FORM C/OH CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID Total pages filed: The C/OH Instruction Guide explains how to complete this form. 96 CANDIDATE / MS/MRS/MR FIRST MI OFFICE USE ONLY **OFFICEHOLDER** Grady NAME Date Received JAN 15 2025 R LVD NICKNAME SUFFIX LAST Prestage Date Hand-delivered or Date Postmarked CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; ZIP CODE **OFFICEHOLDER** 36 Big Trail MAILING Receipt # Amount **ADDRESS** Change of Address Missouri City, TX 77459 Date Processed Date Imaged CAMPAIGN MS/MRS/MR FIRST MI **TREASURER** Samuel NAME **NICKNAME** LAST **SUFFIX** Stewart STREET ADDRESS (NO PO BOX PLEASE); **CAMPAIGN** APT / SUITE #; STATE: ZIP CODE **TREASURER** 13410 Indigo Sands Drive Pearland TX 77584 **ADDRESS** (Residence or Business) CAMPAIGN AREA CODE PHONE NUMBER **EXTENSION TREASURER** 713 729-5761 PHONE REPORT **TYPE** X January 15 30th day before election Runoff 15th day after campaign treasurer appointment (officeholder only) Final Report (Attach C/OH-FR) July 15 8th day before election **Exceeded modified** reporting limit PERIOD Month Day Year Month Day Year COVERED 07/01/2024 **THROUGH** 12/31/2024 10 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special 11 OFFICE OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) County Commissioner Precinct 2 District Precinct 2

GO TO PAGE 2

Fort Bend

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

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13 C / OH NAME	Prestage, Grady	:	14 Filer ID	
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditure. These expenditures may have been made without the difficeholders are required to report this information.	ne candidate's or officeh	holder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL	COMMITTEE ADDRESS		
	SPECIFIC	SOMMITTEE ASSISTED		
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRESS	5	
16 CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS (OTHER THAN ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		\$ 1,858.97
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 226,608.97
EXPENDITURE TOTALS	3. TOTAL UNITEM	IZED POLITICAL EXPENDITURES		\$ 83,717.09
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 364,544.01
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LA RIOD	ST DAY OF THE	\$ 256,607.50
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS C TING PERIOD	OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT				
		I swear, or affirm, under penalty true and correct and includes all under Title 15, Election Code.	of perjury, that the acco	ompanying report is be reported by me
JASMINE DEVORIA WILLIAMS Notary Public, State of Texas Comm. Expires 05-09-2027 Notary ID 131740758 Signature of Candidate or Officeholder				
	TARY STAMP / SEAL ABoribed before me, by the s	aid <u>James Grady Prestage</u> ertify which, witness my hand and seal of office.	, this the15	+h day
-	A	Jasmine Devoria Williams	Notaru	administering oath
Signature of office	cer administering	Printed name of officer administering	Tiue of officer 8	auministening Odui

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

3 of 96							
	18 FILER NAME Prestage, Grady 19 Filer ID						
20 SCI NAI	HEDULI ME OF	SUE	TOTAL AMOUNT				
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	226,608.97		
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$			
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$			
4.		SCHEDULE E: LOANS		\$			
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$	364,544.01		
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$			
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$			
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$			
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$			
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$			
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$			
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$			

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 1/22 Rpt: 4/96 2 FILER NAME 3 Filer ID Prestage, Grady 7 Amount of Contribution (\$) 4 Date 5 Full name of contributor X out-of-state PAC (ID#: C00374447 07/12/2024 \$2,500.00 **AECOM PAC** 6 Contributor address; City; State; Zip Code 2000 K Street, Suite 800 Washington, DC 20006 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$2,500.00 12/10/2024 AIA Engineers PAC Contributor address; City; State; Zip Code 15310 Park Row Houston, TX 77005 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#:_ \$2,500.00 12/27/2024 Agha, Majed Contributor address; City; State; Zip Code 19311 N. Cottonwood Green Ln. Cypress, TX 77433 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Agha Engineering Engineer Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:_ \$2,500.00 12/27/2024 Alhammouri, Omar Contributor address; City; State; Zip Code 9757 Katy Frwy Apt. 1912 Houston, TX 77024 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Thompson Engineering **Business Development** Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:_ \$1,500.00 Andrews, Cherita 12/17/2024 Contributor address; City; State; Zip Code 9023 Convent Garden St. Houston, TX 77031 **Employer (See Instructions)** Principal occupation / Job title (See Instructions) MV Engineering CXO

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 2/22 Rpt: 5/96 2 FILER NAME 3 Filer ID Prestage, Grady 4 Date 5 Full name of contributor 7 Amount of Contribution (\$) out-of-state PAC (ID#: 12/02/2024 \$600.00 Ardoin, Raymond 6 Contributor address; City; State; Zip Code 2223 Alassio Isle Ct. Missouri City, TX 77459 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Retired Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 12/27/2024 \$1,000.00 Baker, Tia Contributor address; City; State; Zip Code 11510 Scottsdale Dr. Meadows Place, TX 77477 Principal occupation / Job title (See Instructions) **Employer (See Instructions) Business Development** LJA Engineering Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: \$5,000.00 12/17/2024 Balmos, David Contributor address; City; State; Zip Code 19119 Cardinal Grove Ct. Cypress, TX 77429 Employer (See Instructions) Principal occupation / Job title (See Instructions) **WSB** Engineer Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$1,000.00 12/27/2024 Barfield, Larry Contributor address; City; State; Zip Code 10827 Painted Crescent Ct. Cypress, TX 77433 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Binkley and Barfield Engineer Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$1,500.00 11/14/2024 Benton, Levi Contributor address; City; State; Zip Code 2207 Pineloch Dr. Houston, TX 77062 Employer (See Instructions) Principal occupation / Job title (See Instructions) Levi Benton & Associates Attorney

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 3/22 Rpt: 6/96 3 Filer ID 2 FILER NAME Prestage, Grady Amount of Contribution (\$) 4 Date 5 Full name of contributor out-of-state PAC (ID#: 12/27/2024 \$1,000.00 Binkley, James 6 Contributor address; City; State; Zip Code 9209 Stagecoach Dr. Houston, TX 77041 8 Principal occupation / Job title (See Instructions) Employer (See Instructions) Engineer Binkley and Barfield Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:_ \$1,500.00 12/12/2024 Burroughs, Herman Contributor address; City; State; Zip Code 7917 Second Wind Ct. Missouri City, TX 77459 Principal occupation / Job title (See Instructions) Employer (See Instructions) Allstate Insurance Agent Date Full name of contributor out-of-state PAC (ID#:_ Amount of Contribution (\$) \$2,500.00 12/17/2024 Calhoun, John Contributor address; City; State; Zip Code 126 East Amite St. Jackson, MS 39201 Principal occupation / Job title (See Instructions) Employer (See Instructions) President/CEO **IMS Engineers** Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:_ \$600.00 12/03/2024 Campbell, Jeffery Contributor address; City; State; Zip Code 4603 Blakes Ridge St. Fresno, TX 77545 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** retired Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$4,000.00 12/27/2024 Cannon, Jeffery Contributor address; City; State; Zip Code 4315 Whickham Dr. Fulshear, TX 77441 Principal occupation / Job title (See Instructions) Employer (See Instructions) LJA Engineer

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 4/22 Rpt: 7/96 2 FILER NAME 3 Filer ID Prestage, Grady 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 12/02/2024 Carter, Darryl \$2,500.00 6 Contributor address; City; State; Zip Code 5651 Wilers Way Houston, TX 77056 8 Principal occupation / Job title (See Instructions) Employer (See Instructions) Attorney Self Employed Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 12/03/2024 Castaneda, Santiago \$5,000.00 Contributor address; City; State; Zip Code 2426 Mills Creek Dr. Kingwood, TX 77339 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Engineer Omega Engineers, Inc. Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 12/10/2024 Cobb Fendley PAC \$120.00 Contributor address; City; State; Zip Code 4424 W. Sam Houston Pkwy. N.Suite 600 Houston, TX 77041 **Employer (See Instructions)** Principal occupation / Job title (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 11/22/2024 \$1,500.00 Coleman, Cheryl Contributor address; City; State; Zip Code 3602 Battle creek Dr. Missouri City, TX 77459 **Employer (See Instructions)** Principal occupation / Job title (See Instructions) **TAX Burger** Tax Administrator Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 12/17/2024 \$2,500.00 Collins, David Contributor address; City; State; Zip Code 7719 Chasewood Dr. Missouri City, TX 77489 **Employer (See Instructions)** Principal occupation / Job title (See Instructions) **FCM** Engineer

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 5/22 Rpt: 8/96 2 FILER NAME 3 Filer ID Prestage, Grady Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 12/19/2024 Corbett, Nino \$2,500.00 6 Contributor address; City; State; Zip Code 27101 Westheimer Pkwy. Houston, TX 77494 8 Principal occupation / Job title (See Instructions) Employer (See Instructions) Developer Post Oak Point LTD Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#:_ 12/27/2024 Crain, Brad \$2,500.00 Contributor address; City; State; Zip Code 3812 Buckholt Street Pearland, TX 77581 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Contractor Crain Group, LLC Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 12/02/2024 **DEC PAC** \$2,500.00 Contributor address; City; State; Zip Code 1 Greenway Plaza STE 225 Houston, TX 77046 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 12/05/2024 \$600.00 Davis, Nicole Contributor address; City; State; Zip Code 11506 Chipwood Hollow Ct. Sugarland, TX 77498 Principal occupation / Job title (See Instructions) **Employer (See Instructions) AVDA** Counselor Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 12/13/2024 Davis, Nicole \$600.00 Contributor address; City; State; Zip Code 11506 Chipwood Hollow Ct. Sugariand, TX 77498 Principal occupation / Job title (See Instructions) **Employer (See Instructions) AVDA** Counselor

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 6/22 Rpt: 9/96 3 Filer ID 2 FILER NAME Prestage, Grady 7 Amount of Contribution (\$) Date 5 Full name of contributor out-of-state PAC (ID#: 12/19/2024 \$5,000.00 **EHRA Engineering PAC** 6 Contributor address; City; State; Zip Code 10011 Meadowglen Lane Houston, TX 77042 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$1,500.00 12/27/2024 Eastwood, David Contributor address; City; State; Zip Code 17407 Highway 59 N. Humble, TX 77396 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Geotech Engineer Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 12/17/2024 \$5,000.00 Eaton, Samuel Contributor address; City; State; Zip Code 2522 Sunrise Harbor Ln Pearland, TX 77584 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** JNE Green-Team Consultant Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:_ \$600.00 12/02/2024 Fort Bend United Contributor address; City; State; Zip Code P.O. BCAX 420811 Houston, TX 77242 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) out-of-state PAC (ID#: Full name of contributor Date \$2,500.00 Freese and Nichols PAC 12/02/2024 Contributor address; City; State; Zip Code 801 Cherry St., Suite 2800 Fort Worth, TX 76102 Employer (See Instructions) Principal occupation / Job title (See Instructions) Version V4.1.0.5dd2ace2

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Forms provided by Texas Ethics Commission

SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 7/22 Rpt: 10/96 3 Filer ID 2 FILER NAME Prestage, Grady Date Amount of Contribution (\$) 5 Full name of contributor out-of-state PAC (ID#: 12/10/2024 \$500.00 Gehbauer, Gary 6 Contributor address; City; State; Zip Code 454 W. 18th St Houston, TX 77008 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) **BGE** Engineer Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 12/27/2024 \$160.00 Gehringer, Mark Contributor address; City; State; Zip Code 16340 Park Ten Pl Unit 350 Houston, TX 77084 Principal occupation / Job title (See Instructions) **Employer (See Instructions) RG Miller Engineers** Engineer Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$700.00 09/13/2024 Gibbs, Vickie Contributor address; City; State; Zip Code 3802 Point Clear Drive Missouri City, TX 77459 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$120.00 12/19/2024 Glenn, Kevin Contributor address; City; State; Zip Code 501 Ulrich Sugar Land, TX 77498 **Employer (See Instructions)** Principal occupation / Job title (See Instructions) Retired Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$1,500.00 12/17/2024 Green, Dawn Contributor address; City; State; Zip Code 11 Cascade Glen San Antonio, TX 78232 Principal occupation / Job title (See Instructions) Employer (See Instructions) KCI Engineer

MONETARY POLITICAL CONTRIBUTIONS

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 8/22 Rpt: 11/96 3 Filer ID 2 FILER NAME Prestage, Grady Amount of Contribution (\$) 4 Date 5 Full name of contributor out-of-state PAC (ID#: 12/10/2024 \$1,000.00 HALFF Associates- State PAC 6 Contributor address; City; State; Zip Code 1201 N. Bowser Road Richardson, TX 75081 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$5,000.00 12/02/2024 HR Green Texas PAC Contributor address; City; State; Zip Code 11011 Richmond Ave, Suite 200 Houston, TX 77042 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$2,500.00 12/17/2024 **HVJ PAC** Contributor address; City; State; Zip Code 6120 S. Dairy Ashford Rd. Houston, TX 77072 Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of Contribution (\$) out-of-state PAC (ID#:_ Date Full name of contributor \$900.00 12/17/2024 Haboush, Suzanne Contributor address; City; State; Zip Code 23310 Roberts Cemetery Rd. Hockley, TX 77447 Employer (See Instructions) Principal occupation / Job title (See Instructions) **GLF Business Development** Amount of Contribution (\$) Full name of contributor Date out-of-state PAC (ID#: \$1,000.00 Hamilton, David 12/27/2024 Contributor address; City; State; Zip Code 12315 Woodthorpe Ln Houston, TX 77024 Employer (See Instructions) Principal occupation / Job title (See Instructions) Binkley & Barfield/DCCM Engineer

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 9/22 Rpt: 12/96 2 FILER NAME 3 Filer ID Prestage, Grady Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 12/03/2024 Hammodeh, Mustafa \$1,500.00 6 Contributor address; City; State; Zip Code 15810 Park Ten Place Houston, TX 77084 8 Principal occupation / Job title (See Instructions) Employer (See Instructions) COO CSI Engineering Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 12/17/2024 Han, Jim \$2,500.00 Contributor address; City; State; Zip Code 6023 Gatewood Manor Dr. Katy, TX 77494 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** President Krest Engineers, LLC Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 12/10/2024 Heidaker, Mark \$2,500.00 Contributor address; City; State; Zip Code 7703 Breezeway Bend Ln. Katy, TX 77494 Principal occupation / Job title (See Instructions) Employer (See Instructions) President **PAS Property Acquisition Services** Date Full name of contributor out-of-state PAC (ID#:_ Amount of Contribution (\$) 12/17/2024 Henkel, Lyle \$2,500.00 Contributor address; City; State; Zip Code 8630 Wyndham Village Dr. Jersey Village Dr., TX 77040 Principal occupation / Job title (See Instructions) Employer (See Instructions) **Bowman Engineers** Engineer Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$1,200.00 12/10/2024 Herrington, Katie Contributor address; City; State; Zip Code 1610 Mustang Crossing Missouri City, TX 77459 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Administrator Fort Bend

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 10/22 Rpt: 13/96 3 Filer ID 2 FILER NAME Prestage, Grady Date Amount of Contribution (\$) 5 Full name of contributor out-of-state PAC (ID#: 12/17/2024 \$3,000.00 Hines, Daimian 6 Contributor address; City; State; Zip Code 4616 Austin St. Houston, TX 77004 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Hines Architecture & Design Architect Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#:_ Date \$600.00 12/10/2024 Howard, Willie Contributor address; City; State; Zip Code 7035 Rambling Tree Lane Richmond, TX 77407 Employer (See Instructions) Principal occupation / Job title (See Instructions) **Howard Investment Services** Financial Advisor Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$1,500.00 12/10/2024 Huitt-Zollars, Inc Texas PAC Contributor address; City; State; Zip Code 5430 LBJ Freeway, Suite 1500 Dallas, TX 75240 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) out-of-state PAC (ID#:_ Date Full name of contributor \$3,500.00 07/22/2024 IDS ENGINEERING GROUP PAC Contributor address; City; State; Zip Code 13430 Northwest Frwy, Suite 700 Houston, TX 77040 Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$5,000.00 12/17/2024 Jajoo, Harish Contributor address; City; State; Zip Code 62 Bradford Circle Sugar Land, TX 77479 **Employer (See Instructions)** Principal occupation / Job title (See Instructions) **HJ Consulting** Engineer Version V4.1.0.5dd2ace2 www.ethics.state.tx.us Forms provided by Texas Ethics Commission

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 11/22 Rpt: 14/96 3 Filer ID 2 FILER NAME Prestage, Grady 7 Amount of Contribution (\$) 4 Date 5 Full name of contributor out-of-state PAC (ID#: \$2,500.00 08/12/2024 Johnson, Gabriel 6 Contributor address; City; State; Zip Code 9407 Reston Grove Lane Houston, TX 77095 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) Engineer **AIG Technical Services** Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:_ \$5,000.00 12/03/2024 Johnson, Gabriel Contributor address; City; State; Zip Code 9407 Reston Grove Lane Houston, TX 77095 Principal occupation / Job title (See Instructions) **Employer (See Instructions) AIG Technical Services** Engineer Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date \$600.00 12/09/2024 Johnson, Tommy Contributor address; City; State; Zip Code 11905 Riprap Dr. Manor, TX 78653 Principal occupation / Job title (See Instructions) Employer (See Instructions) **Initutive Machines Director of Chain Supply** Amount of Contribution (\$) out-of-state PAC (ID#: Date Full name of contributor \$1,500.00 12/17/2024 Junius, Nathan Contributor address; City; State; Zip Code 4 Thrush St. New Orleans, LA 70124 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Linfield, Hunter & Junius, Inc. Civil Engineer Amount of Contribution (\$) out-of-state PAC (ID#: Full name of contributor Date \$5,000.00 Kalaga, Sharat 12/02/2024 Contributor address; City; State; Zip Code 10 Ellicott Way Sugar Land, TX 77479 Employer (See Instructions) Principal occupation / Job title (See Instructions) Civitas Engineering Engineer

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 12/22 Rpt: 15/96 2 FILER NAME 3 Filer ID Prestage, Grady Date 5 Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 12/27/2024 \$1,000.00 Laham, Youssef 6 Contributor address; City; State; Zip Code 23230 Sumners Creek Ct. Katy, TX 77494 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) Engineer Binkley and Barfield Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 12/27/2024 \$2,500.00 Lee, C.C. Contributor address; City; State; Zip Code 6001 Savoy Dr. #100 Hpuston, TX 77036 Employer (See Instructions) Principal occupation / Job title (See Instructions) **Architect** STOA Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 12/06/2024 Limar-Gee, Ordia \$600.00 Contributor address; City; State; Zip Code 10602 Indian Paintbrush Ln. Houston, TX 77095 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Retired out-of-state PAC (ID#: Amount of Contribution (\$) Date Full name of contributor \$1,500.00 12/17/2024 Linebarger Goggan Blair& Sampson, LLP Contributor address; City; State; Zip Code P.O. Box 17428 Austin, TX 78760 **Employer (See Instructions)** Principal occupation / Job title (See Instructions) Amount of Contribution (\$) Full name of contributor Date out-of-state PAC (ID#: \$600.00 12/09/2024 Lomax, Terralyn Renee Contributor address; City; State; Zip Code 4604 Austin Street #4 Houston, TX 77004 Employer (See Instructions) Principal occupation / Job title (See Instructions) Fort Bend Women Center Social Worker

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 13/22 Rpt: 16/96 3 Filer ID 2 FILER NAME Prestage, Grady Amount of Contribution (\$) Date 5 Full name of contributor out-of-state PAC (ID#: 12/10/2024 \$1,000.00 Love, Jerome 6 Contributor address; City; State; Zip Code 13609 Fountain Mist Dr. Pearland, TX 77584 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Texas Black Expo CEO Amount of Contribution (\$) out-of-state PAC (ID#:_ Full name of contributor Date \$1,500.00 12/17/2024 Magon, Naina Contributor address; City; State; Zip Code 6115 Ballina Canyon Drive Katy, TX 77041 Principal occupation / Job title (See Instructions) Employer (See Instructions) Hawes Hill & Associates Principal Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$600.00 12/16/2024 Martin, Rita Contributor address; City; State; Zip Code 3015 Selene Dr. Missouri City, TX 77459 Principal occupation / Job title (See Instructions) Employer (See Instructions) HCC Analyst Amount of Contribution (\$) out-of-state PAC (ID#: Date Full name of contributor \$2,500.00 12/10/2024 Matocha, Kevin Contributor address; City; State; Zip Code 1600 Hwy. 6 South, Ste. 245 Sugar Land, TX 77478 **Employer (See Instructions)** Principal occupation / Job title (See Instructions) Stonehendge Developer Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$5,000.00 12/17/2024 Mbachu, Frank Contributor address; City; State; Zip Code 4419 April Meadow Way Sugar Land, TX 77479 Employer (See Instructions) Principal occupation / Job title (See Instructions) **FCM** engineers Engineer

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 14/22 Rpt: 17/96 2 FILER NAME 3 Filer ID Prestage, Grady Date 5 Full name of contributor 7 Amount of Contribution (\$) out-of-state PAC (ID#: 12/10/2024 Middleton, Donald \$2,500.00 6 Contributor address; City; State; Zip Code 7118 Pinehook LN. Houston, TX 77016 8 Principal occupation / Job title (See Instructions) Employer (See Instructions) Principal HTS Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 12/03/2024 Mills, Daniel \$500.00 Contributor address; City; State; Zip Code 3122 Conway St. Houston, TX 77025 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Construction Synchro Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 12/27/2024 Mineo, Kevin \$1,000.00 Contributor address; City; State; Zip Code 811 Highland Houston, TX 77009 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Engineer Binkley Barfield/DCCM Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 12/10/2024 \$500.00 Moacyr, Marcelo Contributor address; City; State; Zip Code 5719 Martinique Pass Sugarland, TX 77479 **Employer (See Instructions)** Principal occupation / Job title (See Instructions) DEC Engineer Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$5,000.00 12/17/2024 Moss, Bonnie Contributor address; City; State; Zip Code 14800 Memorial Drive, Apt. 703 Houston, TX 77079 Principal occupation / Job title (See Instructions) Employer (See Instructions) **MBCO Engineering** Engineer

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 15/22 Rpt: 18/96 2 FILER NAME 3 Filer ID Prestage, Grady 4 Date 5 Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 12/27/2024 \$1,500.00 Murphy, Brian 6 Contributor address; City; State; Zip Code 5950 Berkshire, Ste. 700 Dallas, TX 75225 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) Developer Amount of Contribution (\$) X out-of-state PAC (ID#: C00366559 Date Full name of contributor 10/07/2024 \$3,000.00 NRG Energy INC PAC Contributor address; City; State; Zip Code 804 Carnegie Center Princeton, NJ 08540-6023 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Date Full name of contributor out-of-state PAC (ID#:_ Amount of Contribution (\$) \$2,000.00 09/20/2024 Olivier, Raquel Contributor address; City; State; Zip Code 17318 Atherington Place Spring, TX 77379 **Employer (See Instructions)** Principal occupation / Job title (See Instructions) Consultant Olivier, INC out-of-state PAC (ID#:_ Amount of Contribution (\$) Date Full name of contributor \$500.00 11/04/2024 Pape Dawson Engineers -PAC Contributor address; City; State; Zip Code 2000 N.W. Loop 410 San Antonio, TX 78213 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Amount of Contribution (\$) out-of-state PAC (ID#: Full name of contributor Date \$250.00 12/03/2024 Phillips, James Contributor address; City; State; Zip Code 27923 Barker Hollow Dr. Katy, TX 77494 **Employer (See Instructions)** Principal occupation / Job title (See Instructions) Barker Hostetler Attorney

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 16/22 Rpt: 19/96 Filer ID 2 FILER NAME Prestage, Grady Date 5 Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 12/19/2024 \$10,000.00 Pilla, Satva 6 Contributor address; City; State; Zip Code 4103 Oak Blossom Ct. Houston, TX 77059 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) Engineer I GET Services LLC Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:_ \$1,650.00 12/16/2024 Prestage, Fheryl Contributor address; City; State; Zip Code 36 Big Trail Missouri City, TX 77459 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Information Technology **Houston Community College** Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$5,000.00 12/27/2024 **Quiddity PAC** Contributor address; City; State; Zip Code 6330 West Loop S., Ste 150 Bellaire, TX 77401 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Amount of Contribution (\$) Date out-of-state PAC (ID#: Full name of contributor \$1,500.00 12/27/2024 **RS&H PAC** Contributor address; City; State; Zip Code 8240 North MOPAC Expressway Suite 300 Austin, TX 78759 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$1.500.00 12/10/2024 Randermann, Randy Contributor address; City; State; Zip Code 4860 James Ln. Fulshear, TX 77441 Employer (See Instructions) Principal occupation / Job title (See Instructions) BGE, Inc Engineer

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 17/22 Rpt: 20/96 3 Filer ID 2 FILER NAME Prestage, Grady Date 5 Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 12/17/2024 Responsible Government PAC \$2,500.00 6 Contributor address; City; State; Zip Code 5005 Riverway, Suite 500 Houston, TX 77056 9 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) Amount of Contribution (\$) Full name of contributor Date out-of-state PAC (ID#: \$1,000.00 12/10/2024 Reynolds, Ronald (Rep.) Contributor address; City; State; Zip Code 6140 Highway 6 South 233 Missouri City, TX 77459 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** State Rep. Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: STV Infrastructure PAC \$2,500.00 12/10/2024 Contributor address; City; State; Zip Code 1820 Regal Row, Ste. 200 Dallas, TX 75235 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) \$5,000.00 12/02/2024 Sabouni, Lina Contributor address; City; State; Zip Code 23 Palm Drive Missouri City, TX 77459 Employer (See Instructions) Principal occupation / Job title (See Instructions) AutoArch Architect Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$1,500.00 12/19/2024 Saliger, Wayne Contributor address; City; State; Zip Code 3338 County Rd 239 Gonzales, TX 78629 **Employer (See Instructions)** Principal occupation / Job title (See Instructions) Saliger Engineering Engineer

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 18/22 Rpt: 21/96 2 FILER NAME 3 Filer ID Prestage, Grady Date 7 Amount of Contribution (\$) 5 Full name of contributor out-of-state PAC (ID#: \$2,500.00 12/10/2024 Schatte, Andrew 6 Contributor address; City; State; Zip Code 5330 Montrose Blvd. Houston, TX 77005 8 Principal occupation / Job title (See Instructions) Employer (See Instructions) **Americus Holdings** Investor Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) \$2,500.00 12/17/2024 Sharma, Priya Contributor address; City; State; Zip Code 4611 Valerie St. Bellaire, TX 77401 Principal occupation / Job title (See Instructions) Employer (See Instructions) Owner Concept Engineering out-of-state PAC (ID#: Amount of Contribution (\$) Date Full name of contributor \$2,500.00 12/19/2024 Signorelli, Daniel Contributor address; City; State; Zip Code 1401 Woodlands Parkway The Woodlands, TX 77380 Principal occupation / Job title (See Instructions) Employer (See Instructions) Developer The Signorelli Group Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$2,500.00 12/16/2024 Singh, Priti Contributor address; City; State; Zip Code 28 Whitworth Way Sugar Land, TX 77479 Principal occupation / Job title (See Instructions) Employer (See Instructions) **Associated Testing** Engineer Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$600.00 12/09/2024 Singleton, Vivian Contributor address; City; State; Zip Code 2622 Harvest Moon Missouri City, TX 77489 Employer (See Instructions) Principal occupation / Job title (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 19/22 Rpt: 22/96 2 FILER NAME 3 Filer ID Prestage, Grady 5 Full name of contributor 7 Amount of Contribution (\$) Date out-of-state PAC (ID#: 12/17/2024 \$1,500.00 Smith, Brian 6 Contributor address; City; State; Zip Code 5311 Blythewood St. Houston, TX 77021 9 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) **BSCI** Construction Manager Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: Date \$1,500.00 12/27/2024 Sowells, Jerry Contributor address; City; State; Zip Code 13430 Northwest Fwy., Ste. 200 Houston, TX 77040 **Employer (See Instructions)** Principal occupation / Job title (See Instructions) Sowells Consulting engineers Engineer out-of-state PAC (ID#: Amount of Contribution (\$) Full name of contributor Date \$2,500.00 12/17/2024 Sreerama, Karun Contributor address; City; State; Zip Code 4406 Orange Leaf Ct. Houston, TX 77059 Employer (See Instructions) Principal occupation / Job title (See Instructions) **Agility Engineering** Engineer Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date \$1,500.00 12/27/2024 Sunderwala, Jay Contributor address; City; State; Zip Code 2313 West Sam Houston Parkway Houston, TX 77043 Employer (See Instructions) Principal occupation / Job title (See Instructions) Ninyo & Moore Engineer out-of-state PAC (ID#: Amount of Contribution (\$) Full name of contributor Date \$5,000.00 TNP Political Action Committee 12/17/2024 Contributor address; City; State; Zip Code 5237 N. Riverside Dr., Ste. 100 Fort Worth, TX 76137 **Employer (See Instructions)** Principal occupation / Job title (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 20/22 Rpt: 23/96 2 FILER NAME 3 Filer ID Prestage, Grady Date Amount of Contribution (\$) 5 Full name of contributor X out-of-state PAC (ID#: C00457853 12/19/2024 \$1,500.00 TSVC/ Terracon PAC 6 Contributor address; City; State; Zip Code 10841 S. Ridgeview Road Olathe, KS 66061 8 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 12/17/2024 \$5,000.00 Talje, Bassem Contributor address; City; State; Zip Code 575 N. Dairy Ashford, Ste. 700 Houston, TX 77079 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Engineer **Tetratech Engineers** Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$600.00 12/27/2024 Telfair, Oscar Contributor address; City; State; Zip Code P.O. Box 446 Missouri City, TX 77459 **Employer (See Instructions)** Principal occupation / Job title (See Instructions) **FBC** Judge Amount of Contribution (\$) out-of-state PAC (ID#: Date Full name of contributor \$2,500.00 11/22/2024 Turner, Llarance Contributor address; City; State; Zip Code P.O. Box 481 Stafford, TX 77497 **Employer (See Instructions)** Principal occupation / Job title (See Instructions) Kaluza Inc. Engineer Amount of Contribution (\$) out-of-state PAC (ID#: Full name of contributor Date \$250.00 12/03/2024 Ulmer, Gregory Contributor address; City; State; Zip Code 4394 Harvest Lane Houston, TX 77004 **Employer (See Instructions)** Principal occupation / Job title (See Instructions) Baker Hostetler Attorney

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 21/22 Rpt: 24/96 2 FILER NAME 3 Filer ID Prestage, Grady Date 5 Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 12/11/2024 Valdez, Ahmed \$1,000.00 6 Contributor address; City; State; Zip Code 4600 Hwy. 6 N., Ste. 210 Houston, TX 77084 8 Principal occupation / Job title (See Instructions) Employer (See Instructions) Engineer **AKV Consulting Engineers** Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#:_ 12/12/2024 Valdez, Ahmed \$500.00 Contributor address; City; State; Zip Code 4600 Hwy. 6 N., Ste. 210 Houston, TX 77084 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Engineer **AKV Consulting Engineers** Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 12/17/2024 Weaver- Rivers, Veronica \$1,500.00 Contributor address; City; State; Zip Code 11757 Katy Fwy. Houston, TX 77079 Principal occupation / Job title (See Instructions) Employer (See Instructions) Engineer **MBROH Engineering** Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$200.00 12/10/2024 Wilson, Gerald Contributor address; City; State; Zip Code 4611 Biggam Fresno, TX 77545 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Wilson Engineering and Construction Services Engineer Amount of Contribution (\$) out-of-state PAC (ID#: Date Full name of contributor \$1,500.00 12/02/2024 Wong, Daniel Contributor address; City; State; Zip Code 1 Big Trail Missouri City, TX 77459 Principal occupation / Job title (See Instructions) Employer (See Instructions) Tolunay-Wong Engineers, Inc. Engineer

MONE	TARY POLITICAL CONTRIBUTION	DNS		SCHEDU	LE A1
The Instr	1 Total pages So Sch: 22/22 R				
Prestage, 0			3 Filer ID		
Date 12/27/2024	5 Full name of contributor X out-of-state PAC (ID#: 9 Woolpert, Inc. PAC 6 Contributor address; City; State; Zip Code 4454 IDEA CENTER BLVD. Beavercreek, OH 45430	C00479899)	7 Amount of Con	tribution (\$)	\$2,500.00
Principal occ	cupation / Job title (See Instructions)	9 Employer (See Instructions)	5)		
Date 12/10/2024	Contributor address; City; State; Zip Code 1025 S Shepherd Dr. Unit 310		Amount of Con	tribution (\$)	\$2,500.00
Principal occ Engineer	Houston, TX 77019 cupation / Job title (See Instructions)	Employer (See Instructions) Zarinkelk Engineering	<u> </u>		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Office Overhead/Rental Expense Food/Beverage Expense Gift/Awards/Memorials Expense Consulting Expense Polling Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Credit Card Payment Travel Out of District Printing Expense Salaries/Wages/Contract Labor Legal Services 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 Filer ID Sch: 1/70 Rpt: 26/96 Prestage, Grady 4 Date 5 Payee name 12/15/2024 ActBlue 6 Amount (\$) Payee address; City; State; Zip Code \$1,801.21 366 Summer Street Somerville, MA 02144 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Fundraising commission Complete ONLY if direct Candidate/Officeholder name Office held Office sought expenditure to benefit C/OH Date Payee name 12/20/2024 Adams, Debbie Amount (\$) Payee address; City; State; Zip Code \$467.00 6194 Jonathan Alaric Avenue Gonzales, LA 70737 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense **Event supplies** Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 12/30/2024 Adams, Debbie Payee address; City; State; Zip Code Amount (\$) \$365.00 6194 Jonathan Alaric Avenue Gonzales, LA 70737 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense **Event supplies** Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

Candidate/Officeholder/Politic Credit Card Payment	Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1: Sch: 2/70 Rpt: 27/96	2 FILER NAME Prestage, Grady 3 Filer ID
4 Date 08/02/2024	5 Payee name Alexandria Foundation
6 Amount (\$) \$2,000.00	7 Payee address; City; State; Zip Code 7031 West Fuqua Missouri City, TX 77489
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date 09/06/2024	Payee name Alexandria Foundation Payee address; City; State; Zip Code
Amount (\$) \$335.00	Payee address; City; State; Zip Code 7031 West Fuqua Missouri City, TX 77489
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date 10/04/2024	Payee name Alexandria Foundation
Amount (\$) \$2,000.00	Payee address; City; State; Zip Code 7031 West Fuqua
PURPOSE OF EXPENDITURE	Missouri City, TX 77489 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (other a category and listed above)

	Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 3/70 Rpt: 28/96	Prestage, Grady
4	Date	5 Payee name
	08/12/2024	Alexs Kitchen
	Amount (\$) \$191.42	7 Payee address; City; State; Zip Code 2601 Cartwright Road Missouri City, TX 77459
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Scholarship luncheon
9	Complete ONLY if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought Office held H
	Date	Payee name
	12/09/2024	Allen, Charolette
	Amount (\$) \$500.00	Payee address; City; State; Zip Code Route 1, Box 712 Wharton, TX 77488
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Food preparation services
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	09/20/2024	Allison Riggs Campaign
	Amount (\$) \$500.00	Payee address; City; State; Zip Code 1415 West Highway 54
		Durham, NC 27707
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (exter a category and listed above)

	Candidate/Officeholder/Politice Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 4/70 Rpt: 29/96	Prestage, Grady
4		5 Payee name
	07/01/2024	Alpha Traditions
	Amount (\$) \$269.00	7 Payee address; City; State; Zip Code 1806 Washington Avenue columbia, SC 29201
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense 269.00
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	09/13/2024	Amazon Marketplace
	Amount (\$) \$121.42	Payee address; City; State; Zip Code 410 Terry Avenue North Seattle, WA 98109
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office equipment
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/15/2024	Amazon Marketplace
	Amount (\$) \$182.72	Payee address; City; State; Zip Code 410 Terry Avenue North
		Seattle, WA 98109
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office equipment
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 5/70 Rpt: 30/96 Prestage, Grady 4 Date Payee name 11/15/2024 Amazon Marketplace Amount (\$) Payee address; City; State; Zip Code \$692.21 410 Terry Avenue North Seattle, WA 98109 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense Supplies for Event Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 10/31/2024 American Caribbean Chamber of Commerce Payee address; City; State; Zip Code Amount (\$) \$1,000.00 6201 Bonhomme St Houston, TX 77036 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense **Event Sponsorship** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 08/19/2024 American Leadership Forum Payee address; State; Zip Code Amount (\$) City; \$1,036.27 1801 Main Street Houston, TX 77002 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee **Event Sponsorship** Candidate/Officeholder name Office held Complete ONLY if direct Office sought expenditure to benefit C/OH

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wases/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 6/70 Rpt: 31/96	Prestage, Grady
4	Date	5 Payee name
	07/02/2024	American Storage
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$230.00	2427 Texas Parkway
		Missouri City, TX 77489
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense
		230
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
•	expenditure to benefit C/O	
	Date	Payee name
	07/03/2024	American Storage
\vdash	Amount (\$)	Payee address; City; State; Zip Code
	\$334.00	2427 Texas Parkway
	400 1100	2127 Total Faithay
		Missouri City, TX 77489
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Storage
)	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	07/03/2024	American Storage
	Amount (\$)	Payee address; City; State; Zip Code
	\$325.00	2427 Texas Parkway
		Missouri City, TX 77489
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	EXPERDITORE	Check if Austin, TX, officeholder living expense
		Storage
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a cotecopy pot listed about)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 7/70 Rpt: 32/96	Prestage, Grady
4	Date	5 Payee name
	08/05/2024	American Storage
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$205.00	2427 Texas Parkway
		Missouri City, TX 77489
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Storage
		Storage
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
_		
	Date	Payee name
	08/05/2024	American Storage
	Amount (\$)	Payee address; City; State; Zip Code
	\$609.00	2427 Texas Parkway
		Missouri City, TX 77489
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Storage
		otolago .
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	09/03/2024	American Storage
	Amount (\$)	Payee address; City; State; Zip Code
	\$205.00	2427 Texas Parkway
		Missouri City, TX 77489
_	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Storage
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Oh	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

Event Expense Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundralsing Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment	Al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 8/70 Rpt: 33/96	Prestage, Grady
4	Date	5 Payee name
	09/05/2024	American Storage
6	Amount (\$) \$609.00	7 Payee address; City; State; Zip Code 2427 Texas Parkway Missouri City, TX 77489
3	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Storage
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/02/2024	American Storage
	Amount (\$) \$205.00	Payee address; City; State; Zip Code 2427 Texas Parkway Missouri City, TX 77489
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Storage
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/08/2024	American Storage
	Amount (\$) \$309.00	Payee address; City; State; Zip Code 2427 Texas Parkway
		Missouri City, TX 77489
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Storage
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (expense a category and listed should)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 9/70 Rpt: 34/96	Prestage, Grady
4	Date	5 Payee name
	10/07/2024	American Storage
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$300.00	2427 Texas Parkway
		Missouri City, TX 77489
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Storage
L		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experiditure to benefit C/O	
	Date	Payee name
	11/04/2024	American Storage
	Amount (\$)	Payee address; City; State; Zip Code
	\$205.00	2427 Texas Parkway
		Missouri City, TX 77489
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	0.000	Check if Austin, TX, officeholder living expense Storage
		Storage
_	Complete ONLY if disease	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OH	- me e e e gra
_	•	
	Date	Payee name
	11/04/2024	American Storage
	Amount (\$)	Payee address; City; State; Zip Code
	\$609.00	2427 Texas Parkway
		Missouri City, TX 77489
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	EXPERIENCE	Check if Austin, TX, officeholder living expense
		Storage
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	orportunate to perionic o/Oi	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (expense a cottonory not listed above)

Printing Expense Salaries/Wages/Contract Labor Legal Services OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 10/70 Rpt: 35/96 Prestage, Grady Date Payee name 12/03/2024 American Storage 6 Amount (\$) Payee address; City; State; Zip Code \$205.00 2427 Texas Parkway Missouri City, TX 77489 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schill
Check if Austin, TX, officeholder living expense **EXPENDITURE** Storage Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/05/2024 American Storage Amount (\$) Payee address; City: State; Zip Code \$609.00 2427 Texas Parkway Missouri City, TX 77489 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) **OF** Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Storage Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name Amince Club 07/29/2024 Amount (\$) Payee address; City; State; Zip Code \$250.00 16030 Blueridge Road Missouri City, TX 77489 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee School Supply Drive Office held Complete ONLY if direct Candidate/Officeholder name Office sought

expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel Out of District

Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 11/70 Rpt: 36/96 Prestage, Grady Date Payee name 07/03/2024 Aoede, LLC Amount (\$) Payee address; City: State: Zip Code \$533.22 2440Texas Parkway Missouri City, TX 77489 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Storage Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 08/05/2024 Aoede, LLC Amount (\$) Payee address; City; State; Zip Code \$1,165.59 2440Texas Parkway Missouri City, TX 77489 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas, Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Office Rental Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 10/07/2024 Aoede, LLC City; Amount (\$) Payee address; State; Zip Code \$642.36 2440Texas Parkway Missouri City, TX 77489 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Office Rental Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Candidate/Officeholder/Politice Credit Card Payment	y - al Committee	Legal Services The Instruction Guide explain		/ages/Contract Labor		OTHER (enter a category not listed abo	ive)
-	Tables as Cabadula E1.	T	•	IIIS HOW to co.	mpiete una roini.	-Ta		
1	Total pages Schedule F1: Sch: 12/70 Rpt: 37/96	Prestage, 0				3	Filer ID	
4	Date	5 Payee name	9				4. 4140.600	
	11/04/2024	Aoede, LLC						
6	Amount (\$)	7 Payee addre	ess; City; Sta	ate; Zip Co	de			
	\$642.36	2440Texas	Parkway					
		Missouri C	ity, TX 77489					
8	PURPOSE	(a) Category (s	See Categories listed at the top of this	schedule)	(b) Description			
	OF EXPENDITURE	Office Over	rhead/Rental Expense				ide of Texas. Complete Schedule T.	
					Office Rent		, officeholder living expense	
					Office Refit	.aı		
_	2 - L - CM V // //							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		ficeholder name	Office soug	jht		Office held	
	Date	Payee name)					
	12/05/2024	Aoede, LLC	3					
	Amount (\$)	Payee addre	ess; City; Sta	ate; Zip Cod	de			
	\$642.36	2440Texas		, -,				
	4.5		T Williams					
		Missouri Ci	ity, TX 77489					
	PURPOSE	(a) Category (S	See Categories listed at the top of this	schedule)	(b) Description			
	OF EXPENDITURE		rhead/Rental Expense		_		ide of Texas, Complete Schedule T.	
	EA EIGHT.						, officeholder living expense	
					Office Rent	aı		
_	Consider Other Wilders	O = didata IOF	F t - I.d	0/5-2-224			Office hold	
	Complete ONLY if direct expenditure to benefit C/OH		ficeholder name	Office soug	jht		Office held	
	Date	Payee name						
	09/18/2024	Apple.com						
				to Tin Cor	-			
	Amount (\$)	Payee addre	•	ate; Zip Coo	je			
	\$116.86	One Apple	Park way					
	-							
		Cupertino,	WA 95014					
	PURPOSE	(a) Category (S	Gee Categories listed at the top of this s	schedule)	(b) Description			
	OF EXPENDITURE		rhead/Rental Expense				de of Texas. Complete Schedule T.	
	EXPERIENCE				_		officeholder living expense	
					Office equip	meri	t	
	Complete ONLY if direct		ficeholder name	Office soug	iht		Office held	
	expenditure to benefit C/OF	1						

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Candidate/Officeholder/Politice Credit Card Payment							
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID						
	Sch: 13/70 Rpt: 38/96	Prestage, Grady						
4	Date	5 Payee name						
	09/20/2024	Apple.com						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$106.24	One Apple Park Way						
		Cupertino , WA 95014						
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.						
		Check if Austin, TX, officeholder living expense						
		Subscriptions						
_	0 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H						
	Date	Payee name						
	09/16/2024	Ashley Jadine Hope Foundation						
	Amount (\$)	Payee address; City; State; Zip Code						
\$500.00 9555 Highway 6								
		Missouri City, TX 77459						
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
		Event Sponsorship						
_	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held						
	experientare to benefit Grof							
	Date	Payee name						
	08/28/2024	Bailey, Abenaa						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$150.00	4711 LJ Parkway						
		#4208						
		Sugar Land, TX 77479						
-	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.						
	EXPENDITURE	Check if Austin, TX, officeholder living expense						
		Reimbursement						
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held						
	experialitare to benefit or or							

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (anter a category not listed above)

	Candidate/Officeholder/Politics Credit Card Payment		Legal Services The Instruction Guide explain:		/ages/Contract Labor	OTHER (enter a category not listed	above)
1 Tc	otal pages Schedule F1:	To EII FR NAI				3 Filer ID	
	Sch: 14/70 Rpt: 39/96					3 FIREL ID	
4 Da	ate	5 Payee name	ne		100000000000000000000000000000000000000		
12	2/19/2024		eith Food Service				
6 An	mount (\$)	7 Payee addr	ress; City; State	te; Zip Cod	de		
	\$4,906.69	725 S. Cr	avens Road				
		Missouri C	City, TX 77489				
8	PURPOSE	(a) Category	(See Categories listed at the top of this so	chedule)	(b) Description		
E	OF EXPENDITURE	Event Exp				outside of Texas. Complete Schedule T.	
						n, TX, officeholder living expense	
					Food service	for event	
		= :: += 10					
	omplete <u>ONLY</u> if direct xpenditure to benefit C/OI		Officeholder name	Office soug	ht	Office held	
Da	ate	Payee name	ie				
10	0/01/2024	Benjamin-	-Breaux, Nickita				
An	mount (\$)	Payee addre	ress; City; State	te; Zip Cod	de		
	\$324.00	2002 Manchester Crossing					
			31100101 010009				
		Fresno, TX	X 77545				
	PURPOSE	(a) Category	(See Categories listed at the top of this so	chedule)	(b) Description		
E	OF EXPENDITURE		ayment/Reimbursement			outside of Texas, Complete Schedule T.	
	A LIDI. J					, TX, officeholder living expense	
					Reimburseine	ent for donation	
	omplete <u>ONLY</u> if direct expenditure to benefit C/OF		fficeholder name	Office soug	ht	Office held	
Da	ate	Payee name	ie				
	1/14/2024		-Breaux, Nickita				
An	mount (\$)	Payee addre		te; Zip Cod	le		
	\$150.00		chester Crossing	,			
			Allosto. G. S.				
		Fresno, TX	x 77545				
	PURPOSE	(a) Category	(See Categories listed at the top of this so	rhedule)	(b) Description		
	OF		ayment/Reimbursement	Alouana,	Check if travel o	outside of Texas. Complete Schedule T.	
E	EXPENDITURE		,			, TX, officeholder living expense	
					Reimburseme	ent for Charity Project	
	omplete ONLY if direct		fficeholder name	Office soug	ht	Office held	
exp	penditure to benefit C/OF	A					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHES (extens a contract) and listed about

Candidate/Officeholder/Politica Credit Card Payment	d Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID
Sch: 15/70 Rpt: 40/96	Prestage, Grady
4 Date	5 Payee name
11/27/2024	Benjamin-Breaux, Nickita
\$320.00	7 Payee address; City; State; Zip Code 2002 Manchester Crossing Fresno, TX 77545
B PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Reimbursement for event sponsorship
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/19/2024	Brasserie 19
Amount (\$) \$170.51	Payee address; City; State; Zip Code 1962 W Gray Houston, TX 77019
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Meeting with Subdivision Developers
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
Date 09/09/2024	Payee name Brentwood Baptist Church
Amount (\$) \$2,000.00	Payee address; City; State; Zip Code 13033 Landmark
	Houston , TX 77045
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation
	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense
Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politice Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID
Sch: 16/70 Rpt: 41/96	Prestage, Grady
4 Date	5 Payee name
10/21/2024	Brentwood Baptist Church
6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code 13033 Landmark Houston , TX 77045
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
09/05/2024	Carmen Turner Campaign
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 23503 Starbridge Lake Lane Richmond, TX 77407
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date 10/22/2024	Payee name Carmen Turner Campaign
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 23503 Starbridge Lake Lane Richmond, TX 77407
PURPOSE	1.
OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Donation
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Loan Rep Fees Office Ov Food/Beverage Expense Polling E Gift/Awards/Memorials Expense Printing E Legal Services Salaries/N

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Candidate/Officeholder/Politice Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID
Sch: 17/70 Rpt: 42/96	Prestage, Grady
4 Date	5 Payee name
10/29/2024	Carmen Turner Campaign
6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 23503 Starbridge Lake Lane Richmond, TX 77407
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/24/2024	Carter, Daphne
Amount (\$) \$831.81	Payee address; City; State; Zip Code 59 Flamingo Landing Drive Missouri City, TX 77459
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Holiday gifts for supporters and staff
Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/04/2024	Carter, Sterling
Amount (\$) \$190.00	Payee address; City; State; Zip Code 42 Napoli Way Drive Missouri City, TX 77459
DUDDOCE	The state of the s
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Reimbursement for event sponsorship
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense Travel in District Travel Out of District

Printing Expense Salaries/Wages/Contract Labor Legal Services OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 18/70 Rpt: 43/96 Prestage, Grady Date Payee name 08/06/2024 Charity, Carter Amount (\$) Payee address; City; State; Zip Code \$100.00 1959 Texas Parkway Missouri City, TX 77489 Check if travel outside of Texas. Complete Schedule T. **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee **Event Sponsorship** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 08/14/2024 Chums Incorporated Amount (\$) Payee address; State; Zip Code \$750.00 5925 Almeda Road Unit 10708 Houston, TX 77004 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee **Event Sponsorship** Complete ONLY if direct Candidate/Officeholder name Office held Office sought expenditure to benefit C/OH Date Payee name 12/04/2024 Chums Incorporated Payee address; City; State; Zip Code Amount (\$) \$1,500.00 5925 Almeda Road Unit 10708 Houston, TX 77004 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. OF Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Event underwriting Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Loan Repaym
Fees Office Overhu
Food/Beverage Expense Polling Exper
Gift/Awards/Memorials Expense Printing Expe

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Manss/Contract Labor

Candidate/Officeholder/Politice Credit Card Payment	Al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID
Sch: 19/70 Rpt: 44/96	Prestage, Grady
4 Date	5 Payee name
07/26/2024	CleanPlanet Tree Service
6 Amount (\$) \$1,800.00	7 Payee address; City; State; Zip Code 6806 Laughlin Missouri City, TX 77489
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Citizen Assistance
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
07/05/2024	Colbert, Dennis
Amount (\$) \$500.00	Payee address; City; State; Zip Code 2123 Brook Hill Ridge Drive Chesterfield, MO 63017
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Consulting Fees
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/07/2024	Colin Allred Campaign
Amount (\$) \$500.00	Payee address; City; State; Zip Code POBox 601631
	Dallas, TX 75360
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 20/70 Rpt: 45/96	Prestage, Grady
4	Date	5 Payee name
	10/28/2024	Colin Allred Campaign
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	POBox 601631
		Dallas, TX 75360
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Contributions/Donations Made By Contributions/Donations Made By Contributions/Donations Made By
	EXPENDITURE	Candidate/Officeholder/Political Committee
		Donation
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/01/2024	Colin Allred Campaign
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	POBox 601631
		Dallas, TX 75360
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Candidate/Officeholder/Political Committee
		Donation
_		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	•	
	Date	Payee name
	07/22/2024	Constant Contact
	Amount (\$)	Payee address; City; State; Zip Code
	\$220.50	1601 Trapelo Road
		Waltham, MA 02451
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Database management
		Database management
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Oh	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1: Sch: 21/70 Rpt: 46/96	2 FILER NAME 3 Filer ID Prestage, Grady
4	Date 08/20/2024	5 Payee name Constant Contact
6	Amount (\$) \$220.50	7 Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Database Management
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 09/20/2024	Payee name Constant Contact
	Amount (\$) \$220.50	Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Database management
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 10/21/2024	Payee name Constant Contact
	Amount (\$) \$220.50	Payee address; City; State; Zip Code 1601 Trapelo Road
		Waltham, MA 02451
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Database Management
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Loa
Fees Offic
Food/Beverage Expense Poll
Gitt/Awards/Memorials Expense Prin

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarias/Manas/Contract Labor

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID
Sch: 22/70 Rpt: 47/96	Prestage, Grady
4 Date	5 Payee name
11/20/2024	Constant Contact
6 Amount (\$) \$220.50	7 Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Database Management
Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/20/2024	Constant Contact
Amount (\$) \$220.50	Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Database management
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date 12/05/2024	Payee name Costco Business Center
Amount (\$) \$223.24	Payee address; City; State; Zip Code 12717 Network Drive
	Stafford, TX 77477
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event Supplies
Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbursement
Fees Office Overhead/Rental Expense
Food/Beverage Expense Polling Expense
Git/Awards/Memorials Expense
Frinting Expense
Frinting Expense
Saleries/Manges/Contract Labor
Saleries/Manges/Contract Labor

	Candidate/Officeholder/Politica Credit Card Payment	d Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 23/70 Rpt: 48/96	Prestage, Grady
4	Date	5 Payee name
	11/15/2024	Cyclone Anaya
6	Amount (\$) \$166.81	7 Payee address; City; State; Zip Code 309 Gray Street Houston, TX 77002
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Meeting with Non Profit Housing Organazation
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Γ	Date	Payee name
	09/27/2024	DAAP Philanthropic Foundation
	Amount (\$) \$1,335.68	Payee address; City; State; Zip Code PO Box 711091 Houston , TX 77271
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event Sponsorship
	Complete ONLY if direct expenditure to benefit C/Oi	Candidate/Officeholder name Office sought Office held
Г	Date	Payee name
	12/13/2024	DAAP Philanthropic Foundation
	Amount (\$) \$442.83	Payee address; City; State; Zip Code PO Box 711091 Houston , TX 77271
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Event Sponsorship
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political of Credit Card Payment					xpense Vages/Contract Labor		Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2 FILER NAM	IE .			3	Filer ID	
	Sch: 24/70 Rpt: 49/96	Prestage,	Grady					
4	Date	5 Payee nam	e					
	12/09/2024	Dickerson						
6	Amount (\$)	7 Payee add	ess; City; Sta	te; Zip Co	de			
	\$160.00	3903 Poet	s Corner					
		Missouri C	city, TX 77459					
8	PURPOSE	(a) Category	See Categories listed at the top of this s	schedule)	(b) Description			
	OF EXPENDITURE	Event Exp					side of Texas. Complete Schedule T.	
	EM EMPHONE				Supplies for		(, officeholder living expense	
					Supplies	DI EVE	erit.	
9	Complete ONLY if direct	Candidate/O	ficeholder name	Office sou	aht		Office held	
9	expenditure to benefit C/O		nceroluei name	Office sou	giit		Office field	
	Date	Payee nam	е					
	12/09/2024	Dickerson	, Ava					
	Amount (\$)	Payee address; City; State; Zip Code						
	\$110.00	3903 Poet	s Corner					
		Missouri C	tity, TX 77459					
	PURPOSE	(a) Category	See Categories listed at the top of this s	schedule)	(b) Description			
	OF EXPENDITURE	Event Expense				Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
		Event supplies					, unicerioues living expense	
-	Complete ONLY if direct	Candidate/O	ficeholder name	Office sou	ght		Office held	
	expenditure to benefit C/O	Н						
H	Date	Payee nam	9					
	10/16/2024	Discount 7						
-	Amount (\$)	Payee addr	ess; City; Sta	te; Zip Co	de			
	\$811.47		s Parkway					
		Missouri C	tity, TX 77489					
_	PURPOSE				(b) Description			
	OF		See Categories listed at the top of this s ation Equipment And Relat				side of Texas. Complete Schedule T.	
	EXPENDITURE	Expense					(, officeholder living expense	
					Vehicle se	rvice		
					1.		Office held	
	Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Office sou	gnt		Office held	
	onpolitical to bolicit 0/0							
	,							

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 25/70 Rpt: 50/96	Prestage, Grady
4	Date	5 Payee name
	07/08/2024	Dona Leti's
	Amount (\$) \$154.24	7 Payee address; City; State; Zip Code 16101 S Post Oak Suite E Houston, TX 77053
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Staff meeting
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Γ	Date	Payee name
	08/23/2024	Dream to Vision Education
	Amount (\$) \$500.00	Payee address; City; State; Zip Code 8787 Sienna Springs Blvd
		Missouri City, TX 77459
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Г	Date	Payee name
	11/07/2024	Dream to Vision Education
	Amount (\$) \$500.00	Payee address; City; State; Zip Code 8787 Sienna Springs Blvd
		Missouri City, TX 77459
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

Total pages Schedule F Sch: 26/70 Rpt: 51/9 Date 11/26/2024 Amount (\$) \$300.0	5 Payee name Dream to Vision Education 7 Payee address; City;	State; Zip Code	3 Filer ID
Date 11/26/2024 Amount (\$) \$300.0	5 Payee name Dream to Vision Education 7 Payee address; City; 8787 Sienna Springs Blvd	State; Zip Code	1
11/26/2024 Amount (\$) \$300.0	7 Payee address; City; 8787 Sienna Springs Blvd	State; Zip Code	•
Amount (\$) \$300.0 PURPOSE OF	7 Payee address; City; 8787 Sienna Springs Blvd	State; Zip Code	
\$300.0 PURPOSE OF	8787 Sienna Springs Blvd	State; Zip Code	
PURPOSE OF			
OF	Missouri City, TX 77459		
OF	Missouri City, TX 77459		
OF	7,		
	(a) Category (See Categories listed at the to	,,	Description
EXPENDITURE	Contributions/Donations Made Candidate/Officeholder/Politica		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Candidate/Oniceriolde//Folitica	a commutee	Donation
Complete ONLY if direct		Office sought	Office held
expenditure to benefit C	ОН		
Date	Payee name		
10/07/2024	Edwards Ministerial Associatio	n	
Amount (\$)	Payee address; City;	State; Zip Code	The state of the s
\$250.0	PO Box 151769		
	Wharton, TX 78730		
PURPOSE	(a) Category (See Categories listed at the to	n of this schedule) (b)	Description
OF EXPENDITURE	Contributions/Donations Made	,	Check if travel outside of Texas, Complete Schedule T.
EXPENDITORE	Candidate/Officeholder/Politica	al Committee	Check if Austin, TX, officeholder living expense
			Donation
Complete ONII V if direct	Candidate/Officeholder name	Office sought	Office held
Complete ONLY if direct expenditure to benefit C		Office Sought	Office field
Date 12/04/2024	Payee name Edwards Ministerial Associatio	n	

Amount (\$)	Payee address; City; PO Box 151769	State; Zip Code	
\$150.0	D PO BOX 151769		
	114		
	Wharton, TX 78730		
PURPOSE OF	(a) Category (See Categories listed at the to	,	Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Contributions/Donations Made Candidate/Officeholder/Politica		Check if Austin, TX, officeholder living expense
	Carididate/Onideriolae// onide	a commune	Donation
Complete ONLY if direct		Office sought	Office held
expenditure to benefit C	ОН		

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Manage/Contract Labor
Salaries/Manage/Contract Labor

Abursement Solicitation/Fundraising Expense
al Expense Transportation Equipment & Related Expense
Travel in District
Travel Out of District
act Labor OTHER (enter a category not listed above)

Candidate/Officeholder/Politic Credit Card Payment	Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID
Sch: 27/70 Rpt: 52/96	Prestage, Grady
4 Date	5 Payee name
09/20/2024	Eric Fagan Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	PO Box 2204
	Sugar Land, TX 77487
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Donation
	Donation
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
10/22/2024	Eric Fagan Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 2204
	Sugar Land, TX 77487
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Donation
	Donation
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
11/14/2024	Family Life Community Resource Center
Amount (\$)	Payee address; City; State; Zip Code
\$200.00	821 E. Highway 90A
\$200.00	621 E. Highway 90A
	Dishmand TV 77406
	Richmond , TX 77406
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Contributions (Donations Made By Contributions (Donations Made By
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Event Sponsorship
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense
Contributions/ Donations Made By -Candidate/Officebolder/Political Committee

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Polling Expense
Printing Expense
Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 28/70 Rpt: 53/96 Prestage, Grady Date 5 Payee name 07/01/2024 FedEx Amount (\$) Payee address; State; Zip Code City; \$312.79 525 Florida Blvd Baton Rouge, LA 70801 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. **Printing Expense EXPENDITURE** Check if Austin, TX, officeholder living expense 312.79 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 11/12/2024 First Watch #612 State: Zip Code Payee address; City; Amount (\$) \$121.19 10505 W Grand Parkway South Richmond, TX 77407 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas, Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Meeting with Elected Officals Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 12/13/2024 Fish Place Payee address; City; State: Zip Code Amount (\$) \$146.14 8817 Highway 6 Ste 750 Missouri City, TX 77459 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense Catering for Alumni Event Office held Office sought Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees
Food/Beverage Expense
Gift/Awards/Memorials Ex

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	al Co	mmittee	Legal Services The Instruction Guide	Sal		ges/Contract Labor		OTHER (enter a	category not listed above)
1	Total pages Schedule F1:	2	FILER NAM	ΛE				3	Filer ID	
	Sch: 29/70 Rpt: 54/96		Prestage,	Grady						
4	Date	5	Payee name	e						
	07/12/2024		Forman, M	Michele						
6	Amount (\$) \$1,000.00	7	5218 Pebb	ress; City; ble Bluff Ln nd, TX 77479	State; Zi	ip Code	Э			
8	PURPOSE	(a)	Category	(See Categories listed at the to	on of this echedule	. (1	b) Description			
	OF EXPENDITURE		Event Exp		p or this scriedule,		Check if travel of		ide of Texas. Comp , officeholder living	
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Of	fficeholder name	Office	e sough	nt		Office he	eld
	Date		Payee name	е						
	12/10/2024		Forman, M	lichele						
	Amount (\$) \$150.00			ess; City; ole Bluff Ln od, TX 77479	State; Zip	p Code)			
_	PURPOSE	(a)		See Categories listed at the to	of this pohodulo	. Id	Description		· · · · · · · · · · · · · · · · · · ·	
	OF EXPENDITURE	1-9		See Categories listed at the to Vages/Contract Labo)	Check if travel of	, TX,	ide of Texas. Comp , officeholder living e	
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh		Candidate/Of	fficeholder name	Office	e sough	it		Office he	₫d
	Date 08/19/2024			Democratic Party						,
	Amount (\$) \$2,500.00		Suite 204	ess; City; uthwest Freeway	State; Zip	p Code	•			
	PURPOSE OF EXPENDITURE		Contributio	See Categories listed at the to ons/Donations Made /Officeholder/Politica	Ву			, TX,	de of Texas. Comp officeholder living only	
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Off	fficeholder name	Office	e sough	rt		Office hel	ld
			Marian Control				***			

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Legal Services OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 30/70 Rpt: 55/96 Prestage, Grady Date 5 Payee name 08/29/2024 Fort Bend Democratic Party Amount (\$) Pavee address: City: State: Zip Code \$7,500,00 13515 Southwest Freeway Suite 204 Sugar Land, TX 77478 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee **Event Sponsorship** Complete ONLY if direct Candidate/Officeholder name Office held Office sought expenditure to benefit C/OH Date Payee name 11/15/2024 Fort Bend EpiCenter Payee address; City; State; Zip Code Amount (\$) 28505 Southwest Freeway \$21,600.00 Rosenberg, TX 77471 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense **Facility Rental** Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name Fort Bend EpiCenter 12/23/2024 Payee address; City; State; Zip Code Amount (\$) \$680.00 28505 Southwest Freeway Rosenberg, TX 77471 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense **Event expenses** Office held Office sought Candidate/Officeholder name Complete ONLY if direct expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Candidate/Officeholder/Politica Credit Card Payment	ommittee Legal Services The Instruction Guide exp		Vages	/Contract Labor		THER (enter a category not listed above)	
1	Total pages Schedule F1:	FILER NAME			3	F	ler ID	
	Sch: 31/70 Rpt: 56/96	Prestage, Grady						
4	Date	Payee name						
	09/09/2024	Fort Bend Seniors Meals on Whee	els					
6	Amount (\$)	Payee address; City;	State; Zip Co	de				
	\$200.00	1330 Band Road						
		Rosenberg, TX 77471						
8	PURPOSE	Category (See Categories listed at the top of t	his schedule)	(b)	Description			
	OF EXPENDITURE	Contributions/Donations Made By					of Texas. Complete Schedule T.	
		Candidate/Officeholder/Political C	ommittee			X, off	ceholder living expense	
					Donation			
_					· · · · · · · · · · · · · · · · · · ·			
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name	Office sou	ght			Office held	
	Date	Payee name						
	10/28/2024	Forward Blue						
	Amount (\$)	Payee address; City;	State; Zip Co	de				
	\$1,000.00	PO Box 702						
		Somers Point, NJ 08244						
	PURPOSE	Category (See Categories listed at the top of t	his schedule)	(b)	Description			
	OF EXPENDITURE	Contributions/Donations Made By					of Texas, Complete Schedule T.	
	LAFEINDITORE	Candidate/Officeholder/Political C	ommittee			X, offi	ceholder living expense	
					Donation			
	Complete ONLY if direct	Condidate /Officeholder name	Office sour	abt			Office held	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name	Office sou	grit			Office field	
						_		
	Date	Payee name						
	11/12/2024	Fountain of Praise						
	Amount (\$)	Payee address; City;	State; Zip Co	de				
	\$220.00	13950 Hillcroft						
		Houston, TX 77085						
	PURPOSE	Category (See Categories listed at the top of the	nis schedule)	(b)	Description			
	OF	Contributions/Donations Made By	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Check if travel outs		of Texas. Complete Schedule T.	
	EXPENDITURE	Candidate/Officeholder/Political C	ommittee				ceholder living expense	
					Event Sponsors	ship		
				_			06 111	
	Complete ONLY if direct	Candidate/Officeholder name	Office sou	ght			Office held	
	expenditure to benefit C/OI							

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Loan Repayment/Reimbu
Office Overhead/Rental E
Polling Expense
Printing Expense
Printing Expense
Salaries/Memoria

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	Candidate/Officeholder/Politice Credit Card Payment	d Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 32/70 Rpt: 57/96	2 FILER NAME Prestage, Grady 3 Filer ID
1	Date	
ľ	12/09/2024	5 Payee name Fountain of Praise
6	Amount (\$) \$100.00	7 Payee address; City; State; Zip Code 13950 Hillcroft Houston , TX 77085
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event sponsorship
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
	Date	Payee name
	12/19/2024	Fresh Arts
	Amount (\$) \$2,582.74	Payee address; City; State; Zip Code PO Box 66494 Houston, TX 77266
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Underwrite Arts programs
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/02/2024	Garza, Esperanza
	Amount (\$) \$150.00	Payee address; City; State; Zip Code 100 Louisiana Microsvi City TV 77490
		Missouri City, TX 77489
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event assistance
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Loan Repayment/Reimbursement
Fees Office Overhead/Rental Expense
Food/Beverage Expense Polling Expense
Gitt/Awards/Memorials Expense
Frinting Expense
Selent/Memori/Contract Lobor

Candidate/Officeholder/Politic Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID
Sch: 33/70 Rpt: 58/96	Prestage, Grady
4 Date	5 Payee name
12/12/2024	HEB #110
6 Amount (\$) \$201.04	7 Payee address; City; State; Zip Code 8900 Highway 6 South Missouri City, TX 77459
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event supplies
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date	Payee name
12/10/2024	Hilliard, Conetta
Amount (\$) \$110.00	Payee address; City; State; Zip Code 100 Louisiana Missouri City, TX 77489
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event assistance
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date 12/23/2024	Payee name Hiram, Smith
Amount (\$) \$59,715.00	Payee address; City; State; Zip Code 4530 Brazos Bend Drive Missouri City, TX 77459
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event Planning services
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donati

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Food/Beverage Expense Gift/Awards/Memorials Expe

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services The Instruction Guide expla		ges/Contract Labor		OTHER (enter a category	not listed above)
1	Total pages Schedule F1:	2 FILER NA	ME			3	Filer ID	
L	Sch: 34/70 Rpt: 59/96	Prestage	e, Grady					
4	Date	5 Payee na	me					
	10/17/2024	Irma's						
6	Amount (\$)	7 Payee ad	dress; City; Si	tate; Zip Cod	е			
	\$129.26	22 N Ch	enevert Street					
L		Houston	, TX 77002					
8	PURPOSE	(a) Category	(See Categories listed at the top of this	s schedule)	Description			
	OF EXPENDITURE	Food/Be	verage Expense				de of Texas. Complete Scho	edule T.
							officeholder living expense	
					weeting w	iui Asi	ros Foundation	
L		<u> </u>						
9	Complete ONLY if direct expenditure to benefit C/OI		Officeholder name	Office sough	nt		Office held	
Г	Date	Payee na	me					
	12/05/2024	J&J Pacl	king Company					
H	Amount (\$)	Payee ad	dress; City; St	ate; Zip Code	9			
ı	\$206.07		ighway 90					
	Ψ200.01	0000211	ignivay 50					
		Brookshi	re, TX 77423					
	PURPOSE	(a) Category	(See Categories listed at the top of this	s schedule)	Description			
	OF EXPENDITURE	Event Ex	pense				de of Texas. Complete Sche	edule T.
	EXI ENDITORE						officeholder living expense	
					Event sup	plies		
					.,			
	Complete ONLY if direct expenditure to benefit C/O		Officeholder name	Office sough	nt		Office held	
	oxperialitate to periolit ever							
	Date	Payee na	me					
	11/05/2024	JW Marr	iott New Orleans					
	Amount (\$)	Payee ad	dress; City; St	ate; Zip Code	9			
	\$857.80	614 Can	al Street					
		New Orle	eans, LA 70130					
	PURPOSE	(a) Category	(See Categories listed at the top of this	s schedule)	Description			
	OF EXPENDITURE	Travel O	ut of District	1			de of Texas. Complete Scho	edule T.
	LAFEINDITORE			1			officeholder living expense	Causus Mostins
l					Attend Lot	usiana	Legislative Black	Caucus Meeting
_		0 "11 : :	Off b - ld	050			Office held	
	Complete ONLY if direct expenditure to benefit C/OI		Officeholder name	Office sough	IL		Office field	
L	experience to benefit 6/01	•						

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees
Food/Beverage Expense
Gift/Awards/Memorials Ex

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID	
L	Sch: 35/70 Rpt: 60/96	Prestage, Grady	
4	Date	5 Payee name	
	12/03/2024	JW Marriott New Orleans	
6	Amount (\$) \$391.81	7 Payee address; City; State; Zip Code 614 Canal Street New Orleans, LA 70130	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Attend Louisiana Legislative Black Caucus Meeting)
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	12/23/2024	JaPaula Kemp Campaign	
	Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 3418 Aldridge Drive Missouri City, TX 77459	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	10/22/2024	JaPaula Kemp Campaign	
	Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 3418 Aldridge Drive Missouri City, TX 77459	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee
Credit Card Beyman!

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 36/70 Rpt: 61/96	Prestage, Grady
4	Date	5 Payee name
	12/09/2024	Jammer, Carlessia
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$150.00	1618 Dusty Ridge
		Missouri City, TX 77459
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	M/11 M11011 C	Check if Austin, TX, officeholder living expense
		Event assistance
_		
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
	Date	Payee name
	08/07/2024	Jeffrey Boney Campaign
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	3034Roberta Sue
	ΨΔ,000,00	3034Roberta dae
		Missouri City, TX 77459
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Donation
		Donaton
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	•	
	Date	Payee name
	12/11/2024	Johnson, Darilyn
	Amount (\$)	Payee address; City; State; Zip Code
	\$400.00	PO Box 19695
		Sugar Land, TX 77496
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Kwaanza Event Food expenses
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	А
	····	

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gitt/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wanes/Contract Labor

	The Instruction Guide explains how to complete this form.
L Total pages Schedule F1:	2 FILER NAME 3 Filer ID
Sch: 37/70 Rpt: 62/96	Prestage, Grady
Date	5 Payee name
08/15/2024	Kamala Harris Campaign
\$ Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code PO Box 96663 Washington, DC 20077
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date	Payee name
09/19/2024	Keisha Smith Campaign
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 9315 Hodges Bend Drive Houston, TX 77083
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/22/2024	Keisha Smith Campaign
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 9315 Hodges Bend Drive
	Houston, TX 77083
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politice Credit Card Payment	al Committee Legal Services Salaries The Instruction Guide explains how to c	s/Wages/Contract Labor OTHER (enter a category not listed above) complete this form.
. Total pages Schedule F1:	2 FILER NAME	3 Filer ID
Sch: 38/70 Rpt: 63/96	Prestage, Grady	
Date	5 Payee name	•
08/15/2024	Kroger	
Amount (\$) \$121.12	7 Payee address; City; State; Zip C 18861 University Sugar Land, TX 77479	:ode
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Supplies
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office so	ought Office held
Date	Payee name	
07/05/2024	Kulture	
Amount (\$) \$182.69	Payee address; City; State; Zip C 701 Avenida de las Americas Houston, TX 77010	ode
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Meeting with Scholarship recipients
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office so	ought Office held
Date	Payee name	
08/19/2024	Late August	
Amount (\$) \$133.66	Payee address; City; State; Zip C 4201 Main Street	ode
	Houston, TX 77002	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Meeting with School Trustee
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office soil	ought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1: Sch: 39/70 Rpt: 64/96	2 FILER NAME Prestage, Grady 3 Filer ID
4	Date 10/18/2024	5 Payee name Lewis, Maurice
6	Amount (\$) \$100.00	7 Payee address; City; State; Zip Code 9614 Brannok Ln Tomball, TX 77375
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Reimbursement for tickets
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H
	Date 11/08/2024	Payee name Lewis, Maurice
	Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 9614 Brannok Ln Tomball, TX 77375
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Technology services
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
	Date 10/23/2024	Payee name Live Oak Grill
	Amount (\$) \$131.86	Payee address; City; State; Zip Code 12935 Dairy Ashford Road Sugar Land, TX 77478
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Staff meeting
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H

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 Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	y - Gift/Awards/Memorials Expense Printing Expense Travel Out of District al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 40/70 Rpt: 65/96	2 FILER NAME 3 Filer ID Prestage, Grady
	Date 10/22/2024	5 Payee name Lizzie Fletcher Campaign
6	Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 3700 Buffalo Speedway Houston, TX 77098
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 08/05/2024	Payee name Loretta Smith Campaign
	Amount (\$) \$250.00	Payee address; City; State; Zip Code 3321SE 20th Avenue Portland, OR 97202
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Donation
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 10/01/2024	Payee name M.A.D.E.
	Amount (\$) \$250.00	Payee address; City; State; Zip Code PO Box 1063 Fresno, TX 77545
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID	
	Sch: 41/70 Rpt: 66/96	Prestage, Grady	
4	Date	5 Payee name	•
	10/08/2024	M3 Graphics	
6	Amount (\$) \$210.73	7 Payee address; City; State; Zip Code 11730 S Wilcrest Drive Houston, TX 77099	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign posters	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	7
	10/17/2024	M3 Graphics	
	Amount (\$) \$1,117.14	Payee address; City; State; Zip Code 11730 S Wilcrest Drive Houston, TX 77099	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Signs	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	09/18/2024	Marquette Greene-Scott Campaign	
	Amount (\$) \$1,000.00	Payee address; City; State; Zip Code POBox 734 Rosharon, TX 77583	
_	PURPOSE		-
	OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Donation	
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
L	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
_	Sch: 42/70 Rpt: 67/96	Prestage, Grady
	Date	5 Payee name
_	10/22/2024	Marquette Greene-Scott Campaign
1,	Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code POBox 734 Rosharon, TX 77583
3	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation
,	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
-	Date	Payee name
	10/30/2024	Marquette Greene-Scott Campaign
	Amount (\$) \$1,000.00	Payee address; City; State; Zip Code POBox 734 Rosharon, TX 77583
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held H
_	Date	Payee name
	09/19/2024	McCree, Rynette
	Amount (\$) \$250.00	Payee address; City; State; Zip Code 7710 Main Street #1614 Houston, TX 77030
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Constituent assistance
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 43/70 Rpt: 68/96	Prestage, Grady
4	Date	5 Payee name
	12/13/2024	Micheaux, George
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$25,000.00	6850 Highway 6
		Missouri City, TX 77459
3	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Catering services
•	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
_	Date	Payee name
	12/30/2024	Micheaux, George
	Amount (\$)	Payee address; City; State; Zip Code
	\$25,000.00	6850 Highway 6
		Missouri City, TX 77459
_	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Catering services
	Complete <u>QNLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/28/2024	MoneyDolly
	Amount (\$)	Payee address; City; State; Zip Code
	\$106.00	2814 Brooks Street
		Suite232
		Missoula, MT 59801
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	LAI LIBITORE	Candidate/Officeholder/Political Committee
		Donation to Landy one way
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_		

SCHEDULE F1

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1: Sch: 44/70 Rpt: 69/96	2 FILER NAME Prestage, Grady 3 Filer ID	
4	Date	5 Payee name	_
	10/17/2024	Morales, Maria	
6	Amount (\$) \$200.00	7 Payee address; City; State; Zip Code 5015 Ridge Manor Houston , TX 77053	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office Assistance	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	Date 11/07/2024	Payee name Morales, Maria	
	Amount (\$) \$300.00	Payee address; City; State; Zip Code 5015 Ridge Manor Houston , TX 77053	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Office assistance	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	_
	Date	Payee name	=
	11/05/2024	NFBPA - Houston	
_	Amount (\$)	Payee address; City; State; Zip Code	-
	\$1,500.00	PO Box 301092	
		Houston, TX 77230	_
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event Sponsorship	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
			-

SCHEDULE F1

		EXPENDITURE CATEGORIES FOR BOX 8(a)
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
L	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 45/70 Rpt: 70/96	Prestage, Grady
•	Date 09/23/2024	5 Payee name Nabil Shike Campaign
_		
ì	Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 20210 Weeping Pine Walk Richmond, TX 77407
-	PURPOSE	
	OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/25/2024	National Women of Achievment
-	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	PO Box 17162
		Sugar Land, TX 77479
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event sponsorship
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/16/2024	Nyofu, Mshinda
	Amount (\$) \$100.00	Payee address; City; State; Zip Code PO Box 19695
		Sugar Land, TX 77496
_	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Event Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Kwanza Event expenses
_		Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Printing Expense Salaries/Wages/Contract Labor Travel Out of District
OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: FILER NAME 3 Filer ID Sch: 46/70 Rpt: 71/96 Prestage, Grady Date Payee name 12/20/2024 Orion the Band Amount (\$) Payee address; City; State; Zip Code \$3,000.00 3937 Yellowstone Houston, TX 77021 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense Live Band for Event Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 08/26/2024 **Pappadeaux** Amount (\$) Payee address; City; State; Zip Code \$120.46 12711 Southwest Freeway Stafford, TX 77477 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Staff Meeting Complete ONLY if direct Candidate/Officeholder name Office held Office sought expenditure to benefit C/OH Date Payee name 11/21/2024 **Pappas** Payee address; State; Zip Code Amount (\$) City; \$300.00 13939 US 290 Frontage Road Houston, TX 77040 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Gift/Awards/Memorials Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense **Graduation Gift Cards** Candidate/Officeholder name Office held Complete ONLY if direct Office sought expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Loan Repayment/Reimbursement
Fees Office Overhead/Rental Expense
Food/Beverage Expense Polling Expense
Gift/Awards/Memorials Expense
Printing Expense

Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	
Sch: 47/70 Rpt: 72/96	Prestage, Grady
4 Date	5 Payee name
09/19/2024	Patrick Quincy Campaign
6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 5614 W Grand Parkway S Suite 102 Richmond, TX 77406
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office nero H
Date	Payee name
10/22/2024	Patrick Quincy Campaign
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 5614 W Grand Parkway S Suite 102 Richmond, TX 77406
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
Date	Payee name
07/01/2024	Patton, Brenda
Amount (\$) \$500.00	Payee address; City; State; Zip Code 1618 Dusty Ridge Missouri City, TX 77459
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense 500
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political C

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense
Fees
Food/Beverage Expense
Git/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1: Sch: 48/70 Rpt: 73/96	2 FILER NAME Prestage, Grady 3 Filer ID
4 Date 07/16/2024	5 Payee name Patton, Brenda
6 Amount (\$) \$3,000.00	7 Payee address; City; State; Zip Code 1618 Dusty Ridge Missouri City, TX 77459
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign assistance
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oi	Candidate/Officeholder name Office sought Office held
Date 07/17/2024	Payee name Patton, Brenda
Amount (\$) \$2,000.00	Payee address; City; State; Zip Code 1618 Dusty Ridge Missouri City, TX 77459
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Assistance
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date 11/26/2024	Payee name Patton, Brenda
Amount (\$) \$400.00	Payee address; City; State; Zip Code 1618 Dusty Ridge
	Missouri City, TX 77459
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fundraising assistance
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Contributions/ Donations Made E Candidate/Officeholder/Politic Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID
Sch: 49/70 Rpt: 74/96	Prestage, Grady
4 Date	5 Payee name
12/04/2024	Patton, Brenda
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$175.00	1618 Dusty Ridge
	Missouri City, TX 77459
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Loan Repayment/Reimbursement
LAFENDITORE	Check if Austin, TX, officeholder living expense
	Reimbursement for out of pocket expense for even
9 Complete ONLY if direct	Condidate/Officeholder roses Office could
expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date	Payee name
12/09/2024	Patton, Brenda
Amount (\$)	Payee address; City; State; Zip Code
\$245.91	1618 Dusty Ridge
	Missouri City, TX 77459
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Loan Repayment/Reimbursement
	Check if Austin, TX, officeholder living expense Reimbursement for out-of-pocket expenses during
	event event
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
12/20/2024	Patton, Brenda
Amount (\$)	Payee address; City; State; Zip Code
\$400.00	1618 Dusty Ridge
	Missouri City, TX 77459
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Fundraising services
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Candidate/Officeholder/Politic Credit Card Payment	Al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID
Sch: 50/70 Rpt: 75/96	Prestage, Grady
4 Date	5 Payee name
10/16/2024	Pluckers Wings
6 Amount (\$) \$142.68	7 Payee address; City; State; Zip Code 12469 Southwest Freeway Stafford, TX 77545
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Staff Meeting
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/16/2024	Pollo Compero
Amount (\$) \$132.07	Payee address; City; State; Zip Code 7754 W Bellfort Avenue Houston, TX 77071
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Catering
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date 07/05/2024	Payee name Prestage, Dustin
Amount (\$) \$1,250.00	Payee address; City; State; Zip Code 458 E. 25th ST Unit 403 Brooklyn , NY 11210
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense campaign consulting
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Candidate/Officeholder/Politic Credit Card Payment	y - Girl/Awards/Memonals Expense Printing Expense Travel Out of District al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.					
1 Total pages Schedule F1:						
Sch: 51/70 Rpt: 76/96	Prestage, Grady					
4 Date	5 Payee name					
07/12/2024	Prestage, Dustin					
6 Amount (\$) \$1,250.00	7 Payee address; City; State; Zip Code 458 E. 25th ST Unit 403 Brooklyn , NY 11210					
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Mamagement					
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held					
Date	Payee name					
07/29/2024	Prestage, Dustin					
Amount (\$)	Payee address; City; State; Zip Code					
\$1,250.00	458 E. 25th ST					
	Unit 403					
	Brooklyn , NY 11210					
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description					
EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.					
	Check if Austin, TX, officeholder living expense Campaign Management					
	Campaign Management					
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held					
Date	Payee name					
09/03/2024	Prestage, Dustin					
Amount (\$)	Payee address; City; State; Zip Code					
\$1,250.00	458 E. 25th ST					
	Unit 403					
	Brooklyn , NY 11210					
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.					
EXPERIENCE	Check if Austin, TX, officeholder living expense					
	Campaign Management					
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held					

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees
Food/Beverage Expense
Gift/Awards/Memorials Ex

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politice Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID
Sch: 52/70 Rpt: 77/96	Prestage, Grady
4 Date	5 Payee name
09/27/2024	Prestage, Dustin
6 Amount (\$) \$1,250.00	7 Payee address; City; State; Zip Code 458 E. 25th ST Unit 403
	Brooklyn , NY 11210
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Management
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/16/2024	Prestage, Dustin
Amount (\$) \$1,250.00	Payee address; City; State; Zip Code 458 E. 25th ST Unit 403 Brooklyn , NY 11210
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Management
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
Date 11/25/2024	Payee name Prestage, Dustin
Amount (\$) \$1,250.00	Payee address; City; State; Zip Code 458 E. 25th ST Unit 403 Brooklyn , NY 11210
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Management
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	By - al Cor	mittee Legal Sen	s/Memorials Expense rices ruction Guide explains l		ages	s/Contract Labor	Travel Out of District OTHER (enter a category not listed about	ove)
1	Total pages Schedule F1: Sch: 53/70 Rpt: 78/96	2	FILER NAME Prestage, Grady				3	Filer ID	
4	Date 12/23/2024	5	Payee name Prestage, Dustin						
6	Amount (\$) \$290.05		Payee address; 0 458 E. 25th ST Jnit 403 Brooklyn , NY 1121		Zip Cod	le			
8	PURPOSE OF EXPENDITURE		Category (See Categori Loan Repayment/R	es listed at the top of this sche reimbursement	edule) ((b)	Check if Austin, TX	side of Texas. Complete Schedule T. K, officeholder living expense t for event related out-of-poo	cket
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol		andidate/Officeholder	name O	Office soug	ht		Office held	
	Date 12/09/2024 Amount (\$) \$375.00		Payee name Prestage-Washingt Payee address; C145 77th Avenue		Zip Cod	е			
			Baton Rouge, LA 7	0807					
	PURPOSE OF EXPENDITURE		Category (See Categoric Can Repayment/R	es listed at the top of this sche eimbursement	edule) (Check if Austin, TX	side of Texas, Complete Schedule T. (, officeholder living expense t for campaign related exper	nses
	Complete ONLY if direct expenditure to benefit C/O		andidate/Officeholder	name O	office sough	ht		Office held	
	Date 10/17/2024 Amount (\$) \$1,941.00		Payee name Progressive Insurar Payee address; C 2338 Texas Parkwa	city; State;	Zip Cod	е	,		
	DUDDOCE	-	Missouri City, TX 7		10	h)	Description		
	PURPOSE OF EXPENDITURE			es listed at the top of this sche ipment And Related				ide of Texas. Complete Schedule T. ., officeholder living expense CC	
	Complete ONLY if direct expenditure to benefit C/O	_	undidate/Officeholder	name O	office sough	ht		Office held	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Committee

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense
Travel in District

Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 54/70 Rpt: 79/96 Prestage, Grady 4 Date Payee name 11/12/2024 **Public Storage** Amount (\$) Payee address; City; State: Zip Code \$187.80 11935 Highway 6 Fresno, TX 77545 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Temporary storage Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/10/2024 Reed, Morgan Amount (\$) Payee address; City; State; Zip Code \$120.00 100 Louisiana Missouri City, TX 77459 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Event assistance Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 10/31/2024 Resonance Campaigns Payee address; City; State; Zip Code Amount (\$) \$12,021.73 913 Florida Avenue Washington, DC 20001 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Donation Office sought Office held Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political C

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID
Sch: 55/70 Rpt: 80/96	Prestage, Grady
4 Date	5 Payee name
12/30/2024	Restaurant Depot
6 Amount (\$) \$194.43	7 Payee address; City; State; Zip Code 11290 Bissonnet Houston , TX 77099
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event supplies
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
09/13/2024	Riverbend Country Club
Amount (\$) \$500.00	Payee address; City; State; Zip Code 1214 Dulles Avenue Sugar Land, TX 77478
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Constituent Funeral expense
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/25/2024	Roaring Fork
Amount (\$) \$175.06	Payee address; City; State; Zip Code 701 Congress
	Austin, TX 78701
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Meals for Staff during Conference
Complete ONLY if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense
Travel in District Travel Out of District

Legal Services OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 56/70 Rpt: 81/96 Prestage, Grady Date Payee name 09/19/2024 Ron Reynolds Camapign Amount (\$) Payee address: City; State; Zip Code \$1,000.00 6140 Highway 6 South #233 Missouri City, TX 77459 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Donation Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 07/26/2024 Rouxpour Amount (\$) Payee address; City; State; Zip Code \$142.88 2298 Texas Drive Sugar Land, TX 77479 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Meeting with Elected official Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 07/16/2024 Saaiba, Birklett Payee address; City; State; Zip Code Amount (\$) \$240,00 3439 Wichita Street Houston, TX 77004 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Clerical assistance Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense
Travel in District

Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 57/70 Rpt: 82/96 Prestage, Grady Date Payee name 12/30/2024 Sams Club Amount (\$) Payee address; City; State; Zip Code \$138.75 12300 Southwest Freeway Stafford, TX 77477 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense **Event supplies** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/23/2024 Santa Cruz, Dwayne Amount (\$) Payee address; City: State; Zip Code \$1,500.00 PO Box 651 Katy, TX 77492 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas, Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense Disc Jockey service Complete ONLY if direct Office held Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Pavee name 10/02/2024 See You at the Polls Payee address; State; Zip Code Amount (\$) City; \$1,000.00 3311 Raleigh Row Missouri City, TX 77459 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Election workers expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense
Travel in District Travel Out of District

Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 58/70 Rpt: 83/96 Prestage, Grady Date Payee name 12/16/2024 See You at the Polls Amount (\$) Payee address; City; State; Zip Code \$150.00 3311 Raleigh Row Missouri City, TX 77459 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense Toy Giveaway sponsor Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 09/12/2024 **Shad Bogany Campaign** Amount (\$) Payee address; City; State; Zip Code \$520.87 2727 Creek Terrace Missouri City, TX 77459 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Donation Complete ONLY if direct Candidate/Officeholder name Office held Office sought expenditure to benefit C/OH Date Payee name 10/22/2024 **Shad Bogany Campaign** Payee address; Amount (\$) City; State; Zip Code \$1,000.00 2727 Creek Terrace Missouri City, TX 77459 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Donation Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Committee

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Travel Out of District

Transportation Equipment & Related Expense
Travel in District Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 59/70 Rpt: 84/96 Prestage, Grady Date Payee name 12/03/2024 Sharon Weston Broome Campaign Amount (\$) Payee address; City; State; Zip Code \$1,000.00 5522 Government Street Baton Rouge, LA 70802 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Donation Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 08/12/2024 Southern University System Foundation Amount (\$) Payee address; City; State; Zip Code \$2,084.40 598 Harding Blvd Baton Rouge, LA 70807 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Scholarship Contribution Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/31/2024 Southern University System Foundation Payee address; State; Zip Code Amount (\$) City; \$2,000.00 598 Harding Blvd Baton Rouge, LA 70807 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Gift/Awards/Memorials Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Scholarship donation Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment Total pages Schedule F1: Sch: 60/70 Rpt: 85/96

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Food/Beverage Expense Gift/Awards/Memorials Expense Printing Expense
Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID Prestage, Grady Date Payee name 12/09/2024 Spencer, Solomon Amount (\$) Payee address: City; State; Zip Code \$350.00 3819 Kiamesha Missouri City, TX 77459 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense Disc jockey services Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 09/30/2024 St Jude Children's Research Hospital Payee address; Amount (\$) City; State; Zip Code \$100.00 5847 San Felipe Houston, TX 77057 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Donation Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 09/09/2024 Suleman Lalani Campaign Amount (\$) Payee address; City: State; Zip Code \$1,000.00 12550 Emily Court Sugar Land, TX 77478 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Donation Office sought Complete ONLY if direct Candidate/Officeholder name Office held expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Travel Out of District

Transportation Equipment & Related Expense
Travel in District Gift/Awards/Memorials Expense Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 61/70 Rpt: 86/96 Prestage, Grady Date Payee name 10/22/2024 Suleman Lalani Campaign Amount (\$) Payee address; City; State; Zip Code \$1,000.00 12550 Emily Court Sugar Land, TX 77478 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Donation Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 08/15/2024 Super Cleaners Amount (\$) Payee address; State; Zip Code City; \$654.12 3003 Texas Parkway Missouri City, TX 77489 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense Linen service Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 11/20/2024 T Shirt Concepts Amount (\$) Pavee address: City: State: Zip Code \$549.00 3815 Live Oak Houston, TX 77004 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Staff Uniforms **EXPENDITURE** Check if Austin, TX, officeholder living expense Staff Uniforms Office held Office sought Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Candidate/Officeholder/Politic Credit Card Payment	
1	Total pages Schedule F1: Sch: 62/70 Rpt: 87/96	
4	Date 07/10/2024	5 Payee name T-Mobile
6	Amount (\$) \$371.88	7 Payee address; City; State; Zip Code 5684 Highway 6 Missouri City, TX 77459
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Phone expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 07/22/2024 Amount (\$) \$114.55	Payee name T-Mobile Payee address; City; State; Zip Code 5684 Highway 6
	PURPOSE OF EXPENDITURE	Missouri City, TX 77459 (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Phone expense
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
	Date 08/12/2024	Payee name T-Mobile
	Amount (\$) \$319.54	Payee address; City; State; Zip Code 5684 Highway 6 Missouri City, TX 77459
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Phone and internet expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

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	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	A Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 63/70 Rpt: 88/96	Prestage, Grady
4	Date 08/20/2024	5 Payee name T-Mobile
6	Amount (\$) \$114.55	7 Payee address; City; State; Zip Code 5684 Highway 6 Missouri City, TX 77459
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Phone and internet expense
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	09/10/2024	T-Mobile
	Amount (\$) \$319.54	Payee address; City; State; Zip Code 5684 Highway 6 Missouri City, TX 77459
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Phone and Internet expense
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	09/20/2024	T-Mobile
	Amount (\$) \$114.55	Payee address; City; State; Zip Code 5684 Highway 6 Missouri City, TX 77459
_	PURPOSE	
	OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Phone expense
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

		EXPENDITURE CATEGORIES FOR BOX 8(a)				
Acc Co Co	vertising Expense counting/Banking nsulting Expense ntributions/ Donations Made B Candidate/Officeholder/Politica dit Card Payment					
1 Total	al pages Cabadula E1.	·				
	al pages Schedule F1: n: 64/70 Rpt: 89/96	2 FILER NAME 3 Filer ID Prestage, Grady				
4 Date 10/:	e 11/2024	5 Payee name T-Mobile				
6 Ame	ount (\$) \$207.54	7 Payee address; City; State; Zip Code 7.54 Missouri City, TX 77459				
	PURPOSE OF PENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Phone and Internet expense				
	nplete <u>ONLY</u> if direct enditure to benefit C/O	Candidate/Officeholder name Office sought Office held				
Date	9	Payee name				
10/2	21/2024	T-Mobile				
Amo	sunt (\$) \$175.18	Payee address; City; State; Zip Code 5684 Highway 6 Missouri City, TX 77459				
	PURPOSE OF PENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Phone and Internet expense				
	nplete <u>ONLY</u> if direct enditure to benefit C/OI	Candidate/Officeholder name Office sought Office held				
Date 11/1	e 12/2024	Payee name T-Mobile				
Amo	sunt (\$) \$263.54	Payee address; City; State; Zip Code 5684 Highway 6 Missouri City, TX 77459				
	PURPOSE OF PENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Phone and Internet expense				
	nplete <u>ONLY</u> if direct enditure to benefit C/O	Candidate/Officeholder name Office sought Office held				
	provided by Toyas F	thics Commission Warrion Washes state ty us Version W 1.0 5dd2ace				

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	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politics Credit Card Payment	EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains how to complete this form.		ent/Reimbursement ad/Rental Expense se ise es/Contract Labor	Transportation Travel in Distric Travel Out of D	
1	Total pages Schedule F1:	2 FILER NAME			3 Filer ID	
	Sch: 65/70 Rpt: 90/96	Prestage, Grady				
4		5 Pavee name				
7	11/20/2024	T-Mobile				
_						
6	Amount (\$) \$151.61	7 Payee address; City; Stat 5684 Highway 6	e; Zip Code			
		Missouri City, TX 77459				
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this s Office Overhead/Rental Expense	chedule) (b)		outside of Texas. Con TX, officeholder livin ternet Expens	g expense
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name	Office sought		Office h	eld
	Date	Payee name				
	12/10/2024	T-Mobile				
	Amount (\$) \$281.79	Payee address; City; Stat 5684 Highway 6 Missouri City, TX 77459	e; Zip Code			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this so Office Overhead/Rental Expense	chedule) (b)		utside of Texas. Con TX, officeholder livin ternet expense	g expense
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name	Office sought		Office h	eld
	Date	Payee name				
	12/20/2024	T-Mobile				
	Amount (\$) \$151.61	Payee address; City; Stat 5684 Highway 6	e; Zip Code			
		Missouri City, TX 77459				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this so Office Overhead/Rental Expense	chedule) (b)		utside of Texas. Con TX, officeholder livin ternet expense	g expense
	Complete ONLY if direct expenditure to benefit C/Ol-	Candidate/Officeholder name	Office sought		Office h	eld

	Advantining "	EXPENDITURE CATEGORIES FOR BOX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District			
	Contributions/ Donations Made By Candidate/Officeholder/Politica	y - Gift/Awards/Memorials Expense Printing Expense Travel Out of District			
	Credit Card Payment	The Instruction Guide explains how to complete this form.			
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID			
	Sch: 66/70 Rpt: 91/96	Prestage, Grady			
4	Date	5 Payee name			
	08/19/2024	Take 5 #238			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$122.66	9626 Highway 6			
		Missouri City, TX 77459			
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T. Expense Check if Austin, TX, officeholder living expense			
		Expense Check if Austin, TX, officeholder living expense Service			
	•	55.1.35			
9		Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/OI	1			
	Date	Payee name			
	09/19/2024	Tameika Carter Campaign			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$1,000.00	7322Southwest Freeway			
		Suite 1010			
		Missouri City, TX 77459			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.			
		Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Conation			
		Bondion			
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held			
	Date	Davisa nama			
	10/22/2024	Payee name Tameika Carter Campaign			
-	Amount (\$)	Payee address; City; State; Zip Code			
	\$1,000.00	7322Southwest Freeway			
	Ψ1,000.00	Suite 1010			
		Missouri City, TX 77459			
		The state of the s			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Contributions (Donations Made By Contributions (Donations Made By			
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee			
		Donation			
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held			
	experiulture to betterit C/Or				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Advertising Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Accounting/Banking Polling Expense
Printing Expense
Salaries/Wages/Contract Labor Consulting Expense Contributions/ Donations Made By -Food/Beverage Expense Gift/Awards/Memorials Expense Travel in District Travel Out of District Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 67/70 Rpt: 92/96 Prestage, Grady Date Payee name 12/29/2024 Tameika Carter Campaign Payee address; Amount (\$) City; State; Zip Code \$1,000.00 7322Southwest Freeway **Suite 1010** Missouri City, TX 77459 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Donation Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/09/2024 Teague, Matthew Amount (\$) Payee address; City; State; Zip Code \$350.00 14306 Darrah Houston, TX 77090 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense Catering Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 12/23/2024 Teague, Matthew State; Zip Code Amount (\$) Payee address; City; \$3,775.00 14306 Darrah Houston, TX 77090 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T.

EXPENDITURE

Complete ONLY if direct

expenditure to benefit C/OH

Event Expense

Candidate/Officeholder name

Office sought

Check if Austin, TX, officeholder living expense

Office held

Catering services

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	d Committee	Gift/Awards/Memorials Expense Legal Services The Instruction Guide expl	se s/Contract Labor ete this form.	Travel Out of District OTHER (enter a category not listed above)			
-	Total sansa Cabadula Ed.							
ľ	Total pages Schedule F1: Sch: 68/70 Rpt: 93/96	2 FILER NAME Prestage, G	rady			3	Filer ID	
4	Date	5 Payee name	· · · · · · · · · · · · · · · · · · ·					
	09/03/2024	Tealer, Gwe	ndolyn					
6	Amount (\$) \$200.00	7 Payee addres 8700 S Mair Houston, TX		State; Zip Co	ode			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF	Event Exper		iis scriedule)	``		side of Texas. Complete Schedule T.	
	EXPENDITURE	Event Exper					X, officeholder living expense	
						Event Sponsor		
						Zvorit oporitori	5p	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Offic H	eholder name	Office sou	ght		Office held	
Г	Date	Payee name						
	12/13/2024	Valasquez, M	Martha					
	Amount (\$)	Payee address; City; State; Zip Code						
\$250.00 6026 Ludington Drive								
		Houston, TX 77035						
	PURPOSE OF		Categories listed at the top of th	is schedule)	(b)	Description		
	EXPENDITURE	Salaries/Wages/Contract Labor					side of Texas. Complete Schedule T.	
EXI ENDITORE						_	K, officeholder living expense	
Event assistance				ce				
		L - 73.0		42.57				
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Offic	eholder name	Office sou	ght		Office held	
_	Date	Payee name						
	12/05/2024		arcenter					
		Walmart Supercenter						
	Amount (\$)	s; City; S	tate; Zip Co	de				
\$266.19 5501 Highway 6								
Missouri City, TX 77459								
		MISSOUTI City	, 17 77459					
	PURPOSE	(a) Category (See	Categories listed at the top of th	is schedule)	(b)	Description		
	OF	Event Expen	se				side of Texas. Complete Schedule T.	
	EXPENDITURE			1 4		lumani .	X, officeholder living expense	
						Event supplies		
		1						
\vdash	Complete ONLY if direct	Candidate/Offic	eholder name	Office sou	aht		Office held	
	expenditure to benefit C/O		CHOIGGI HUING	O.11100 300	3.11			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Event Expense

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
Total pages Schedule F1:	2 FILER NAME 3 Filer ID
Sch: 69/70 Rpt: 94/96	Prestage, Grady
Date	5 Payee name
12/09/2024	Washington , John
Amount (\$) \$400.00	7 Payee address; City; State; Zip Code 5515 Condon Lane Houston, TX 77053
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Photography services
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date	Payee name
12/23/2024	Washington , John
Amount (\$) \$750.00	Payee address; City; State; Zip Code 5515 Condon Lane Houston, TX 77053
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Photography services
Complete ONLY if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held OH
Date 11/29/2024	Payee name Webstaurant Store
Amount (\$) \$189.42	
PURPOSE OF EXPENDITURE	Lititz, PA 17543 (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event supplies
	Office sought Office held

SCHEDULE F1

	EXPENDITURE CATEGORIES FOR BOX				
dvertising Expense	Event Expense	Loan Repayment/Re			
ccounting/Banking	Fees	Office Overhead/De			

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

IES FOR BOX 8(a)

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

Amount (\$) PURPOSE OF EXPENDITURE 7 Payee address; City; State; Zip Code 9927 South Court Drive Houston, TX 77099 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event assistance
Date 12/10/2024
Amount (\$)
Amount (\$) 7 Payee address; City; State; Zip Code \$600.00 9927 South Court Drive Houston, TX 77099 PURPOSE OF EXPENDITURE Candidate/Officeholder name Complete ONLY if direct expenditure to benefit C/OH Date 12/09/2024 Amount (\$) Payee address; City; State; Zip Code Payee name Wright, Ursula Payee address; City; State; Zip Code \$120.00 \$120.00 \$14 Summer Mist Ln Rosenberg, TX 77469 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) State; Zip Code State; Zip Code (b) Description Office held
Second ## Sec
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event assistance Complete ONLY if direct expenditure to benefit C/OH Date 12/09/2024 Payee name Wright, Ursula Amount (\$) Payee address; City; State; Zip Code \$120.00 \$120.00 PURPOSE OF OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder Itving expense
Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Date 12/09/2024 Payee name Wright, Ursula Amount (\$) Payee address; City; State; Zip Code \$120.00 \$120.00 Purpose OF EXPENDITURE Payee name Wright, Ursula Payee address; City; State; Zip Code State; Zip Code (b) Description Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense
Amount (\$) Payee address; City; State; Zip Code \$120.00 \$120.00 State; Zip Code (a) Category, TX 77469 (b) Description Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense
Amount (\$) Payee address; City; State; Zip Code \$120.00 Payee address; City; State; Zip Code S14 Summer Mist Ln Rosenberg, TX 77469 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense
\$120.00 514 Summer Mist Ln Rosenberg, TX 77469 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense
OF EXPENDITURE (a) Category (see Categories listed at the top of this substance) Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

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

SCHEDULE T

	The Instruction Guide explains how to complete this form.					form.	1 Total pages Schedule T: Sch: 1/1 Rpt: 96/96			
2	FILER NAME						3 Filer ID			
	Prestage, Grady	restage, Grady								
4	Name of Contribut	or / Corpora	ation or Labor Orga	anization / Pledgor /Paye	ee					
	JW Marriott New Orleans									
5	Contribution / Expenditure reported on:									
	Schedule A2 Schedule B Schedule B(J) Schedule C2 Schedule D						Schedule D	X Schedule F1		
	Schedule F2 Schedule F4 Schedule G Schedule H Schedule H						Schedule COH-UC			
6	Dates of Travel 7 Name of person(s) traveling									
	Prestage, James Grady									
		8 Departi	ure city or name of	departure location			-			
	11/29/2024		uri City	•						
				of destination location						
	11/29/2024		Orleans							
10	Means of transpor			vel (including name of c	onfere	ence, seminar, o	r othe	r event)		
10	Private Automob		1	iana Legislative Black			4.110			
_										
	JW Marriott New		auon or Labor Orga	anization / Pledgor /Paye	ee					
_			norted on:							
	Contribution / Expo			Cohodula P/T		Schedule C2		Schedule D	X Schedule F1	
	Schedule A2		Schedule B	Schedule B(J)				Schedule COH-UC		
	Schedule F2	;	Schedule F4	Schedule G	L	Schedule H		L Scriedule CON-OC		
	Dates of Travel Name of person(s) traveling									
			age, James Grad							
	Departure city or name of departure location Missouri City Destination city or name of destination location New Orleans Means of transportation Purpose of travel (including name of conference, seminar, or other event)									
H										
Private Automobile Attend Louisiana Legislative Black Caucus Event										
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