principal occup Director	eation / Job title (See Instructions	s)		,		/er (See Instructions) nited Engineers Inc.	
4 Date	5 Full name of contributor	out-of-	state PAC			7 Amount of contribution (\$)	
10/08/2024	Harish Narayanappa						\$1,500.00
	6 Contributor address;	City;	State;	Zip	Code		<b>4-,-</b>
	5110 Camden Haven Ln Sugar La	and, TX 774	479-4654				
8 Principal occup	ation / Job title (See Instructions	3)		9		ver (See Instructions)	***************************************
Engineer					El	PIC Transportation Group LP	
4 Date	5 Full name of contributor	out-of-	state PAC			7 Amount of contribution (\$)	
10/29/2024	Harish Narayanappa						\$1,500.00
	6 Contributor address;	City;	State;	Zip	Code		
	5110 Camden Haven Ln Sugar La	and, TX 774	179-4654				
8 Principal occup Engineer	ation / Job title (See Instructions	5)		9		ver (See Instructions) PIC Transportation Group LP	
4 Date	5 Full name of contributor	out-of-s	state PAC			7 Amount of contribution (\$)	
10/28/2024	Oluwafemi Olagoroye						\$250.00
	6 Contributor address;	City;	State;	Zip	Code		
	3819 Preston Cove Ct Katy, TX 7	7494-3780					
8 Principal occupation / Job title (See Instructions) 9 E				Employ	ver (See Instructions)		
4 Date	5 Full name of contributor	out-of-	state PAC			7 Amount of contribution (\$)	
11/08/2024	Pape-Dawson Engineers PAC						\$5,000.00
	6 Contributor address;	City;	State;	Zip	Code		
Language .	2000 NW Loop 410 San Antonio,	TX 78213-	-2251				
8 Principal occup	ation / Job title (See Instructions	5)		9	Employ	ver (See Instructions)	

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-N	lavario McCoy			3 Filer ID (Ethics Commission	Filers)	
4 Date	5 Full name of contributor out-of-st	ate PAC		7 Amount of contribution (\$)		
11/08/2024	Kuldeep Patel				\$2,500.00	
	6 Contributor address; City;	State; Z	Zip Code		42,5 50100	
	11003 Ramp Creek Ln Sugar Land, TX 77498	-7231				
8 Principal occup Hotelier	pation / Job title (See Instructions)		1	ver (See Instructions) uldeep Patel		
4 Date	5 Full name of contributorout-of-st	ate PAC		7 Amount of contribution (\$)		
10/31/2024	Michelle Patton				\$50.00	
	6 Contributor address; City;	State; Z	Zip Code			
	20015 Crossvine Trail Ln Cypress, TX 77433-	5690				
8 Principal occup	ation / Job title (See Instructions)		9 Employ	ver (See Instructions)		
4 Date	5 Full name of contributorout-of-st	ate PAC		7 Amount of contribution (\$)		
11/08/2024	Satya Pilla				\$10,000.00	
	6 Contributor address; City;	State; Z	Zip Code		ŕ	
	4103 Oak Blossom Ct Houston, TX 77059-326	55				
8 Principal occup Principal	eation / Job title (See Instructions)			ver (See Instructions) GET Services, LLC	And the second s	
4 Date	5 Full name of contributorout-of-sta	ate PAC		7 Amount of contribution (\$)		
11/08/2024	Strisha Pillalamarri				\$500.00	
	6 Contributor address; City;	State; Z	Zip Code			
	23514 Desert Gold Dr Katy, TX 77494-0266					
8 Principal occup	ation / Job title (See Instructions)		9 Employ	er (See Instructions)		
4 Date	5 Full name of contributorout-of-st:	ate PAC		7 Amount of contribution (\$)		
11/07/2024	Sanjay Ramabhadran				\$2,500.00	
	6 Contributor address; City;	State; Z	Zip Code			
	13718 Bayou Parkway Ct Houston, TX 77077	-1129				
8 Principal occup Engineer	ation / Job title (See Instructions)			rer (See Instructions) ERSA Infrastructure		
			1			

### 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-				3 Filer ID (Ethics Commission	Filers)	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)		
11/08/2024	Randy Randermann				\$1,000.00	
	6 Contributor address;	City; State;	Zip Code			
	903 Windsor Woods Ln Katy, T.	X 77494-5000				
8 Principal occu Engineer	pation / Job title (See Instruction	s)		yer (See Instructions) frown & Gay	**************************************	
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)		
10/30/2024	Vijaya Rapolu				\$5,000.00	
	6 Contributor address;	City; State;	Zip Code		\$3,000.00	
	27822 Acacia Glen Ln Katy, TX	77494-3234				
,	pation / Job title (See Instruction	s)		yer (See Instructions)		
Engineer	-		K	avi Consulting Inc.		
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)		
10/30/2024	James Rice				\$500.00	
	6 Contributor address;	City; State;	Zip Code			
	7204 Town Center Blvd Apt 123	2 Rosenberg, TX 7747	71-6213			
	pation / Job title (See Instruction	s)	, ,	yer (See Instructions)	, , , , , , , , , , , , , , , , , , ,	
President			R	ice & Gardner Consultants Inc.		
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)		
10/30/2024	Ali Roshanfekr				\$2,500.00	
	6 Contributor address;	City; State;	Zip Code			
	1500 S Dairy Ashford Rd Ste 450	Houston, TX 77077-	3878			
	pation / Job title (See Instruction	s)	, ,	yer (See Instructions)		
consulting	-		C	ascade Civil Services		
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)		
11/05/2024	Lina Sabouni				\$10,000.00	
	6 Contributor address;	City; State;	Zip Code			
	23 Palm Blvd Missouri City, TX	77459-4499				
-	pation / Job title (See Instruction	s)	1	yer (See Instructions)		
Principal in	Charge		A	utoarch Architects		

SCHEDULE A1

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

The I	nstruction Guide explains how	to complete this f	form.	Total pages Schedule A1:     not available			
2 FILER NAME Dexter Lorance	-Navario McCoy			3 Filer ID (Ethics Commission	Filers)		
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)			
10/17/2024	Andrew Schatte				\$3,000.00		
	6 Contributor address;	City; State;	; Zip Code		4-,		
	5330 Montrose Blvd Houston, T	X 77005-1831					
8 Principal occu	upation / Job title (See Instruction	s)		yer (See Instructions) america's Holding, Ltd.			
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)			
11/05/2024	Daniel Signorelli				\$1,500.00		
	6 Contributor address;	City; State;	Zip Code				
	1401 Woodlands Pkwy The Woo	dlands, TX 77380-1	122				
	upation / Job title (See Instruction	s)		yer (See Instructions)			
CEO			Т	he Signorelli Company			
4 Date	5 Full name of contributor	out-of-state PAC	V-1	7 Amount of contribution (\$)			
11/08/2024	Bobby Singh				\$5,000.00		
	6 Contributor address;	City; State;	Zip Code				
	10448 Westoffice Dr Houston, T.	X 77042-5309					
8 Principal occu Consultant	upation / Job title (See Instruction	s)	1	yer (See Instructions) sani Consultants LP			
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)			
11/27/2024	Priti Singh				\$5,000.00		
	6 Contributor address;	City; State;	Zip Code				
	28 Whitworth Way Sugar Land,	ΓX 77479-2531					
				yer (See Instructions)			
Self employ			A	ssociated Testing Laboratories Inc.			
4 Date	5 Full name of contributor	out-of-state PAC		7 Amount of contribution (\$)			
11/07/2024	Jay Sunderwala				\$500.00		
•	6 Contributor address;	City; State;	Zip Code				
	16602 Arbor Oak Leaf Ct Cypress, TX 77433-0134						
	upation / Job title (See Instructions	s)	1 ' '	yer (See Instructions)			
Engineer			N	inyo & Moore			

SCHEDULE A1

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2 FILER NAME Dexter Lorance-Navario McCoy  4 Date 5 Full name of contributor	The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
4 Date 11/08/2024  5 Full name of contributor	1		
Muhammad Tahir 6 Contributor address; City; State; Zip Code 3802 Windmill Links Dr Richmond, TX 77407-3272  8 Principal occupation / Job title (See Instructions)  4 Date 11/08/2024     Teague Nall and Perkins (TNP) PAC 6 Contributor address; City; State; Zip Code 5237 N Riverside Dr Ste 100 Fort Worth, TX 76137-2409  8 Principal occupation / Job title (See Instructions)  9 Employer (See Instructions)  19 Employer (See Instructions)  9 Employer (See Instructions)  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/2024  10/15/		TEE-Warren Control of the Control of	
6 Contributor address; City; State; Zip Code 3802 Windmill Links Dr Richmond, TX 77407-3272  8 Principal occupation / Job title (See Instructions)  4 Date 5 Full name of contributor			/ Amount of contribution (\$)
3802 Windmill Links Dr Richmond, TX 77407-3272   9 Employer (See Instructions)   9 Employer (See Instructions)   11/08/2024   Teague Nall and Perkins (TNP) PAC   6 Contributor address; City; State; Zip Code   5237 N Riverside Dr Ste 100 Fort Worth, TX 76137-2409   9 Employer (See Instructions)   9 Employer (See Instructions)   10/15/2024   Haddis Tewolde   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/2024   10/15/202	11/08/2024	Muhammad Tahir	\$50.00
8 Principal occupation / Job title (See Instructions)  4 Date 5 Full name of contributor Teague Nall and Perkins (TNP) PAC 6 Contributor address; City; State; Zip Code 5237 N Riverside Dr Ste 100 Fort Worth, TX 76137-2409  8 Principal occupation / Job title (See Instructions)  4 Date 5 Full name of contributor Tout-of-state PAC 215 Calling Bird Ct Missouri City, TX 77459-1955  8 Principal occupation / Job title (See Instructions)  9 Employer (See Instructions)  9 Employer (See Instructions)  9 Employer (See Instructions)  10/15/2024 Haddis Tewolde 6 Contributor address; City; State; Zip Code 2415 Calling Bird Ct Missouri City, TX 77459-1955  8 Principal occupation / Job title (See Instructions) engineer  4 Date 5 Full name of contributor Out-of-state PAC 6 Contributor address; City; State; Zip Code 8234 Gunston Commons Way Lorton, VA 22079-5027  8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 9 Employer (See Instructions) 9 Employer (See Instructions) 10/16/2024  5 Full name of contributor Out-of-state PAC 200457853 7 Amount of contribution (\$) 10/16/2024 15 Full name of contributor Force Instructions 7 Amount of contribution (\$) 10/16/2024 15 Full name of contributor Force Instructions 9 Employer (See Instructions) 10/16/2024 15 Full name of contributor Force Instructions 17 Amount of contribution (\$) 10/16/2024 15 Full name of contributor Force Instructions 17 Amount of contribution (\$) 11/16/2024 15 Full name of contributor Force Instructions 17 Amount of contribution (\$) 11/16/2024 15 Full name of contributor Force Instructions 17 Amount of contribution (\$) 11/16/2024 15 Full name of contributor Force Instructions 17 Amount of contribution (\$) 11/16/2024 15 Full name of contributor Force Instructions 17 Amount of contribution (\$) 11/16/2024 15 Full name of contributor Force Instructions 17 Amount of contribution (\$) 11/16/2024 15 Full name of contributor Force Instructions 17 Amount of contribution (\$) 11/16/2024 15 Full name of contributor Force Instructions 17 Amount of		6 Contributor address; City; State; Zip Co	ode
4 Date   5 Full name of contributor   out-of-state PAC   7 Amount of contribution (\$)		3802 Windmill Links Dr Richmond, TX 77407-3272	
Teague Nall and Perkins (TNP) PAC 6 Contributor address; City; State; Zip Code 5237 N Riverside Dr Ste 100 Fort Worth, TX 76137-2409  8 Principal occupation / Job title (See Instructions)  9 Employer (See Instructions)  10/15/2024 Haddis Tewolde 6 Contributor address; City; State; Zip Code 2415 Calling Bird Ct Missouri City, TX 77459-1955  8 Principal occupation / Job title (See Instructions)  9 Employer (See Instructions) All-Terra Eng.  4 Date 5 Full name of contributor out-of-state PAC 7 Amount of contribution (\$) 10/14/2024 Jahan Tolliver 6 Contributor address; City; State; Zip Code 8234 Gunston Commons Way Lorton, VA 22079-5027  8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 5 Full name of contributor Out-of-state PAC 7 Amount of contribution (\$) 10/14/2024 Jahan Tolliver 6 Contributor address; City; State; Zip Code 8234 Gunston Commons Way Lorton, VA 22079-5027  8 Principal occupation / Job title (See Instructions) 7 Amount of contribution (\$) 10/16/2024 TSVC, Inc. Political Action Committee (Terracon PAC) 6 Contributor address; City; State; Zip Code 10/16/2024 TSVC, Inc. Political Action Committee (Terracon PAC) 6 Contributor address; City; State; Zip Code	8 Principal occ	cupation / Job title (See Instructions) 9 E	mployer (See Instructions)
8 Principal occupation / Job title (See Instructions)  9 Employer (See Instructions)  10/15/2024 Haddis Tewolde 6 Contributor Out-of-state PAC 2415 Calling Bird Ct Missouri City, TX 77459-1955  8 Principal occupation / Job title (See Instructions)  9 Employer (See Instructions)  9 Employer (See Instructions)  10/15/2024 Haddis Tewolde 5 (City, State, Zip Code 2415 Calling Bird Ct Missouri City, TX 77459-1955  8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)  10/14/2024 Jahan Tolliver 6 Contributor Out-of-state PAC 7 Amount of contribution (\$)  10/14/2024 Jahan Tolliver 6 Contributor A22079-5027  8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)  10/16/2024 TSVC, Inc. Political Action Committee (Terracon PAC) 7 Amount of contribution (\$)  10/16/2024 State 7 Amount of contribution (\$)  10/16/2024 TSVC, Inc. Political Action Committee (Terracon PAC) 5 (City, State, Zip Code) 51,500.00	4 Date	5 Full name of contributorout-of-state PAC	7 Amount of contribution (\$)
6 Contributor address; City; State; Zip Code 5237 N Riverside Dr Ste 100 Fort Worth, TX 76137-2409  8 Principal occupation / Job title (See Instructions)  4 Date 5 Full name of contributor Haddis Tewolde 6 Contributor address; City; State; Zip Code 2415 Calling Bird Ct Missouri City, TX 77459-1955  8 Principal occupation / Job title (See Instructions) engineer  4 Date 5 Full name of contributor out-of-state PAC 215 Calling Bird Ct Missouri City, TX 77459-1955  8 Principal occupation / Job title (See Instructions) engineer  4 Date 5 Full name of contributor out-of-state PAC 217 Amount of contribution (\$)  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10,000  \$10	11/08/2024	Teague Nall and Perkins (TNP) PAC	\$1,000,00
S 237 N Riverside Dr Ste 100 Fort Worth, TX 76137-2409		6 Contributor address; City; State; Zip Co	1
4 Date   5 Full name of contributor   out-of-state PAC   7 Amount of contribution (\$)			
Haddis Tewolde 6 Contributor address; City; State; Zip Code 2415 Calling Bird Ct Missouri City, TX 77459-1955  8 Principal occupation / Job title (See Instructions) engineer  4 Date 5 Full name of contributor  G Contributor address; City; State; Zip Code 8234 Gunston Commons Way Lorton, VA 22079-5027  8 Principal occupation / Job title (See Instructions)  8 Principal occupation / Job title (See Instructions)  9 Employer (See Instructions)  10/14/2024  9 Employer (See Instructions)  9 Employer (See Instructions)  10/16/2024  7 Amount of contribution (\$)  10/16/2024  TSVC, Inc. Political Action Committee (Terracon PAC) 6 Contributor address; City; State; Zip Code  10/16/2024  10/16/2024  10/16/2024  10/16/2024  10/16/2024  10/16/2024  10/16/2024  10/16/2024	8 Principal occ	cupation / Job title (See Instructions) 9 E	:mployer (See Instructions)
Haddis Tewolde 6 Contributor address; City; State; Zip Code 2415 Calling Bird Ct Missouri City, TX 77459-1955  8 Principal occupation / Job title (See Instructions) engineer  4 Date 5 Full name of contributor    Out-of-state PAC   7 Amount of contribution (\$)   Out-of-state PAC   9 Employer (See Instructions)   All-Terra Eng.   7 Amount of contribution (\$)   10/14/2024   Jahan Tolliver   6 Contributor address; City; State; Zip Code   8234 Gunston Commons Way Lorton, VA 22079-5027   9 Employer (See Instructions)  8 Principal occupation / Job title (See Instructions)   9 Employer (See Instructions)   7 Amount of contribution (\$)   Out-of-state PAC   C00457853   7 Amount of contribution (\$)   10/16/2024   TSVC, Inc. Political Action Committee (Terracon PAC)   6 Contributor address; City; State; Zip Code   \$1,500.00	4 Date	5 Full name of contributor	7 Amount of contribution (\$)
6 Contributor address; City; State; Zip Code 2415 Calling Bird Ct Missouri City, TX 77459-1955  8 Principal occupation / Job title (See Instructions) engineer  4 Date 5 Full name of contributor  10/14/2024  Jahan Tolliver 6 Contributor address; City; State; Zip Code 8234 Gunston Commons Way Lorton, VA 22079-5027  8 Principal occupation / Job title (See Instructions)  9 Employer (See Instructions)  \$100.00  \$100.00  \$100.00  \$100.00  \$210.00  \$210.00  \$210.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00  \$220.00	10/15/2024	Haddis Tewolde	\$1 500 00
8 Principal occupation / Job title (See Instructions) engineer  5 Full name of contributor  10/14/2024  Jahan Tolliver 6 Contributor address; City; State; Zip Code 8234 Gunston Commons Way Lorton, VA 22079-5027  8 Principal occupation / Job title (See Instructions)  9 Employer (See Instructions)  9 Employer (See Instructions)  9 Employer (See Instructions)  10/16/2024  7 Amount of contribution (\$)  10/16/2024  TSVC, Inc. Political Action Committee (Terracon PAC) 6 Contributor address; City; State; Zip Code  \$1,500.00		6 Contributor address; City; State; Zip Co	1
engineer  4 Date 5 Full name of contributor 10/14/2024 Jahan Tolliver 6 Contributor address; City; State; Zip Code 8234 Gunston Commons Way Lorton, VA 22079-5027  8 Principal occupation / Job title (See Instructions)  9 Employer (See Instructions)  4 Date 5 Full name of contributor Vout-of-state PAC C00457853 10/16/2024 TSVC, Inc. Political Action Committee (Terracon PAC) 6 Contributor address; City; State; Zip Code  \$1,500.00		2415 Calling Bird Ct Missouri City, TX 77459-1955	
4 Date   5 Full name of contributor   out-of-state PAC   7 Amount of contribution (\$)  10/14/2024   Jahan Tolliver   \$100.00 6 Contributor address;   City;   State;   Zip Code   8234 Gunston Commons Way Lorton, VA 22079-5027  8 Principal occupation / Job title (See Instructions)   9 Employer (See Instructions)  4 Date   5 Full name of contributor   out-of-state PAC   c00457853   7 Amount of contribution (\$)  10/16/2024   TSVC, Inc. Political Action Committee (Terracon PAC)   \$1,500.00		cupation / Job title (See Instructions) 9 E	
Jahan Tolliver 6 Contributor address; City; State; Zip Code 8234 Gunston Commons Way Lorton, VA 22079-5027  8 Principal occupation / Job title (See Instructions)  9 Employer (See Instructions)  4 Date 5 Full name of contributor  Cout-of-state PAC C00457853  TSVC, Inc. Political Action Committee (Terracon PAC) 6 Contributor address; City; State; Zip Code  \$1,500.00		5 Full name of contributor	
6 Contributor address; City; State; Zip Code 8234 Gunston Commons Way Lorton, VA 22079-5027  8 Principal occupation / Job title (See Instructions)  9 Employer (See Instructions)  4 Date 5 Full name of contributor  Cout-of-state PAC C00457853  TSVC, Inc. Political Action Committee (Terracon PAC) 6 Contributor address; City; State; Zip Code  \$1,500.00		out of state 1770	—— / Amount of contribution (4)
8234 Gunston Commons Way Lorton, VA 22079-5027  8 Principal occupation / Job title (See Instructions)  9 Employer (See Instructions)  4 Date 10/16/2024  5 Full name of contributor	10/14/2024		
8 Principal occupation / Job title (See Instructions)  9 Employer (See Instructions)  4 Date 5 Full name of contributor  Out-of-state PAC C00457853  TSVC, Inc. Political Action Committee (Terracon PAC) 6 Contributor address; City; State; Zip Code  9 Employer (See Instructions)  7 Amount of contribution (\$)  \$1,500.00			pde
4 Date 5 Full name of contributor Jout-of-state PAC C00457853 7 Amount of contribution (\$)  10/16/2024 TSVC, Inc. Political Action Committee (Terracon PAC) \$1,500.00 6 Contributor address; City; State; Zip Code		8234 Gunston Commons Way Lorton, VA 22079-5027	
10/16/2024 TSVC, Inc. Political Action Committee (Terracon PAC) 6 Contributor address; City; State; Zip Code	8 Principal occ	cupation / Job title (See Instructions) 9 E	mployer (See Instructions)
10/16/2024 TSVC, Inc. Political Action Committee (Terracon PAC) \$1,500.00 6 Contributor address; City; State; Zip Code	4 Date	5 Full name of contributor Jout-of-state PAC C00457853	7 Amount of contribution (\$)
6 Contributor address; City; State; Zip Code	10/16/2024		
10841 S Ridgeview Rd Olathe, KS 66061-6456		6 Contributor address; City; State; Zip Co	
ı ı		10841 S Ridgeview Rd Olathe, KS 66061-6456	
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	8 Principal occ	cupation / Job title (See Instructions) 9 E	mployer (See Instructions)

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.				Total pages Schedule A1:     not available		
2 FILER NAME Dexter Lorance-N	lavario McCoy				3 Filer ID (Ethics Commission F	ilers)
4 Date	5 Full name of contributor	Out-of-	state PAC		7 Amount of contribution (\$)	
09/16/2024	Asim Tufail					\$2,500.00
	6 Contributor address;	City;	State;	Zip Code		
	5447 Larkin St Houston, TX 770	07-1803				
8 Principal occup Engineer	eation / Job title (See Instructions	s)		9 Emp	oloyer (See Instructions) Blackline Engineering	
4 Date	5 Full name of contributor	out-of-	state PAC		7 Amount of contribution (\$)	
09/08/2024	Llarance Turner					\$1,500.00
	6 Contributor address;	City;	State;	Zip Code		
	1311 Lodge Ct Missouri City, TX	77489-161	15			
8 Principal occup	ation / Job title (See Instructions	s)		9 Emp	oloyer (See Instructions)	
Surveyor/Eng					Kaluza Inc	
4 Date	5 Full name of contributor	out-of-	state PAC _		7 Amount of contribution (\$)	
10/15/2024	Ahmed Valdez					\$2,500.00
	6 Contributor address;	City;	State;	Zip Code		
	15310 Skyhill Dr Cy <del>pre</del> ss, TX 77	433-4073				
8 Principal occup Engineer	ation / Job title (See Instructions	s)		9 Emp	oloyer (See Instructions) Ahmed Valdez	
4 Date	5 Full name of contributor	out-of-s	state PAC _		7 Amount of contribution (\$)	
11/08/2024	Woolpert, Inc. PAC					\$2,500.00
	6 Contributor address;	City;	State;	Zip Code		
	4454 Idea Center Blvd Beavercre	ek, OH 454	30-1500			
8 Principal occupation / Job title (See Instructions)			9 Emp	oloyer (See Instructions)	1 to	
4 Date	5 Full name of contributor	out-of-s	state PAC		7 Amount of contribution (\$)	
10/15/2024	Anwar Zahid					\$5,000.00
	6 Contributor address;	City;	State;	Zip Code		
	19 Lake Como Dr Missouri City,	TX 77459-	1484			
, ,	ation / Job title (See Instructions	s)		9 Emp	loyer (See Instructions)	
Engineer					infraTECH	

SCHEDULE F1

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

	EXPENDITURE C	ATEGORIES FOR BOX	8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Fees Office C Food/Beverage Expense Polling y Gift/Awards/Memorials Expense Printing	s/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
1 Total pages Schedule F1:	2 FILER NAME	3 Fil	er ID (Ethics Commission Filers)
not available	Dexter Lorance-Navario McCoy		
4 Date 09/16/2024	5 Payee name AC Hotel by Marriott Washington DC	Convention Center	
6 Amount (\$) \$970.50	7 Payee address; City; 601 K St NW Washington, DC 20001-2		Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top Travel Out Of District	1, ,	iption g during CBC
	(C) Check if travel outside of Texas. Complet		ck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sough	ht Office held
4 Date	5 Payee name		
09/01/2024	ActBlue		
6 Amount (\$) \$118.50	7 Payee address; City; 366 Summer St Somerville, MA 02144		Zip Code
PURPOSE OF	(a) Category (See categories listed at the top Fees	of this schedule) (b) Descri	·
EXPENDITURE	(C) Check if travel outside of Texas. Complet	e Schedule TChec	k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sough	ht Office held

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SCHEDULE F1

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

	EXPENDIT	URE CATEGORIES	FOR BOX	8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made E Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense by Gift/Awards/Memorials Expense Legal Services The Instruction Guid	Loan/Repayment/Reiml Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contra- de explains how to con	ct Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
Total pages Schedule F1:     not available	2 FILER NAME Dexter Lorance-Navario McCo	y	3 File	er ID (Ethics Commission Filers)
4 Date 09/08/2024	5 Payee name ActBlue		<b>'</b>	
6 Amount (\$) \$59.25	7 Payee address; 366 Summer St Somerville, MA	City; A 02144-3132	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed a Fees  (c) Check if travel outside of Texas	Constitution of the Consti	(b) Descri	ption  k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held
4 Date 09/15/2024	5 Payee name ActBlue			
6 Amount (\$) \$98.75	7 Payee address; 366 Summer St Somerville, MA	City; A 02144-3132	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed a Fees  (c) Check if travel outside of Texas		(b) Descri Service Fee	ption  k if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held

SCHEDULE F1

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

	EXPENDIT	TURE CATEGORIES	FOR BOX	8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Loan/Repayment/Reim Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	al act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
1 Total pages Schedule F1:	2 FILER NAME		3 File	er ID (Ethics Commission Filers)
not available	Dexter Lorance-Navario McCo	у		
4 Date	5 Payee name			
09/22/2024	ActBlue			
6 Amount (\$) \$98.75	7 Payee address; 366 Summer St Somerville, M.	City; A 02144-3132	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed Fees	at the top of this schedule)	(b) Descri Service Fee	•
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held
4 Date	5 Payee name			
09/29/2024	ActBlue			
6 Amount (\$) \$217.25	7 Payee address; 366 Summer St Somerville, M.	City; A 02144-3132	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed Fces	at the top of this schedule)	(b) Descri Service Fee	ption
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services The Instruction Guid	Loan/Repayment/Reimb Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contrac de explains how to com	t Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) orm.
1 Total pages Schedule F1:	2 FILER NAME		3 File	r ID (Ethics Commission Filers)
not available	Dexter Lorance-Navario McCo	у		
4 Date 10/06/2024	5 Payee name ActBlue			
6 Amount (\$) \$19.75	7 Payee address; 366 Summer St Somerville, M.	City; A 02144-3132	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Fees  (c) Check if travel outside of Texa		(b) Descrip Service Fee	otion  if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought	
4 Date 10/13/2024	5 Payee name ActBlue			
6 Amount (\$) \$108.63	7 Payee address; 366 Summer St Somerville, M.	City; A 02144-3132	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Fees		(b) Descrip Service Fee	
9 Complete ONLY if direct expenditure to benefit C/OH	(c) Check if travel outside of Texa  Candidate / Officeholder name		Check	if Austin, TX, officeholder living expense Office held

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Loan/Repayment/Reimbursement Fees Office Overhead/Rental Transportation Equipment & Related Expense Expense Polling Expense Printing Expense Travel In District Travel Out of District Other (enter a category not listed above)  The Instruction Guide explains how to complete this form.			Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME		3 File	er ID (Ethics Commission Filers)
not available	Dexter Lorance-Navario McCo	у		· · · · · · · · · · · · · · · · · · ·
4 Date	5 Payee name			
10/20/2024	ActBlue			
6 Amount (\$) \$363.40	7 Payee address; 366 Summer St Somerville, M.	City; A 02144-3132	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Fees	at the top of this schedule)	(b) Descri Service Fee	ption
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held
4 Date 10/27/2024	5 Payee name ActBlue			
6 Amount (\$) \$19.75	7 Payee address; 366 Summer St Somerville, M.	City; A 02144-3132	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Fees  (c) Check if travel outside of Texa		(b) Descri	ption k if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	t Office held

SCHEDULE F1

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

	EXPENDIT	URE CATEGORIES	FOR BOX	8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense by Gift/Awards/Memorials Expense Legal Services The Instruction Guid	Loan/Repayment/Reim Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	al act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.	
Total pages Schedule F1:     not available	2 FILER NAME Dexter Lorance-Navario McCo	у	3 File	er ID (Ethics Commission Filers)	
4 Date 11/03/2024	5 Payee name ActBlue				
6 Amount (\$) \$547.09	7 Payee address; 366 Summer St Somerville, MA	City; A 02144-3132	State:	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Fees  (c) Check if travel outside of Texas	to the state of th	(b) Descri	ption  * If Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough		
4 Date 11/10/2024	5 Payee name ActBlue				
6 Amount (\$) \$762.36	7 Payee address; 366 Summer St Somerville, MA	City; A 02144-3132	State:	Zip Code	
8 PURPOSE OF	(a) Category (See categories listed Fees	at the top of this schedule)	(b) Descri Service Fee	ption	
EXPENDITURE	(C) Check if travel outside of Texas	s. Complete Schedule T.	Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held	

SCHEDULE F1

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

	EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Loan/Repayment/Reim Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	al act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.	
1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorance-Navario McCo	ру	3 File	er ID (Ethics Commission Filers)	
4 Date 11/17/2024	5 Payee name ActBlue				
6 Amount (\$) \$3.93	7 Payee address; 366 Summer St Somerville, M.	City; A 02144-3132	State:	Zip Code	
8 PURPOSE OF	(a) Category (See categories listed Fees	at the top of this schedule)	(b) Descrip Service Fee	ption	
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Check	k if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	office held	
4 Date 12/01/2024	5 Payee name ActBlue				
6 Amount (\$) \$197.50	7 Payee address; 366 Summer St Somerville, M.	City; A 02144-3132	State:	Zip Code	
8 PURPOSE OF	(a) Category (See categories listed Fees	at the top of this schedule)	(b) Descrip Service Fee	ption	
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Check	k if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	t Office held	

SCHEDULE F1

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

	EXPENDITURI	E CATEGORIES FOR E	3OX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Fees Office Food/Beverage Expense Polli y Gift/Awards/Memorials Expense Prin	aries/Wages/Contract Labo	Transportation Expense Travel In Distri Travel Out of D Other (enter a	
Total pages Schedule F1:     not available	2 FILER NAME Dexter Lorance-Navario McCoy		3 Filer ID (Ethics C	ommission Filers)
4 Date 09/24/2024	5 Payee name Allied Signs			
6 Amount (\$) \$3,721.64	7 Payee address; C 6820 Harwin Dr Houston, TX 77036		tate:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the Printing Expense	Printin		
9 Complete ONLY if direct expenditure to benefit C/OH	(c) Check if travel outside of Texas. Con Candidate / Officeholder name	oplete Schedule T. Office s	Check if Austin, TX, officesought	oeholder living expense Office held
4 Date 10/28/2024	5 Payee name ALPHA MERIT GROUP COMMIT	TTEE, INC.	and the second s	
6 Amount (\$) \$1,000.00	7 Payee address; C PO Box 150303 Dallas, TX 75315-0		ate:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed at the Contributions/Donations Made By Candidate/Officeholder/Political Committee	top of this schedule) (b) Donati	escription ion	
EXPENDITURE	(C) Check if travel outside of Texas. Con	nplete Schedule T.	Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office s	sought	Office held

SCHEDULE F1

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

	EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Loan/Repayment/Reimt Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contrac e explains how to cor	ct Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (eriter a category not listed above) form.	
Total pages Schedule F1:     not available	2 FILER NAME Dexter Lorance-Navario McCoy	<i>y</i>	3 File	er ID (Ethics Commission Filers)	
4 Date 09/05/2024	5 Payee name Amazon		***************************************		
6 Amount (\$) \$275.19	7 Payee address; 410 Terry Ave N Seattle, WA 9	City; 8109-5210	State:	Zip Code	
8 PURPOSE OF	(a) Category (See categories listed a Office Overhead/Rental Expense	at the top of this schedule)	(b) Descri Office suppl	•	
EXPENDITURE	(C) Check if travel outside of Texas	. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held	
4 Date 09/25/2024	5 Payee name Amazon				
6 Amount (\$) \$102.02	7 Payee address; 410 Terry Ave N Seattle, WA 9	City; 8109-5210	State:	Zip Code	
8 PURPOSE OF	(a) Category (See categories listed a Office Overhead/Rental Expense	at the top of this schedule)	(b) Descri Office suppl	•	
EXPENDITURE	(C) Check if travel outside of Texas	. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Candidate/Officeholder/Political Committee	Event Expense Loan/Repayment Fees Office Overhead/ Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Legal Services Salaries/Wages/Commondations  Legal Services Loan/Repayment Office Overhead/ Polling Expense Salaries/Wages/Commondations  Salaries/Wages/Commondations	Rental Transportation Equipment & Related Expense Travel In District Contract Labor Travel Out of District Other (enter a category not listed above)		
Credit Card Payment	The Instruction Guide explains how			
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)		
not available	Dexter Lorance-Navario McCoy			
4 Date	5 Payee name			
12/30/2024	Amazon			
6 Amount (\$) \$86.04	7 Payee address; City;	State: Zip Code		
	410 Terry Ave N Seattle, WA 98109-5210			
8 PURPOSE OF	(a) Category (See categories listed at the top of this sche Office Overhead/Rental Expense	(b) Description Office supplies		
EXPENDITURE	(C) Check if travel outside of Texas. Complete Schedule	T. Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held		
4 Date	5 Payee name			
11/29/2024	American Leadership Forum			
6 Amount (\$) \$1,500.00	7 Payee address; City; 1801 Main St Houston, TX 77002-8120	State: Zip Code		
8	(a) Category (See categories listed at the top of this sche	edule) (b) Description		
PURPOSE OF	Fees	Fee Fee		
EXPENDITURE	(C) Check if travel outside of Texas. Complete Schedule			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held		

SCHEDULE F1

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	EXPENDIT	URE CATEGORIES F	OR BOX 8	B(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made E Candidate/Officeholder/Political Committee Credit Card Payment	Fees Food/Beverage Expense  Gift/Awards/Memorials Expense  Legal Services	Loan/Repayment/Reimbo Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contract e explains how to com	t Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
1 Total pages Schedule F1:	2 FILER NAME		3 File	er ID (Ethics Commission Filers)
not available	Dexter Lorance-Navario McCoy	7		
4 Date 12/19/2024	5 Payee name Board & Brush			
6 Amount (\$) \$603.00	7 Payee address; 16338 Kensington Dr Ste 110 St	City; ugar Land, TX 77479-43	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed a Food/Beverage Expense  (c) Check if travel outside of Texas.		(b) Description (b) Description (b) Staff holiday	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	C	Office sough	t Office held
4 Date 12/31/2024	5 Payee name BreakingBounds, LLC			
6 Amount (\$) \$3,000.00	7 Payee address; 225 Matlage Way Unit 1325 Sug	City; gar Land, TX 77487-094	State:	Zip Code
8 PURPOSE OF OF	(a) Category (See categories listed a Office Overhead/Rental Expense		(b) Descrip	
EXPENDITURE	(C) Check if travel outside of Texas.	Complete Schedule T.	Check	k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	C	Office sough	t Office held

SCHEDULE F1

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	EXPENDI	TURE CATEGORIES	FOR BOX	8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Loan/Repayment/Rein Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	al act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorance-Navario McCo	ру	3 File	er ID (Ethics Commission Filers)
4 Date 09/19/2024	5 Payee name BUSBOYS AND POETS WA	SHINGTON DC		
6 Amount (\$) \$163.02	7 Payee address; 2021 14th St NW Washington,	City; DC 20009-4436	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed Food/Beverage Expense	at the top of this schedule)	(b) Descri Meal during	
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held
4 Date 07/19/2024	5 Payee name James Cardona			
6 Amount (\$) \$2,680.00	7 Payee address; 5216 Leeland St Houston, TX	City; 77023-2022	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed Consulting Expense	at the top of this schedule)	(b) Descri	•
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held

SCHEDULE F1

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		EXPENDIT	URE CATEGORIES	FOR BOX	EXPENDITURE CATEGORIES FOR BOX 8(a)				
ACCCC	dvertising Expense ccounting/Banking onsulting Expense ontributions/Donations Made By andidate/Officeholder/Political ommittee redit Card Payment	/Banking Fees Office Overhead/Rental Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense ns/Donations Made By Gift/Awards/Memorials Expense Printing Expense Officeholder/Political Legal Services Salaries/Wages/Contract Labor  Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above)							
1	Total pages Schedule F1:	2 FILER NAME		3 Fi	er ID (Ethics Commission Filers)				
	not available	Dexter Lorance-Navario McCo	у						
4	Date	5 Payee name							
	11/19/2024	James Cardona							
6	Amount (\$) \$8,635.94	7 Payee address; 5216 Leeland St Houston, TX	City; 77023-2022	State:	Zip Code				
8	PURPOSE OF	(a) Category (See categories listed Consulting Expense	at the top of this schedule)	(b) Descr Consulting	iption fee & event reimbursements				
	EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Che	k if Austin, TX, officeholder living expense				
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office soug	nt Office held				
4	Date	5 Payee name							
	12/20/2024	Central Fort Bend Chamber							
6	Amount (\$) \$975.00	7 Payee address; 4120 Avenue H Rosenberg, TX	City; 77471-2833	State:	Zip Code				
8	PURPOSE OF	(a) Category (See categories listed Contributions/Donations Made By Candidate/Officeholder/Political Comm		(b) Descr Donation	ption				
	EXPENDITURE	(C) Check if travel outside of Texas	s. Complete Schedule T.	Che	k if Austin, TX, officeholder living expense				
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office soug	nt Office held				

SCHEDULE F1

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	EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Loan/Repayment/Rein Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	al act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.	
Total pages Schedule F1:     not available	2 FILER NAME Dexter Lorance-Navario McCo	ру	3 File	er ID (Ethics Commission Filers)	
4 Date 08/01/2024	5 Payee name Chick Fil A				
6 Amount (\$) \$52.19	7 Payee address; 5644 W Grand Pkwy S Richmo	City; ond, TX 77406	State:	Zip Code	
8 PURPOSE OF	(a) Category (See categories listed Food/Beverage Expense	at the top of this schedule)	(b) Descrip Breakfast for	otion summer interns last day	
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Check	t if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	t Office held	
4 Date 11/27/2024	5 Payee name Clayton Cook				
6 Amount (\$) \$200.00	7 Payee address; 245000 WILDWOOD PARK I	City; Rd # 4105 Richmond, T	State: X 77469	Zip Code	
8 PURPOSE OF	(a) Category (See categories listed Event Expense	at the top of this schedule)	(b) Descrip		
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Check	if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought	d Office held	

ATTACH ADDITIONAL	. COPIES OF	THIS SCHEDULE	AS NEEDED
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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services The Instruction Guid	Loan/Repayment/Rein Office Overhead/Rent Polling Expense Printing Expense Salaries/Wages/Contr de explains how to co	al act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.		
1 Total pages Schedule F1:	2 FILER NAME		3 Fil	er ID (Ethics Commission Filers)		
not available	Dexter Lorance-Navario McCo	У				
4 Date	5 Payee name					
09/24/2024	Costco					
6 Amount (\$) \$940.86	7 Payee address; 17520 Southwest Fwy Sugar L	City; and, TX 77479-2359	State:	Zip Code		
8 PURPOSE OF	(a) Category (See categories listed at the top of this schedule) Event Expense		(b) Description County fair parade supplies			
EXPENDITURE	(C) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held		
4 Date 11/06/2024	5 Payee name Costco					
6 Amount (\$) \$173.57	7 Payee address; 17520 Southwest Fwy Sugar L:	City; and, TX 77479-2359	State:	Zip Code		
8 PURPOSE OF	(a) Category (See categories listed Event Expense	at the top of this schedule)	(b) Descri Event suppli	•		
EXPENDITURE	(C) Check if travel outside of Texas	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held		

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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Loan/Repayment/Rein Office Overhead/Rent Polling Expense Printing Expense Salaries/Wages/Contr de explains how to co	al act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.		
1 Total pages Schedule F1:	2 FILER NAME		3 Fil	er ID (Ethics Commission Filers)		
not available	Dexter Lorance-Navario McCo	у		,		
4 Date	5 Payee name					
09/19/2024	Crazy Coffee Restaurant					
6 Amount (\$) \$20.79	7 Payee address; 1803 Richmond Pkwy Ste 100	City; Richmond, TX 77469-	State: -3640	Zip Code		
8 PURPOSE OF	(a) Category (See categories listed Food/Beverage Expense	at the top of this schedule)	(b) Descr Meeting	iption		
EXPENDITURE	(C) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	ht Office held		
4 Date	5 Payee name					
08/12/2024	Democratic Party of the Northe	ern Mariana Islands				
6 Amount (\$) \$9,000.00	7 Payee address; PO Box 504789 Saipan, MP 96	City; 5950-4309	State:	Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Contributions/Donations Made By Candidate/Officeholder/Political Comm		1, ,	iption ention credentials.		
	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	ck if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	ht Office held		

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guid	Loan/Repayment/Reim Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	l ct Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
1 Total pages Schedule F1:	2 FILER NAME		3 File	er ID (Ethics Commission Filers)
not available	Dexter Lorance-Navario McCo	У		
4 Date 12/05/2024	5 Payee name Eddie V's			
6 Amount (\$) \$3,830.37	7 Payee address; 2800 Kirby Dr Ste A100 Houst	City; on, TX 77098-1731	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Food/Beverage Expense			ppreciation dinner
9 Complete ONLY if direct expenditure to benefit C/OH	(C) Check if travel outside of Texas  Candidate / Officeholder name		Office sough	k if Austin, TX, officeholder living expense  Office held
4 Date 08/26/2024 6 Amount (\$) \$20,158.00	<ul> <li>5 Payee name     Expose Excellence</li> <li>7 Payee address;</li> <li>4203 Glenshadow Ct Katy, TX</li> </ul>	City; 77494	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Event Expense  (C) Check if travel outside of Texas	s. Complete Schedule T.	Chec	orship and expenses for the Africa  k if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services The Instruction Guid	Loan/Repayment/Reim Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	al act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.	
1 Total pages Schedule F1:	2 FILER NAME		3 File	er ID (Ethics Commission Filers)	
not available	Dexter Lorance-Navario McCo	у			
4 Date 07/12/2024	5 Payee name Exxon				
6 Amount (\$) \$29.20	7 Payee address; 2213 Thompson Rd Richmond,	City; TX 77469-5411	State:	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Office Overhead/Rental Expense		(b) Descrip		
	(C) Check if travel outside of Texas	s. Complete Schedule T.		c if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	t Office held	
4 Date	5 Payee name				
12/10/2024	Family Life and Community Re	esource Center			
6 Amount (\$) \$600.00	7 Payee address; 821 E Highway 90 Alt Richmon	City; nd, TX 77406	State:	Zip Code	
8 PURPOSE OF	(a) Category (See categories listed Contributions/Donations Made By Candidate/Officeholder/Political Comm		(b) Description	otion	
EXPENDITURE	(C) Check if travel outside of Texas	s. Complete Schedule T.	Check	r if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	t Office held	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Loan/Repayment/Refees Office Overhead/Refeod/Beverage Expense Gift/Awards/Memorials Expense Legal Services Calaries/Wages/Control Guide explains how to	ntal tract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.	
1 Total pages Schedule F1:	2 FILER NAME	3 File	er ID (Ethics Commission Filers)	
not available	Dexter Lorance-Navario McCoy		,	
4 Date 11/20/2024	5 Payee name FFPS			
6 Amount (\$) \$420.00	7 Payee address; City; 1630 Pitts Rd Richmond, TX 77406-1390	State:	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedul Contributions/Donations Made By Candidate/Officeholder/Political Committee  (c) Check if travel outside of Texas. Complete Schedule T.	Donation	ption  k if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sough		
4 Date 11/12/2024	5 Payee name FIRST WATCH			
6 Amount (\$) \$43.25	7 Payee address; City; 9920 Highway 90 Alt Ste 150C Sugar Land, TX 774	State:	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule Food/Beverage Expense	(b) Descri	ption	
EM ENDITONE	(c) Check if travel outside of Texas. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sough	nt Office held	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guid	Loan/Repayment/Reim Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	ıl act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter & Category not listed above) form.	
1 Total pages Schedule F1:	2 FILER NAME		3 File	er ID (Ethics Commission Filers)	
not available	Dexter Lorance-Navario McCo	y			
4 Date	5 Payee name				
07/17/2024	Fort Bend County Fair Associa	tion			
6 Amount (\$) \$50.00	7 Payee address; 4310 TX-36 Rosenberg, TX 77	City;	State:	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Fees  (c) Check if travel outside of Texa		(b) Descri Event Regist	tration	
9 Complete ONLY if direct expenditure to benefit C/OH	(C) Check if travel outside of Texa Candidate / Officeholder name	s. Complete Scriedule 1.	Office sough	t if Austin, TX, officeholder living expense  Office held	
4 Date 10/24/2024 6 Amount (\$) \$680.08	5 Payee name Fort Bend County 7 Payee address;	City;	State:	Zip Code	
	301 Jackson St Richmond, TX	77469-3108			
PURPOSE OF	(a) Category (See categories listed Loan Repayment/Reimbursement	at the top of this schedule)	(b) Descri Travel Reim	ption bursement, 10/18/24	
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held	

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

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Loan/Repayment/Reim Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	al act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
1 Total pages Schedule F1:	2 FILER NAME		3 File	er ID (Ethics Commission Filers)
not available	Dexter Lorance-Navario McCo	y		
4 Date 10/30/2024	5 Payee name Fort Bend County			
6 Amount (\$) \$147.18	7 Payee address; 301 Jackson St Richmond, TX	City; 77469-3108	State:	Zip Code
PURPOSE OF	(a) Category (See categories listed Loan Repayment/Reimbursement	at the top of this schedule)	(b) Descri CBC Travel	ption Reimbursement.
EXPENDITURE	(C) Check if travel outside of Texas	. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held
4 Date :	5 Payee name Fort Bend Family Promise			
6 Amount (\$) \$1,300.00	7 Payee address; 4645 Cartwright Rd Missouri C	City; ity, TX 77459-3588	State:	Zip Code
PURPOSE OF	(a) Category (See categories listed of Contributions/Donations Made By Candidate/Officeholder/Political Comm		(b) Descri Donation	ption
EXPENDITURE	(C) Check if travel outside of Texas	. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held

SCHEDULE F1

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

	EXPENDIT	URE CATEGORIES	FOR BOX	8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services	Loan/Repayment/Reim Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra le explains how to co	l ct Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
Total pages Schedule F1:     not available	2 FILER NAME Dexter Lorance-Navario McCoy	у	3 Fil	er ID (Ethics Commission Filers)
4 Date 09/27/2024	5 Payee name Fort Bend First PAC	1 (2) (3) (4) (4)		
6 Amount (\$) \$40,000.00	7 Payee address; PO Box 1398 Richmond, TX 77	City; 7406-0035	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed a Contributions/Donations Made By Candidate/Officeholder/Political Comm	ittee	(b) Descri	ption  k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	
4 Date 09/16/2024	5 Payee name Founding Farmers & Distillers			
6 Amount (\$) \$83.78	7 Payee address; 600 Massachusetts Ave NW Wa	City; ashington, DC 20001-5	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed a Food/Beverage Expense	at the top of this schedule)	(b) Descri Meal during	
EXPENDITURE	(C) Check if travel outside of Texas	. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held

SCHEDULE F1

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

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Loan/Repayment/Reim Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	l ct Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.		
1 Total pages Schedule F1:	2 FILER NAME		3 File	er ID (Ethics Commission Filers)		
not available	Dexter Lorance-Navario McCo	у				
4 Date	5 Payee name					
08/26/2024	Frost Bank					
6 Amount (\$) \$30.00	7 Payee address; PO Box 1613 San Antonio, TX	City; 78296-1613	State:	Zip Code		
8 PURPOSE OF	(a) Category (See categories listed Fees	at the top of this schedule)	(b) Descri wire transfer			
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	t Office held		
4 Date	5 Payee name					
09/03/2024	Frost Bank					
6 Amount (\$) \$15.00	7 Payee address; PO Box 1613 San Antonio, TX	City; 78296-1613	State:	Zip Code		
8 PURPOSE OF	(a) Category (See categories listed Fees	at the top of this schedule)	(b) Descri	•		
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	t Office held		

SCHEDULE F1

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

	EXPENDIT	URE CATEGORIES	FOR BOX	8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services	Loan/Repayment/Reimt Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contract de explains how to cor	et Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
1 Total pages Schedule F1:	2 FILER NAME		3 File	er ID (Ethics Commission Filers)
not available	Dexter Lorance-Navario McCo	у		
4 Date 09/09/2024	5 Payee name Frost Bank			
6 Amount (\$) \$15.00	7 Payee address; PO Box 1613 San Antonio, TX	City; 78296-1613	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed a Fees  (c) Check if travel outside of Texas		(b) Description	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	
4 Date 09/16/2024	5 Payee name Frost Bank			
6 Amount (\$) \$15.00	7 Payee address; PO Box 1613 San Antonio, TX	City; 78296-1613	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed a Fees  (c) Check if travel outside of Texas		(b) Descrip	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Loan/Repayment/Reim Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	al act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travet In District Travel Out of District Other (enter a category not listed above) form.
Total pages Schedule F1:     not available	2 FILER NAME Dexter Lorance-Navario McCo	у	3 Fil	er ID (Ethics Commission Filers)
4 Date 09/23/2024	5 Payee name Frost Bank			
6 Amount (\$) \$15.00	7 Payee address; PO Box 1613 San Antonio, TX	City; 78296-1613	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed Fees	at the top of this schedule)	(b) Descri wire transfer	•
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	ck if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	, , , , , , , , , , , , , , , , , , , ,	Office sough	nt Office held
4 Date 09/30/2024	5 Payee name Frost Bank			
6 Amount (\$) \$15.00	7 Payee address; PO Box 1613 San Antonio, TX	City; 78296-1613	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed Fees	at the top of this schedule)	(b) Descri wire transfer	•
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held

ATTACH ADDITIONAL	CODIES	OF THIS	SCHEDULE	AS NEEDEL
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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Loan/Repayment/Rein Office Overhead/Rent Polling Expense Printing Expense Salaries/Wages/Contr de explains how to co	al act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.	
1 Total pages Schedule F1:	2 FILER NAME		3 File	er ID (Ethics Commission Filers)	
not available	Dexter Lorance-Navario McCo	ру		A	
4 Date 10/07/2024	5 Payee name Frost Bank				
6 Amount (\$) \$15.00	7 Payee address; PO Box 1613 San Antonio, TX	City; 78296-1613	State:	Zip Code	
8 PURPOSE OF	(a) Category (See categories listed Fees	at the top of this schedule)	(b) Descri wire transfer	•	
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held	
4 Date	5 Payee name				
10/15/2024	Frost Bank				
6 Amount (\$) \$15.00	7 Payee address; PO Box 1613 San Antonio, TX	City; 78296-1613	State:	Zip Code	
8 PURPOSE OF	(a) Category (See categories listed Fees	at the top of this schedule)	(b) Descri	•	
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held	

SCHEDULE F1

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

	EXPENDIT	URE CATEGORIES I	FOR BOX	8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Legal Services	Loan/Repayment/Reimb Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contract de explains how to con	ct Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
Total pages Schedule F1:     not available	2 FILER NAME Dexter Lorance-Navario McCo	v	3 File	er ID (Ethics Commission Filers)
4 Date 10/21/2024 6 Amount (\$)	5 Payee name Frost Bank 7 Payee address;	City;	State:	Zip Code
\$15.00	PO Box 1613 San Antonio, TX	78296-1613		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Fees  (c) Check if travel outside of Texa:		(b) Descri	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	are a comment of the second of
4 Date 10/28/2024	5 Payee name Frost Bank			
6 Amount (\$) \$15.00	7 Payee address; PO Box 1613 San Antonio, TX	City; 78296-1613	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed Fees	at the top of this schedule)	(b) Descri wire transfer	
EXPENDITURE	(C) Check if travel outside of Texas	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services	Loan/Repayment/Reimbur Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contract	Trans Expe Trave Labor Trave Othe	itation/Fundraising Expense sportation Equipment & Related nse el In District el Out of District r (enter a category nct listed above)
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID	(Ethics Commission Filers)
not available	Dexter Lorance-Navario McCo	y		
4 Date	5 Payee name			
11/04/2024	Frost Bank			
6 Amount (\$) \$15.00	7 Payee address; PO Box 1613 San Antonio, TX	City; 78296-1613	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed a	[·	b) Description vire transfer fee	
EXPENDITURE	(C) Check if travel outside of Texas	s. Complete Schedule T.	Check if Aus	tin, TX, officeholder living expense
9 Complete ONLY if timect expenditure to benefit C/OH	Candidate / Officeholder name	Of	fice sought	Office held
4 Date 11/12/2024	5 Payee name Frost Bank			
6 Amount (\$) \$15.00	7 Payee address; PO Box 1613 San Antonio, TX	City; 78296-1613	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed a Fees	•	b) Description vire transfer fee	
EXPENDITURE	(C) Check if travel outside of Texas	s. Complete Schedule T.	Check if Aus	tin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Of	fice sought	Office held

SCHEDULE F1

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	EXPENDIT	URE CATEGORIES F	OR BOX 8(a	)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services	Loan/Repayment/Reimb Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contrac le explains how to com	Tr E) Tr t Labor Tr Of	olicitation/Fundraising Expense ransportation Equipment & Related repense ravel In District ravel Out of District ther (enter a category not listed above) m.
1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorance-Navario McCoy	y	3 Filer I	D (Ethics Commission Filers)
4 Date 11/18/2024	5 Payee name Frost Bank			
6 Amount (\$) \$15.00	7 Payee address; PO Box 1613 San Antonio, TX	City; 78296-1613	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed a Fees  (c) Check if travel outside of Texas		(b) Description wire transfer fee	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	C	Office sought	Office held
4 Date 12/02/2024 6 Amount (\$)	5 Payee name Frost Bank 7 Payee address;	City;	State:	Zip Code
\$15.00	PO Box 1613 San Antonio, TX	78296-1613		
8 PURPOSE OF	(a) Category (See categories listed a		(b) Description wire transfer fee	
EXPENDITURE	(C) Check if travel outside of Texas.	. Complete Schedule T.	Check if	Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	C	Office sought	Office held

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services The Instruction Guid	Loan/Repayment/Reiml Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contra- de explains how to col	ct Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
1 Total pages Schedule F1:	2 FILER NAME		3 File	er ID (Ethics Commission Filers)
not available	Dexter Lorance-Navario McCo	у		
4 Date 08/13/2024	5 Payee name H-E-B			
6 Amount (\$)	7 Payee address;	City;	State:	Zip Code
\$13.94	19988 Southwest Fwy Sugar L		State.	Zip Code
8 PURPOSE OF	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)	(b) Descri Supplies	ption
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held
4 Date	5 Payee name			
09/30/2024	Н-Е-В			
6 Amount (\$) \$5.04	7 Payee address; 19988 Southwest Fwy Sugar L	City; and, TX 77479-6505	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)	(b) Descri Supplies	ption
EXPENDITURE	(C) Check if travel outside of Texas	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guid	Loan/Repayment/Reim Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	al act Labor	Solicitation/Fundraising Transportation Equipme Expense Travel In District Travel Out of District Other (enter a category form.	ent & Related
1 Total pages Schedule F1:	2 FILER NAME Dexter Lorance-Navario McCo		3 File	er ID (Ethics Commiss	ion Filers)
not available		у			
4 Date 10/16/2024	5 Payee name H-E-B				
6 Amount (\$) \$34.96	7 Payee address; 19988 Southwest Fwy Sugar La	City; and, TX 77479-6505	State:	Zip Co	de
8 PURPOSE OF	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)	(b) Descri	ption	
EXPENDITURE	(C) Check if travel outside of Texas	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder liv	ring expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	ot Off	fice held
4 Date 10/21/2024	5 Payee name H-E-B				
6 Amount (\$) \$27.89	7 Payee address; 19988 Southwest Fwy Sugar L:	City; and, TX 77479-6505	State:	Zip Co	de
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Office Overhead/Rental Expense		(b) Descri		
Complete ONLY if direct expenditure to benefit C/OH	(C) Check if travel outside of Texas Candidate / Officeholder name	s. Complete Schedule T.	Office sough	k if Austin, TX, officeholder liv ht Off	ring expense

SCHEDULE F1

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

	EXPENDIT	URE CATEGORIES	FOR BOX	8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Fees Food/Beverage Expense y Gift/Awards/Memorials Expense	Salaries/Wages/Contra	al act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
Total pages Schedule F1:     not available	2 FILER NAME Dexter Lorance-Navario McCoy	7	3 File	er ID (Ethics Commission Filers)
4 Date 07/02/2024	5 Payee name HP Instant Ink			
6 Amount (\$) \$7.57	7 Payee address; 1501 Page Mill Rd Palo Alto, C	City; A 94304-1126	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed a Office Overhead/Rental Expense		(b) Descri	ption  k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	
4 Date 07/29/2024	5 Payee name HP Instant Ink			
6 Amount (\$) \$7.57	7 Payee address; 1501 Page Mill Rd Palo Alto, C	City; A 94304-1126	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed a Office Overhead/Rental Expense	at the top of this schedule)	(b) Descri Printer ink	ption
9 Complete ONLY if direct expenditure to benefit C/OH	(C) Check if travel outside of Texas  Candidate / Officeholder name		Office sough	k if Austin, TX, officeholder living expense  office held

SCHEDULE F1

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

	EXPENDIT	URE CATEGORIES	FOR BOX	8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services The Instruction Guid	Loan/Repayment/Reim Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	al act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
Total pages Schedule F1:     not available	2 FILER NAME Dexter Lorance-Navario McCo	у	3 Fil	er ID (Ethics Commission Filers)
4 Date 10/02/2024	5 Payee name HP Instant Ink			
6 Amount (\$) \$7.57	7 Payee address; 1501 Page Mill Rd Palo Alto, C	City; CA 94304-1126	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Office Overhead/Rental Expense		(b) Descriprinter ink	iption  ck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	
4 Date 10/03/2024	5 Payee name HP Instant Ink		· · · · · · · · · · · · · · · · · · ·	
6 Amount (\$) \$7.57	7 Payee address; 1501 Page Mill Rd Palo Alto, C	City; CA 94304-1126	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)	(b) Descri Printer ink	iption
EXPENDITURE	(C) Check if travel outside of Texas	s. Complete Schedule T.	Chec	ck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	ht Office held

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Fees Offic Food/Beverage Expense Poll y Gift/Awards/Memorials Expense Prin	aries/Wages/Contract Labo	Transportation Equipment & F Expense Travel In District Travel Out of District Other (enter a category not lis	Related
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Fi	lers)
not available	Dexter Lorance-Navario McCoy			
4 Date	5 Payee name			
10/28/2024	HP Instant Ink			
6 Amount (\$) \$7.57	7 Payee address; Control of the Payee Alto, CA 9	•	tate: Zip Code	
8 PURPOSE	(a) Category (See categories listed at the Office Overhead/Rental Expense	e top of this schedule) (b) D	Description	
OF EXPENDITURE	(C) Check if travel outside of Texas. Cor	nplete Schedule T.	Check if Austin, TX, officeholder living exp	ense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office	sought Office he	ld
4 Date	5 Payee name			
11/29/2024	HP Instant Ink			
6 Amount (\$) \$1.58	7 Payee address; Control of Payee Mill Rd Palo Alto, CA 9	•	tate: Zip Code	
8 PURPOSE OF	(a) Category (See categories listed at the Office Overhead/Rental Expense	e top of this schedule) (b) D Printe	escription r ink	
EXPENDITURE	(C) Check if travel outside of Texas. Con	nplete Schedule T.	Check if Austin, TX, officeholder living exp	ense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office	sought Office he	ld

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Loan/Repayment/Reim Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	l ct Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
Total pages Schedule F1:     not available	2 FILER NAME Dexter Lorance-Navario McCo	NV.	3 File	er ID (Ethics Commission Filers)
4 Date 12/27/2024	5 Payee name HP Instant Ink		1	
6 Amount (\$) \$1.58	7 Payee address; 1501 Page Mill Rd Palo Alto, 0	City; CA 94304-1126	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Office Overhead/Rental Expense		(b) Descrip	otion k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	t Office held
4 Date 10/29/2024	5 Payee name IKEA			
6 Amount (\$) \$74.69	7 Payee address; 7810 Katy Fwy Houston, TX 7	City; 7024-2006	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Office Overhead/Rental Expense  (c) Check if travel outside of Texa		(b) Descrip	otion k if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	t Office held

SCHEDULE F1

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

	EXPENDIT	JRE CATEGORIES	FOR BOX	8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Fees Food/Beverage Expense I Gift/Awards/Memorials Expense I	Salaries/Wages/Contra	il act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.	
1 Total pages Schedule F1:	2 FILER NAME		3 Fil	er ID (Ethics Commission Filers)	
not available	Dexter Lorance-Navario McCoy				
4 Date 08/23/2024	5 Payee name Jailbird (Lincoln Park)				
6 Amount (\$) \$241.88	7 Payee address; 2464 N Lincoln Ave Chicago, II	City;	State:	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed a Food/Beverage Expense			r Delivery at the DNC	
	(C) Check if travel outside of Texas.	Complete Schedule T.	harana .	k if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held	
4 Date 07/30/2024	5 Payee name Katy Jewett Memorial Training	Fund			
6 Amount (\$) \$1,000.00	7 Payee address; 8503 Hatton St Houston, TX 770	City; 025-3807	State:	Zip Code	
8 PURPOSE OF	(a) Category (See categories listed a Contributions/Donations Made By Candidate/Officeholder/Political Commi		(b) Descri Donation	ption	
EXPENDITURE	(C) Check if travel outside of Texas.	Complete Schedule T.	Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Loan/Repayment/Reir Office Overhead/Rent Polling Expense Printing Expense Salaries/Wages/Contr de explains how to ca	al act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
1 Total pages Schedule F1:	2 FILER NAME		3 Fi	ler ID (Ethics Commission Filers)
not available	Dexter Lorance-Navario McCo	у		
4 Date 09/23/2024	5 Payee name M3 Graphics			
6 Amount (\$)	7 Payee address;	City;	State:	Zip Code
\$2,928.48	11730 S Wilcrest Dr Houston,	TX 77099-4757		
8 PURPOSE OF	(a) Category (See categories listed Printing Expense	at the top of this schedule)	(b) Descr Printing	iption
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Che	ck if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office soug	ht Office held
4 Date	5 Payee name			
09/12/2024	Maple Street Biscuit			
6 Amount (\$) \$26.25	7 Payee address; 4836 Waterview Town Center	City; Dr Ste 300 Richmond,	State:	Zip Code
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descr	iption
PURPOSE OF	Food/Beverage Expense		Meeting	
EXPENDITURE	(C) Check if travel outside of Texas	s. Complete Schedule T.		ck if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	ht Office held

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services The Instruction Guid	Loan/Repayment/Reim Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	al act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) orm.
Total pages Schedule F1:     not available	2 FILER NAME Dexter Lorance-Navario McCo	y	3 File	r ID (Ethics Commission Filers)
4 Date 09/23/2024	5 Payee name Mi Alma Cocina			
6 Amount (\$) \$34.50	7 Payee address; 716 Murphy Rd Stafford, TX 7	City; 7477-5910	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Food/Beverage Expense  (c) Check if travel outside of Texa		(b) Descrip	otion
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought	
4 Date 07/12/2024	5 Payee name Mitchell Media		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
6 Amount (\$) \$8,840.00	7 Payee address; 1712 37th St NW Washington,	С <del>ку</del> ; DC 20007-2321	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Consulting Expense	at the top of this schedule)	(b) Descrip Media Consu	
9 Complete ONLY if direct expenditure to benefit C/OH	(c) Check if travel outside of Texa  Candidate / Officeholder name		Check	if Austin, TX, officeholder living expense Office held

ATTACH ADDITIONAL	COPIES OF THIS	SCHEDULE	AS NEEDEL

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Loan/Repayment/Reim Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	al act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
1 Total pages Schedule F1:	2 FILER NAME		3 Fil	er ID (Ethics Commission Filers)
not available	Dexter Lorance-Navario McCo	у		
4 Date 08/16/2024	5 Payee name Mitchell Media			
6 Amount (\$) \$5,000.00	7 Payee address; 1712 37th St NW Washington,	City; DC 20007-2321	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed Consulting Expense	at the top of this schedule)	(b) Descri Media Cons	•
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	ck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	ht Office held
4 Date 09/12/2024	5 Payee name Mitchell Media			
6 Amount (\$) \$5,960.00	7 Payee address; 1712 37th St NW Washington,	City; DC 20007-2321	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed Consulting Expense	at the top of this schedule)	(b) Descri Media Cons	•
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held

SCHEDULE F1

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

	EXPENDIT	TURE CATEGORIES	FOR BOX	B(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guid	Loan/Repayment/Reim Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	al act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
Total pages Schedule F1:     not available	2 FILER NAME Dexter Lorance-Navario McCo	у	3 File	er ID (Ethics Commission Filers)
4 Date 07/11/2024	5 Payee name Merci Mohagheghi			
6 Amount (\$) \$2,500.00	7 Payee address; 1010 Rosine St Apt 25 Houston	City; 1, TX 77019-3871	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Consulting Expense	at the top of this schedule)	(b) Descrip Consulting F	
EXPENDITURE	(C) Check if travel outside of Texas	s. Complete Schedule T.	Check	c if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	t Office held
4 Date	5 Payee name			
07/11/2024	Merci Mohagheghi			
6 Amount (\$) \$2,500.00	7 Payee address; 1010 Rosine St Apt 25 Houston	City; a, TX 77019-3871	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed Consulting Expense	at the top of this schedule)	(b) Descrip Consulting F	
EXPENDITURE	(C) Check if travel outside of Texas	s. Complete Schedule T.	Check	k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	t Office held

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guid	Loan/Repayment/Reim Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to con	i ct Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
Total pages Schedule F1:     not available	2 FILER NAME Dexter Lorance-Navario McCo	v	3 File	r ID (Ethics Commission Filers)
4 Date 10/01/2024	5 Payee name Danish Nelson			
6 Amount (\$) \$255.00	7 Payee address; 9900 S Mason Rd Apt 5312 Ric	City; chmond, TX 77406-586	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Salaries/Wages/Contract Labor  (c) Check if travel outside of Texas		(b) Descrip Photo/Video	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	t Office held
4 Date 08/07/2024	5 Payee name NGP VAN	City	State	Zip Code
6 Amount (\$) \$525.00	7 Payee address; 1445 New York Ave NW Ste 2	City; 00 Washington, DC 200	State: 005-2158	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)	(b) Descrip Database	otion
9 Complete ONLY if direct expenditure to benefit C/OH	(C) Check if travel outside of Texas Candidate / Officeholder name		Check	if Austin, TX, officeholder living expense Coffice held

SCHEDULE F1

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	EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services The Instruction Guid	Loan/Repayment/Reim Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	ict Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.	
	2 FILER NAME		3 Fil	er ID (Ethics Commission Filers)	
not available	Dexter Lorance-Navario McCo	У			
4 Date 09/03/2024	5 Payee name NGP VAN				
6 Amount (\$) \$262.50	7 Payee address; 1445 New York Ave NW Ste 2	City; 00 Washington, DC 20	State: 005-2158	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)	(b) Descri Database	iption	
EXPENSIONE	(C) Check if travel outside of Texas	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	ht Office held	
4 Date 10/03/2024	5 Payee name NGP VAN				
6 Amount (\$) \$262.50	7 Payee address; 1445 New York Ave NW Ste 2	City; 00 Washington, DC 20	State: 005-2158	Zip Code	
8 PURPOSE OF	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)	(b) Descri Database	ption	
EXPENDITURE	(C) Check if travel outside of Texas	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guid	Loan/Repayment/Reimt Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contract de explains how to cor	ct Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
1 Total pages Schedule F1:	2 FILER NAME		3 File	er ID (Ethics Commission Filers)
not available	Dexter Lorance-Navario McCo	у		
4 Date	5 Payee name			
11/04/2024	NGP VAN			
6 Amount (\$) \$262.50	7 Payee address; 1445 New York Ave NW Ste 2	City; 00 Washington, DC 200	State: 005-2158	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Office Overhead/Rental Expense		(b) Descrip	
9 Complete ONLY if direct expenditure to benefit C/OH	(C) Check if travel outside of Texa		Office sough	k if Austin, TX, officeholder li <u>ving ex</u> pense it Office held
4 Date 12/03/2024	5 Payee name NGP VAN			
6 Amount (\$) \$262.50	7 Payee address; 1445 New York Ave NW Ste 2	City; 00 Washington, DC 200	State: 005-2158	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Office Overhead/Rental Expense	distribution of the state of th	(b) Descrip	ption k if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	t Office held

SCHEDULE F1

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	EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Fees Office Food/Beverage Expense Polling Gift/Awards/Memorials Expense Printir	es/Wages/Contract Labor	Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above)		
Total pages Schedule F1:     not available	2 FILER NAME Dexter Lorance-Navario McCoy	3	Filer ID (Ethics Commission Filers)		
4 Date 09/09/2024	5 Payee name NOBCO	•			
6 Amount (\$) \$200.00	7 Payee address; Cit 660 N Capitol St NW Washington, De		te: Zip Code		
8 PURPOSE OF	(a) Category (See categories listed at the to Fees		scription rship Fees		
EXPENDITURE	(C) Check if travel outside of Texas. Comp	lete Schedule T.	Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office so	ought Office held		
4 Date	5 Payee name				
11/12/2024	OakBend Medical Center				
6 Amount (\$) \$1,000.00	7 Payee address; Cit 1705 Jackson St Richmond, TX 77469	•	te: Zip Code		
8 PURPOSE OF	(a) Category (See categories listed at the to Contributions/Donations Made By Candidate/Officeholder/Political Committee	op of this schedule) (b) De Donatio	scription n		
EXPENDITURE	(C) Check if travel outside of Texas. Comp	lete Schedule T.	Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office so	ought Office held		

SCHEDULE F1

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	EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guid	Loan/Repayment/Rein Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	al act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.	
Total pages Schedule F1:     not available	2 FILER NAME Dexter Lorance-Navario McCo	у	3 File	er ID (Ethics Commission Filers)	
4 Date 09/17/2024	5 Payee name Olive Garden				
6 Amount (\$) \$611.79	7 Payee address; 5005 Sweetwater Blvd Sugar L	City; and, TX 77479-3464	State:	Zip Code	
8 PURPOSE OF	(a) Category (See categories listed Food/Beverage Expense	at the top of this schedule)	(b) Descri	ption Fort Bend Democratic Party meeti	
EXPENDITURE	(C) Check if travel outside of Texas	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	t Office held	
4 Date	5 Payee name				
11/26/2024	Olive Garden				
6 Amount (\$) \$177.95	7 Payee address; 5005 Sweetwater Blvd Sugar L	City; and, TX 77479-3464	State:	Zip Code	
8 PURPOSE OF	(a) Category (See categories listed Food/Beverage Expense	at the top of this schedule)	(b) Descrip Staff meal	ption	
EXPENDITURE	(C) Check if travel outside of Texas	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	t Office held	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Loan/Repayment/Reimbursement Fees Office Overhead/Rental Transportation Equipment & Related Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Expense Expense Travel In District Travel Out of District Other (enter a category not listed above The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1:	2 FILER NAME		3 File	er ID (Ethics Commission Filers)
not available	Dexter Lorance-Navario McCo	у		
4 Date	5 Payee name			
12/19/2024	P.F. Chang's			
6 Amount (\$) \$333.30	7 Payee address;	City;	State:	Zip Code
	2120 Lone Star Dr Sugar Land	, TX 77479-1270		
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descri	ption
PURPOSE OF	Food/Beverage Expense		Team Appre	ciation Dinner
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held
4 Date	5 Payee name			
08/19/2024	Felicity Pereyra			
6 Amount (\$) \$1,414.76	7 Payee address;	City;	State:	Zip Code
	125 Amundsen St Houston, TX	77009-3202		
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descri	ption
PURPOSE OF	Fees		Lodging dur	ing DNC convention
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.		k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	t Office held

SCHEDULE F1

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	EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Loan/Repayment/Reim Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	ect Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.	
Total pages Schedule F1:     not available	2 FILER NAME Dexter Lorance-Navario McCo	у	3 File	er ID (Ethics Commission Filers)	
4 Date 07/25/2024	5 Payee name ReStream Inc.				
8 Amount (\$) \$19.00	7 Payee address; 515 Congress Ave Ste 1050 Au	City; ustin, TX 78701-3504	State:	Zip Code	
8 PURPOSE OF	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)	(b) Descri Live streami	•	
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held	
4 Date 09/13/2024	5 Payee name Richard Sandoval Hospitality				
6 Amount (\$) \$137.70	7 Payee address; 476 K St NW Ste D Washingto	City; on, DC 20001-2531	State:	Zip Code	
8 PURPOSE OF	(a) Category (See categories listed Food/Beverage Expense	at the top of this schedule)	(b) Descri Dinner while	•	
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held	

SCHEDULE F1

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	EXPENDITURE CATEGO	ORIES FOR BOX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Fees Office Overhead Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense	se Expense se Travel In District s/Contract Labor Travel Out of District Other (enter a category not listed above	/e)
Total pages Schedule F1:     not available	2 FILER NAME Dexter Lorance-Navario McCoy	3 Filer ID (Ethics Commission Filers)	
4 Date 08/05/2024	5 Payee name Russo's		
6 Amount (\$) \$90.09	7 Payee address; City; 6560 Greatwood Pkwy Ste 900 Sugar Land, TX	State: Zip Code X 77479-6713	
8 PURPOSE OF	(a) Category (See categories listed at the top of this so Food/Beverage Expense	chedule) (b) Description Volunteer meal	
EXPENDITURE	(C) Check if travel outside of Texas. Complete Schedu	ule T. Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held	
4 Date 11/04/2024	5 Payee name Safari Texas		
6 Amount (\$) \$2,000.00	7 Payee address; City; 11627 FM 1464 Rd Richmond, TX 77407-0566	State: Zip Code	
8 PURPOSE OF	(a) Category (See categories listed at the top of this so Food/Beverage Expense	chedule) (b) Description Catering deposit	
EXPENDITURE	(C) Check if travel outside of Texas. Complete Schedu	ule T. Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services The Instruction Guid	Loan/Repayment/Reim Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	al act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
1 Total pages Schedule F1:	2 FILER NAME		3 File	er ID (Ethics Commission Filers)
not available	Dexter Lorance-Navario McCo	у		
4 Date	5 Payee name			
11/13/2024	Safari Texas			
6 Amount (\$) \$4,999.88	7 Payee address; 11627 FM 1464 Rd Richmond,	City;	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Food/Beverage Expense	at the top of this schedule)	(b) Descri	
EXPENDITORE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	ck if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held
4 Date	5 Payee name	· · · · · · · · · · · · · · · · · · ·		
11/08/2024	Martha Scheibel			
6 Amount (\$) \$200.00	7 Payee address; 9214 Kostelnik St Needville, T	City; X 77461-7921	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed Salaries/Wages/Contract Labor	at the top of this schedule)	(b) Descri Event securi	•
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held

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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Fees Food/Beverage Expense Gift/Awards/Memorials Expense	Salaries/Wages/Contra	ll act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
1 Total pages Schedule F1:	2 FILER NAME		3 Fil	er ID (Ethics Commission Filers)
not available	Dexter Lorance-Navario McCoy	7		
4 Date 12/13/2024	5 Payee name Keli Smith			
6 Amount (\$) \$655.50	7 Payee address; 6618 Williams Ct Needville, TX	City; 77461-9033	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed a Contributions/Donations Made By Candidate/Officeholder/Political Comm		(b) Descri Road & Brid	ption dges holiday party sponsorship
EXPENDITURE	(C) Check if travel outside of Texas	. Complete Schedule T.	Chec	ck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held
4 Date 07/22/2024	5 Payee name Southwest Airlines			
6 Amount (\$) \$457.92	7 Payee address; 2702 Love Field Dr Dallas, TX	City; 75235-1908	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed a Travel Out Of District	at the top of this schedule)	(b) Descri Airfare for t	ption he DNC convention
EXPENDITURE	(C) Check if travel outside of Texas	Complete Schedule T.	Chec	x if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guid	Loan/Repayment/Reiml Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contra de explains how to col	l ct Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
1 Total pages Schedule F1:	2 FILER NAME		3 File	er ID (Ethics Commission Filers)
not available	Dexter Lorance-Navario McCo	У		
4 Date 07/26/2024	5 Payee name Southwest Airlines			
6 Amount (\$) \$335.00	7 Payee address; 2702 Love Field Dr Dallas, TX	City; 75235-1908	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Travel Out Of District  (c) Check if travel outside of Texas			ption Oakland Conference k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	
4 Date 09/16/2024	5 Payee name Southwest Airlines			
6 Amount (\$) \$55.00	7 Payee address; 2702 Love Field Dr Dallas, TX	City; 75235-1908	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Travel Out Of District  (c) Check if travel outside of Texas	s. Complete Schedule T.		k if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	t Office held

ATTACH ADDITIONAL COPIES OF	THIS SCHEDULE AS NEEDEL
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#### SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services The Instruction Guid	Loan/Repayment/Reim Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	I ct Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
1 Total pages Schedule F1:	2 FILER NAME		3 File	er ID (Ethics Commission Filers)
not available	Dexter Lorance-Navario McCo	У		
4 Date 11/20/2024	5 Payee name T-Mobile			
6 Amount (\$) \$109.88	7 Payee address; PO Box 742596 Cincinnati, OF	City; H 45274-2596	State:	Zip Code
PURPOSE OF	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)	(b) Descrip	ption
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Check	k if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	t Office held
4 Date 12/20/2024	5 Payee name T-Mobile			
6 Amount (\$) \$104.31	7 Payee address; PO Box 742596 Cincinnati, OF	City; H 45274-2596	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Office Overhead/Rental Expense  (c) Check if travel outside of Texas		(b) Descrip	otion k if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	t Office held

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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Office Overhead/Rental Transpor Polling Expense Expense Printing Expense Travel In Salaries/Wages/Contract Labor Travel Ot		Travel In District Travel Out of District Other (enter a category not listed above)	
1 Total pages Schedule F1:	2 FILER NAME		3 File	er ID (Ethics Commission Filers)	
not available	Dexter Lorance-Navario McCo	ру			
4 Date 09/26/2024	5 Payee name Target				
6 Amount (\$) \$132.80	7 Payee address; 10241 W Grand Pkwy S Richr	City; nond, TX 77407-2259	State:	Zip Code	
8 PURPOSE OF	(a) Category (See categories listed Office Overhead/Rental Expense	d at the top of this schedule)	(b) Descri Supplies	ption	
EXPENDITURE	(C) Check if travel outside of Texa	as. Complete Schedule T.	Chec	sk if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held	
4 Date 09/30/2024	5 Payee name Target				
6 Amount (\$) \$38.49	7 Payee address; 10241 W Grand Pkwy S Richn	City; nond, TX 77407-2259	State:	Zip Code	
8 PURPOSE OF	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)	(b) Descri Supplies	ption	
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held	

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SCHEDULE F1

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

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.					
1 Total pages Schedule F1:	2 FILER NAME		3 Fil	er ID (Ethics Commission Filers)		
not available	Dexter Lorance-Navario McCo	у		, ,		
4 Date	5 Payee name					
08/01/2024	The Texas Gulf Coast AFL-CI	O Working People PAG	2			
6 Amount (\$) \$2,500.00	7 Payee address; 2506 Sutherland St Houston, T	City; X 77023-5305	State:	Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Contributions/Donations Made By Candidate/Officeholder/Political Communication) (c) Check if travel outside of Texa	nittee	(b) Descri Donation	ption  k if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	s. Complete scriedule 1.	Office sough			
4 Date 09/30/2024 6 Amount (\$)	5 Payee name Torchy's Taco 7 Payee address;	City;	State:	Zip Code		
\$124.96	24403 Southwest Fwy Ste 100	Rosenberg, TX 77471-	5990			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Food/Beverage Expense	at the top of this schedule)	(b) Descri Post Parade	•		
Z/I ZIIDII OIL	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Loan/Repayment/Reimt Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contract de explains how to cor	ct Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
Total pages Schedule F1:     not available	2 FILER NAME Dexter Lorance-Navario McCo	ру	3 File	er ID (Ethics Commission Filers)
4 Date 12/23/2024 6 Amount (\$)	5 Payee name Torchy's Taco 7 Payee address;	City;	State:	Zip Code
\$17.64	24403 Southwest Fwy Ste 100			
8 PURPOSE OF	(a) Category (See categories listed Food/Beverage Expense	at the top of this schedule)	(b) Descri Staff meal	ption
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held
4 Date 12/23/2024	5 Payee name Torchy's Taco			
6 Amount (\$) \$108.48	7 Payee address; 24403 Southwest Fwy Ste 100	City; Rosenberg, TX 77471-5	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed Food/Beverage Expense	at the top of this schedule)	(b) Descri Staff meal	ption
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held

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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guid	Loan/Repayment/Reimt Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contract de explains how to con	ct Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
1 Total pages Schedule F1:	2 FILER NAME		3 File	er ID (Ethics Commission Filers)
not available	Dexter Lorance-Navario McCo	у		· ·
4 Date 09/27/2024	5 Payee name Tractor Supply Co.			
6 Amount (\$) \$73.95	7 Payee address; 27127 Southwest Fwy Rosenbe	City; erg, TX 77471-7158	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Event Expense      (c) Check if travel outside of Texa:		(b) Descri	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	
4 Date 08/23/2024 6 Amount (\$) \$55.69	<ul> <li>5 Payee name</li></ul>	City;	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed Travel Out Of District		(b) Descri Rideshare	ption
EXPENDITURE	(C) Check if travel outside of Texas	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held

SCHEDULE F1

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Fees Food/Beverage Expense Pood/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Pood/Beverage Expense Food/Beverage Exp	Office Overhead/Rental Transport Polling Expense Expense Printing Expense Travel I Salaries/Wages/Contract Labor Travel C		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.		
1 Total pages Schedule F1:	2 FILER NAME Dexter Lorance-Navario McCoy		3 File	er ID (Ethics Commission Filers)		
4 Date 09/12/2024	5 Payee name Uber					
6 Amount (\$) \$8.35	7 Payee address; 405 Howard St San Francisco, Ca	City; A 94105-2625	State:	Zip Code		
8 PURPOSE OF	(a) Category (See categories listed at Travel Out Of District	the top of this schedule)	(b) Descri Rideshare du	•		
EXPENDITURE	(C) Check if travel outside of Texas.	Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	t Office held		
4 Date 09/12/2024	5 Payee name Uber					
6 Amount (\$) \$33.10	7 Payee address; 405 Howard St San Francisco, Ca	City; A 94105-2625	State:	Zip Code		
8 PURPOSE OF	(a) Category (See categories listed at Travel Out Of District	the top of this schedule)	(b) Descri Rideshare du			
EXPENDITURE	(C) Check if travel outside of Texas.	Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	t Office held		

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SCHEDULE F1

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

	EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services The Instruction Guid	Loan/Repayment/Reiml Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contrad de explains how to con	Tra Exp Tra ct Labor Tra Oth	icitation/Fundraising Expense insportation Equipment & Related bense ivel in District ivel Out of District her (enter a category not listed above)	
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID	(Ethics Commission Filers)	
not available	Dexter Lorance-Navario McCo	У			
4 Date 09/16/2024	5 Payee name Uber				
6 Amount (\$) \$85.06	7 Payee address; 405 Howard St San Francisco,	City; CA 94105-2625	State:	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Travel Out Of District		(b) Description	CBC	
	(C) Check if travel outside of Texa			ustin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought	Office held	
4 Date 10/25/2024	5 Payee name Uber				
6 Amount (\$) \$29.10	7 Payee address; 405 Howard St San Francisco,	City; CA 94105-2625	State:	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Travel Out Of District  (c) Check if travel outside of Texas		(b) Description Rideshare Check if A	n ustin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought	Office held	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guid	Office Overhead/Rental Transp Polling Expense Expense Printing Expense Travel Salaries/Wages/Contract Labor Travel		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
1 Total pages Schedule F1:	2 FILER NAME		3 File	er ID (Ethics Commission Filers)
not available	Dexter Lorance-Navario McCo	у		
4 Date 10/28/2024	5 Payee name Uber			
6 Amount (\$) \$4.05	7 Payee address; 405 Howard St San Francisco,	City; CA 94105-2625	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed Travel Out Of District	at the top of this schedule)	(b) Descri Rideshare	ption
EXPENDITURE	(C) Check if travel outside of Texas	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held
4 Date	5 Payee name			
10/28/2024	Uber			
6 Amount (\$) \$27.03	7 Payee address; 405 Howard St San Francisco,	City; CA 94105-2625	State:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed Travel Out Of District	at the top of this schedule)	(b) Descri Rideshare	ption
EXPENDITURE	(C) Check if travel outside of Texas	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services The Instruction Guid	Loan/Repayment/Reimb Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contract de explains how to con	ct Labor	Expense Travel In District Travel Out of Dis Other (enter a ca	quipment & Related
1 Total pages Schedule F1:	2 FILER NAME		3 File	er ID (Ethics Cor	nmission Filers)
not available	Dexter Lorance-Navario McCo	у			
4 Date 08/22/2024	5 Payee name United Center				
6 Amount (\$) \$23.53	7 Payee address; 1901 W Madison St Chicago, I	City; L 60612-2459	State:		Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Food/Beverage Expense	at the top of this schedule)	(b) Descri Water during	ption g DNC convention	
EXPENDITORE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	k if Austin, TX, officel	nolder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	I	Office sough	nt	Office held
4 Date 08/23/2024	5 Payee name United Center				
6 Amount (\$) \$10.52	7 Payee address; 1901 W Madison St Chicago, I	City; L 60612-2459	State:		Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Food/Beverage Expense		(b) Descri Water during	ption g DNC convention	
	(C) Check if travel outside of Texa			k if Austin, TX, officel	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt	Office held

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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)							
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guid	Loan/Repayment/Reimb Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contract de explains how to con	ct Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.			
1 Total pages Schedule F1:	2 FILER NAME		3 File	er ID (Ethics Commission Filers)			
not available	Dexter Lorance-Navario McCo	у					
4 Date	5 Payee name						
07/23/2024	WIX.COM						
6 Amount (\$) \$12.99	7 Payee address; 500 Terry A Francois Blvd Fl 6	City; 5 San Francisco, CA 941	State: 58-2354	Zip Code			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Office Overhead/Rental Expense		(b) Descri				
9 Complete ONLY if direct expenditure to benefit C/OH	(C) Check if travel outside of Texa  Candidate / Officeholder name		Office sough	k if Austin, TX, officeholder living expense  It Office held			
4 Date 08/28/2024	5 Payee name WIX.COM						
6 Amount (\$) \$12.99	7 Payee address; 500 Terry A Francois Blvd Fl (	City; 5 San Francisco, CA 941	State: 58-2354	Zip Code			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Office Overhead/Rental Expense  (c) Check if travel outside of Texa		(b) Descri	ption k if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	t Office held			

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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guid	Loan/Repayment/Reimb Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contract de explains how to con	et Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.		
1 Total pages Schedule F1:	2 FILER NAME		3 File	er ID (Ethics Commission Filers)		
not available	Dexter Lorance-Navario McCo	у				
4 Date 09/26/2024	5 Payee name WIX.COM					
6 Amount (\$) \$12.99	7 Payee address; 500 Terry A Francois Blvd Fl 6	City; 5 San Francisco, CA 941	State: 58-2354	Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Office Overhead/Rental Expense  (c) Check if travel outside of Texa		(b) Descri Website	ption  k if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	(	Office sough	nt Office held		
4 Date 10/23/2024	5 Payee name WIX.COM	City;	State:	Zip Code		
6 Amount (\$) \$12.99	7 Payee address; 500 Terry A Francois Blvd Fl 6	•		Σίρ Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Office Overhead/Rental Expense	s. Complete Schedule T.		k if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Cकार्यंdate / Officeholder name		Office sough	nt Office held		

ATTACH ADDITIONAL	COPIES OF	THIS SCHEDULE	AS NEEDED
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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)						
Advertising Expense Accounting/Bariking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Fees Office Overhead/Rental Transport Food/Beverage Expense Polling Expense Expense Printing Expense Travel II Legal Services Salaries/Wages/Contract Labor Travel Contract Labor	tion/Fundraising Expense ortation Equipment & Related e n District Out of District enter a category not listed above)				
Total pages Schedule F1:     not available	2 FILER NAME Dexter Lorance-Navario McCoy	thics Commission Filers)				
4 Date 11/15/2024	5 Payee name WIX.COM					
6 Amount (\$) \$311.76	7 Payee address; City; State: 500 Terry A Francois Blvd Fl 6 San Francisco, CA 94158-2354	Zip Code				
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description Website  (c) Check if travel outside of Texas. Complete Schedule T.	TX, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought	Office held				
4 Date 11/18/2024	5 Payee name WIX.COM					
6 Amount (\$) \$27.98	7 Payee address; City; State: 500 Terry A Francois Blvd Fl 6 San Francisco, CA 94158-2354	Zip Code				
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description Website  (c) Check if travel outside of Texas. Complete Schedule T.	TX, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought	Office held				

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)							
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Loan/Repayment/Rei Fees Office Overhead/Ren Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Cont The Instruction Guide explains how to describe the second	ntal Transportation Equipment & Related Expense Travel In District Tract Labor Travel Out of District Other (enter a category not listed above)					
1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorance-Navario McCoy	3 Filer ID (Ethics Commission Filers)					
4 Date 11/25/2024	5 Payee name WIX.COM						
6 Amount (\$) \$12.99	7 Payee address; City; 500 Terry A Francois Blvd Fl 6 San Francisco, CA 9	State: Zip Code 94158-2354					
PURPOSE OF	(a) Category (See categories listed at the top of this schedule Office Overhead/Rental Expense	(b) Description Website					
EXPENDITURE	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense					
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held					
4 Date 12/23/2024	5 Payee name WIX.COM						
6 Amount (\$) \$12.99	7 Payee address; City; 500 Terry A Francois Blvd Fl 6 San Francisco, CA 9	State: Zip Code 94158-2354					
8 PURPOSE OF	(a) Category (See categories listed at the top of this schedule Office Overhead/Rental Expense	(b) Description Website					
EXPENDITURE	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense					
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held					

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guid	Loan/Repayment/Reimb Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contract de explains how to con	ct Labor	Solicitation/Fundraisir Transportation Equips Expense Travel In District Travel Out of District Other (enter a catego form.	ment & Related	
1 Total pages Schedule F1:	2 FILER NAME		3 File	er ID (Ethics Commi	ssion Filers)	
not available	Dexter Lorance-Navario McCo	у				
4 Date 07/05/2024	5 Payee name Zoom					
6 Amount (\$) \$16.79	7 Payee address; 6606 College Blvd Leawood, R	City; CS 66211-1520	State:	Zip (	Code	
8 PURPOSE OF	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)	(b) Descri Video confe	ption rencing software		
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder	living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt <	Affice held	
4 Date 08/05/2024	5 Payee name Zoom					
6 Amount (\$) \$16.79	7 Payee address; 6606 College Blvd Leawood, R	City; KS 66211-1520	State:	Zip (	Code	
8 PURPOSE OF	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)	(b) Descri Video confe	ption rencing software		
EXPENDITURE	(C) Check if travel outside of Texa	s. Complete Schedule T.	Chec	k if Austin, TX, officeholder	living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt (	7ffce held	

SCHEDULE F1

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

		EXPENDIT	URE CATEGORIES	FOR BOX	8(a)	
A 0 0 0 0	dvertising Expense accounting/Banking consulting Expense contributions/Donations Made By andidate/Officeholder/Political committee aredit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guid	Loan/Repayment/Reim Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	al act Labor	Transportation E Expense Travel In District Travel Out of Dis Other (enter a ca	
1	Total pages Schedule F1:	2 FILER NAME		3 Fil	er ID (Ethics Co	mmission Filers)
	not available	Dexter Lorance-Navario McCo	у			
4	Date 09/05/2024	5 Payee name Zoom				
6	Amount (\$) \$16.79	7 Payee address; 6606 College Blvd Leawood, k	City; &S 66211-1520	State:		Zip Code
8	PURPOSE OF	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)	(b) Descri Video confe	ption rencing software	
	EXPENDITURE	(C) Check if travel outside of Texas	s. Complete Schedule T.	Chec	ck if Austin, TX, office	holder living expense
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	ht	Office held
4	Date	5 Payee name				
	10/07/2024	Zoom				
6	Amount (\$) \$16.79	7 Payee address; 6606 College Blvd Leawood, K	City; SS 66211-1520	State:		Zip Code
8	PURPOSE OF	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)	(b) Descri Video confe	ption rencing software	
	EXPENDITURE	(C) Check if travel outside of Texas	s. Complete Schedule T.	Chec	★ if Austin, TX, office	holder living expense
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt	Office held

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)							
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Fees Office Food/Beverage Expense Polling Gift/Awards/Memorials Expense Printing	s/Wages/Contract Labor	Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above)				
Total pages Schedule F1:     not available	2 FILER NAME Dexter Lorance-Navario McCoy	3 F	Filer ID (Ethics Commission Filers)				
4 Date 11/05/2024	5 Payee name Zoom						
6 Amount (\$) \$16.79	7 Payee address; City 6606 College Blvd Leawood, KS 6621		∵ Zip Code				
PURPOSE OF	(a) Category (See categories listed at the top Office Overhead/Rental Expense	, ,	críption ferencing software				
EXPENDITURE	(C) Check if travel outside of Texas. Comple	ete Schedule T.	eck if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sou	ght Office held				
4 Date 12/05/2024	5 Payee name Zoom						
6 Amount (\$) \$16.79	7 Payee address; City 6606 College Blvd Leawood, KS 6621	•	: Zip Code				
8 PURPOSE OF	(a) Category (See categories listed at the top Office Overhead/Rental Expense	1	cription ferencing software				
EXPENDITURE	(C) Check if travel outside of Texas. Comple	te Schedule T. Ch	eck if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sou	ght Office held				

#### IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

#### SCHEDULE T

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The in	nstruction Guide	explains	how to complete	this form.		1 Total pa	ges Schedule T:		
2 FILER NAME Dexter Lorano	ce-Navario McC	Coy				3 Filer ID	(Ethics Commis	ssion Filers)	
4 Name of Contribu	utor / Corporation	or Labor O	rganization / Pledg	or / Payee					
Southwe	st Airlines								
5 Contribution / Exp		on:							
Schedule	A2 Sche	edule B	Schedule B(	J) Sch	edule C2	☐ Sch	edule D	X Schedule F1	
Schedule	F2 Sch	Schedule F4 Schedule G Schedule H Schedule COH-UC Schedule B-SS							
6 Dates of travel	s of travel 7 Name of person(s) traveling								
		er McC							
08/19/24	8 Departu	re city or na	ame of departure lo	cation					
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08/22/24			name of destination	location					
	Chic	cago							
10 Means of transpo	ortation	11 Purpo	se of travel (includi	ng name of co	onference, s	eminar, or o	ther event)		
Commercia	al Airline	Dei	mocratic Na	ational C	Conven	tion			
Name of Contribu	utor / Corporation	or Labor O	rganization / Pledg	or / Payee					
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Contribution / Exp	penditure reported	on:							
Schedule	A2 Sche	edule B	Schedule B(	J) Sch	edule C2	Sche	edule D	Schedule F1	
Schedule	F2 Sche	edule F4	Schedule G	Sch	edule H	Sch	edule COH-UC	Schedule B-SS	
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Schedule A2	Schedu	lle B	Schedule B(J)	Sched	ule C2	Schedu	ile D	Schedule F1	
Schedule F2	Schedu	le F4	Schedule G	Sched	ule H	Schedu	ile COH-UC	Schedule B-SS	
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Departure city or name of departure location									
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	A	TACH AD	DITIONAL COPI	ES OF THIS	SCHEDULI	E AS NEED	ED		