

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 59	
3 CANDIDATE/ OFFICEHOLDER NAME	MS/MRS/MR	FIRST Dexter Lorange-Navario	MI	OFFICE USE ONLY Date Received FEB 23 2026 RCVP Date Hand-delivered or Date Postmarked Receipt # Amount \$ Date Processed Date Imaged
	NICKNAME	LAST McCoy	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS /PO BOX: APT/SUITE # CITY STATE: ZIP CODE			
	P.O. Box 1398 Richmond TX 77406			
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	
6 CAMPAIGN TREASURER NAME	MS/MRS/MR	FIRST Joseph	MI	
	NICKNAME	LAST Killebrew	SUFFIX	
7 CAMPAIGN TREASURER ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE): APT/SUITE # CITY STATE: ZIP CODE			
8835 Arch Rock Dr. Cypress TX 77433				
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	
		(407) 376-0352		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting limit <input type="checkbox"/> Final report (Attach- COH-FR)			
10 PERIOD COVERED	Month Day Year	THROUGH	Month Day Year	
01/23/2026			02/21/2026	
11 ELECTION	ELECTION DATE Month Day Year	ELECTION TYPE		
3/3/2026		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special		
12 OFFICE	OFFICE HELD (if any) Fort Bend County Commissioner Pct. 4	13 OFFICE SOUGHT (if known) Fort Bend County Judge		
14 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.			
	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME		
		COMMITTEE ADDRESS		
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRESS		
GO TO PAGE 2				

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

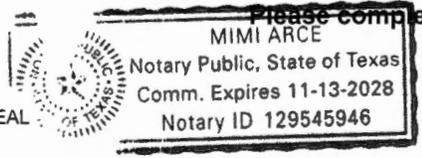
15 C/OH NAME	Dexter Lorange-Navario McCoy		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$0.00
	2	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$72,975.28
EXPENDITURE TOTALS	3	TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$7.47
	4	TOTAL POLITICAL EXPENDITURES	\$551,688.69
CONTRIBUTION BALANCE	5	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$426,385.74
OUTSTANDING LOAN TOTALS	6	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$0.00

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

[Signature]
Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



Sworn to and subscribed before me by DEXTER L. MCCOY this the 23RD day of FEB 20 26 to certify which, witness my hand and seal of office.

Mimi Arce Signature of officer administering oath
MIMI ARCE Printed name of officer administering oath
NOTARY PUBLIC Title of officer administering oath

OR

(2) Unsworn Declaration

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

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

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

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - COH**FORM C/OH
COVER SHEET PG 3**

19 FILER NAME Dexter Lorance-Navario McCoy	20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$63,994.50
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$8,980.78
3. SCHEDULE B: PLEDGED CONTRIBUTIONS	\$0.00
4. SCHEDULE E: LOANS	\$0.00
5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$551,688.69
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$0.00
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$0.00
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$0.00
9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$0.00
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$0.00
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$0.00
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS AND CONTRIBUTIONS RETURNED TO FILER	\$9.48

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: not available
2 FILER NAME Dexter Lorange-Navario McCoy		3 Filer ID (Ethics Commission Filers)
4 Date 01/31/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Emily Anderson 6 Contributor address; City; State; Zip Code 4807 Pin Oak Park Apt 3311 Houston, TX 77081-2229	7 Amount of contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 01/23/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Linda Bair 6 Contributor address; City; State; Zip Code 467 Emory Peak Dr Richmond, TX 77469-2155	7 Amount of contribution (\$) \$31.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 02/15/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Cedric Bandoh 6 Contributor address; City; State; Zip Code 3111 Magnolia Knoll Ln Houston, TX 77080-1554	7 Amount of contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 01/31/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Evelyn Barnett 6 Contributor address; City; State; Zip Code 15507 Willmore Ln Missouri City, TX 77489-2437	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 02/16/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Douglas Beaton 6 Contributor address; City; State; Zip Code 6615 High Knoll Dr Sugar Land, TX 77479-6099	7 Amount of contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: not available
2 FILER NAME Dexter Lorange-Navario McCoy		3 Filer ID (Ethics Commission Filers)
4 Date 02/20/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Levi Benton 6 Contributor address; City; State; Zip Code 3417 Milam St Houston, TX 77002-9531	7 Amount of contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) Levi Benton & Associates PLLC - Houston TX
4 Date 01/30/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ William Bobrick 6 Contributor address; City; State; Zip Code 2440 Texas Pkwy Ste 240 Missouri City, TX 77489-4085	7 Amount of contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 01/30/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Daniel Boggio 6 Contributor address; City; State; Zip Code 11 Greenway Plz Fl 22 Houston, TX 77046-1100	7 Amount of contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) PBK
4 Date 01/30/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Building the Future PAC 6 Contributor address; City; State; Zip Code 9337 Katy Fwy Ste # B Houston, TX 77024-1546	7 Amount of contribution (\$) \$7,500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 02/09/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Cash Camfield 6 Contributor address; City; State; Zip Code 2600 Via Fortuna Ste 300 Austin, TX 78746-7983	7 Amount of contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Requested		9 Employer (See Instructions) Requested

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MONETARY POLITICAL CONTRIBUTIONS

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: not available
2 FILER NAME Dexter Lorange-Navario McCoy		3 Filer ID (Ethics Commission Filers)
4 Date 02/02/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Trina Carreon 6 Contributor address; City; State; Zip Code 19511 Gable Crossing Dr Richmond, TX 77407-4016	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 01/28/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Nassim Chettout 6 Contributor address; City; State; Zip Code 2601 Bellefontaine St Apt A107 Houston, TX 77025-1674	7 Amount of contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) MD		9 Employer (See Instructions) Self
4 Date 01/30/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Wilma Childs 6 Contributor address; City; State; Zip Code 2734 Moon Rock Converse, TX 78109-3718	7 Amount of contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 02/09/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ David Collins 6 Contributor address; City; State; Zip Code 7719 Chasewood Dr Missouri City, TX 77489-1837	7 Amount of contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 02/17/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Walter Criner 6 Contributor address; City; State; Zip Code 16243 Mission Glen Dr Houston, TX 77083-5261	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: not available
2 FILER NAME Dexter Lorange-Navario McCoy		3 Filer ID (Ethics Commission Filers)
4 Date 02/16/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ G. Davis Sr. 6 Contributor address; City; State; Zip Code 2139 Kessler Ct Dallas, TX 75208-2951	7 Amount of contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 01/24/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Mary Dawkins 6 Contributor address; City; State; Zip Code 6831 River Bluff Dr Houston, TX 77085-1313	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 02/11/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Maxine Dawkins 6 Contributor address; City; State; Zip Code 6831 River Bluff Dr Houston, TX 77085-1313	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 01/30/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Corbin Doss 6 Contributor address; City; State; Zip Code 2644 W Adams St Chicago, IL 60612-5381	7 Amount of contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 01/31/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Rita Earlz 6 Contributor address; City; State; Zip Code 7990 N Stadium Dr # 26 Houston, TX 77030-4410	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: not available
2 FILER NAME Dexter Lorraine-Navario McCoy		3 Filer ID (Ethics Commission Filers)
4 Date 02/01/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Sandra Edwards 6 Contributor address; City; State; Zip Code 23303 Millcross Ln Katy, TX 77494-2165	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 02/17/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Sandra Edwards 6 Contributor address; City; State; Zip Code 23303 Millcross Ln Katy, TX 77494-2165	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 02/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Arthur Emma 6 Contributor address; City; State; Zip Code 52 Sanborn St Reading, MA 01867-2972	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 01/31/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Celeste Feast 6 Contributor address; City; State; Zip Code 8807 Luray Ct Rosenberg, TX 77469-4974	7 Amount of contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 02/05/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Trisha Frederick 6 Contributor address; City; State; Zip Code 8011 Cross Trail Dr Sugar Land, TX 77479-7006	7 Amount of contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: not available
2 FILER NAME Dexter Lorange-Navario McCoy		3 Filer ID (Ethics Commission Filers)
4 Date 02/12/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Edmund Frost 6 Contributor address; City; State; Zip Code 7000 Fonvilla St Apt 3501 Houston, TX 77074-6065	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 01/31/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Jess Geevarghese 6 Contributor address; City; State; Zip Code 414 Kyle St Sugar Land, TX 77478-3215	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 02/09/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ John Guess 6 Contributor address; City; State; Zip Code 3100 Timmons Ln Ste 200 Houston, TX 77027-5904	7 Amount of contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Real Estate Broker		9 Employer (See Instructions) John Guess
4 Date 02/14/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Yingjian Han 6 Contributor address; City; State; Zip Code 6023 Gatewood Manor Dr Katy, TX 77494-8601	7 Amount of contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Krest Engineers
4 Date 02/15/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Vincent Harding 6 Contributor address; City; State; Zip Code 1933 W Clay St Houston, TX 77019-3703	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: not available
2 FILER NAME Dexter Lorange-Navario McCoy		3 Filer ID (Ethics Commission Filers)
4 Date 01/31/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Larry Hayes Jr 6 Contributor address; City; State; Zip Code 4503 Pine Landing Dr Missouri City, TX 77459-6720	7 Amount of contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 02/01/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Daimian Hines 6 Contributor address; City; State; Zip Code 4616 Austin St Apt D Houston, TX 77004-5064	7 Amount of contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Architect		9 Employer (See Instructions) Hines Architecture + Design
4 Date 01/31/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Paula & Lenny Holzband 6 Contributor address; City; State; Zip Code 914 Cleistes Ln Richmond, TX 77469-2035	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 02/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Shou Hu 6 Contributor address; City; State; Zip Code 105 Pamellia Dr Bellaire, TX 77401-3711	7 Amount of contribution (\$) \$1,500.00
8 Principal occupation / Job title (See Instructions) Geotechnical Engineer		9 Employer (See Instructions) Aviles Engineering Corporation
4 Date 02/11/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Huitt-Zollars, Inc. Texas PAC 6 Contributor address; City; State; Zip Code 1717 Mckinney Ave Ste 1400 Dallas, TX 75202-1239	7 Amount of contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Dexter Lorange-Navario McCoy		3 Filer ID (Ethics Commission Filers)
4 Date 01/30/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Kelvin Jackquet 6 Contributor address; City; State; Zip Code 5406 Tallow Ln Houston, TX 77021-3036	7 Amount of contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 02/04/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Gabriel Johnson 6 Contributor address; City; State; Zip Code 9407 Reston Grove Ln Houston, TX 77095-2258	7 Amount of contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) AIG Tech
4 Date 02/11/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Laray Johnson 6 Contributor address; City; State; Zip Code 9023 Royal Crest Ln Richmond, TX 77469-9825	7 Amount of contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 01/31/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Chamaine Jones 6 Contributor address; City; State; Zip Code 20718 Pine Rain Ct Katy, TX 77449-1840	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 01/31/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Velia Kavalewitz 6 Contributor address; City; State; Zip Code 514 Saguaro Way Richmond, TX 77469-2116	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: not available
2 FILER NAME Dexter Lorange-Navario McCoy		3 Filer ID (Ethics Commission Filers)
4 Date 02/15/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Velia Kavalewitz 6 Contributor address; City; State; Zip Code 514 Saguaro Way Richmond, TX 77469-2116	7 Amount of contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 02/09/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Mahwash Khalid 6 Contributor address; City; State; Zip Code 10703 Claythorne Ct Richmond, TX 77407-2777	7 Amount of contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) Accelerate Engineering LLC
4 Date 01/28/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Crystal Lewis-Brown 6 Contributor address; City; State; Zip Code 611 Russeff Field Ct Rosenberg, TX 77469-4789	7 Amount of contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 02/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ John Martinez 6 Contributor address; City; State; Zip Code 7103 Dove Hollow Ct Richmond, TX 77407-7159	7 Amount of contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 01/31/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Jack McBride 6 Contributor address; City; State; Zip Code 5902 Petty St Houston, TX 77007-1026	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: not available
2 FILER NAME Dexter Lorange-Navario McCoy		3 Filer ID (Ethics Commission Filers)
4 Date 02/03/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ James M McCain 6 Contributor address; City; State; Zip Code 2303 Calm Channel Ct Missouri City, TX 77459-5164	7 Amount of contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 02/09/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Charles Mgbeike 6 Contributor address; City; State; Zip Code 6511 Broad Oaks Dr Richmond, TX 77406-9628	7 Amount of contribution (\$) \$1,500.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Apex Engineering Group
4 Date 02/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Linda Migura 6 Contributor address; City; State; Zip Code 2202 N Fountain Valley Dr Missouri City, TX 77459-3649	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 02/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Terri Morgan 6 Contributor address; City; State; Zip Code 22611 Duncan Brush Trce Richmond, TX 77469-4766	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 01/31/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Robin Murphy 6 Contributor address; City; State; Zip Code 34 Church St Watertown, MA 02472-3834	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: not available
2 FILER NAME Dexter Lorange-Navario McCoy		3 Filer ID (Ethics Commission Filers)
4 Date 02/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Pamela Norwood-Todd 6 Contributor address; City; State; Zip Code 1306 Cowden Ct Missouri City, TX 77489-3107	7 Amount of contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 01/31/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Dylan Osborne 6 Contributor address; City; State; Zip Code 1418 Vermont St Apt 6 Houston, TX 77006-1051	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 02/18/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Dylan Osborne 6 Contributor address; City; State; Zip Code 1418 Vermont St Apt 6 Houston, TX 77006-1051	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 01/31/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Bharat Patel 6 Contributor address; City; State; Zip Code 14955 Stonelick Bridge Ln Sugar Land, TX 77498-1589	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 01/31/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Dr. Larry Payton 6 Contributor address; City; State; Zip Code 1206 Malea Daisy Ln Richmond, TX 77406-2667	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: not available
2 FILER NAME Dexter Lorange-Navario McCoy		3 Filer ID (Ethics Commission Filers)
4 Date 01/30/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Rhonda Peyton 6 Contributor address; City; State; Zip Code 923 Bent Creek Ct Richmond, TX 77406-1245	7 Amount of contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 02/11/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Satya Pilla 6 Contributor address; City; State; Zip Code 4103 Oak Blossom Ct Houston, TX 77059-3265	7 Amount of contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) Principal		9 Employer (See Instructions) IGET Services, LLC
4 Date 01/31/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Catherine Plume 6 Contributor address; City; State; Zip Code 1211 Decatur St NW Washington, DC 20011-4413	7 Amount of contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 01/31/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ SrikAa Rangan 6 Contributor address; City; State; Zip Code 30 Dorothea Ln Sugar Land, TX 77479-2446	7 Amount of contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 02/10/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Miguel Rivera 6 Contributor address; City; State; Zip Code 1320 Montrose Blvd Apt 303 Houston, TX 77019-4374	7 Amount of contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: not available
2 FILER NAME Dexter Lorange-Navario McCoy		3 Filer ID (Ethics Commission Filers)
4 Date 01/31/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ MARY ROSS 6 Contributor address; City; State; Zip Code 2507 Shadow Oaks Dr Fresno, TX 77545-6071	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 01/30/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Devin Roy 6 Contributor address; City; State; Zip Code 1315 Crown Forest Dr Missouri City, TX 77459-5603	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 02/12/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Raymond Sewell 6 Contributor address; City; State; Zip Code 2228 Waterford Village Blvd Missouri City, TX 77459-1840	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 02/16/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Betsy Sims 6 Contributor address; City; State; Zip Code 203 Cattle Ranch Dr Richmond, TX 77469-1598	7 Amount of contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 02/16/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Mark Solano 6 Contributor address; City; State; Zip Code 4119 Stassen St Houston, TX 77051-1867	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: not available
2 FILER NAME Dexter Lorange-Navario McCoy		3 Filer ID (Ethics Commission Filers)
4 Date 02/11/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Dhiren Srivastava 6 Contributor address; City; State; Zip Code 2601 Hewn Rock Way Pearland, TX 77584-3286	7 Amount of contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Disha Services, Inc.
4 Date 01/31/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Phyllis Steib 6 Contributor address; City; State; Zip Code 19211 Heather Springs Ln Richmond, TX 77407-3868	7 Amount of contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 01/31/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Cheryl L. Sterling 6 Contributor address; City; State; Zip Code 16507 Teak Dr Missouri City, TX 77489-3929	7 Amount of contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 01/31/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Daniel Stoecker 6 Contributor address; City; State; Zip Code 5911 Ravens Mill Ct Sugar Land, TX 77479-4569	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 01/28/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Ted Tankard 6 Contributor address; City; State; Zip Code 10218 Reading Rd Richmond, TX 77469-7328	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: not available
2 FILER NAME Dexter Lorange-Navario McCoy		3 Filer ID (Ethics Commission Filers)
4 Date 01/31/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Gay Taylor 6 Contributor address; City; State; Zip Code 203 Catclaw Ct Richmond, TX 77469-2095	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 02/09/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Teamsters Local Union #988 6 Contributor address; City; State; Zip Code 4303 N Sam Houston Pkwy E Houston, TX 77032-3821	7 Amount of contribution (\$) \$1,500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 02/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Angela Tennison 6 Contributor address; City; State; Zip Code 10505 Bradstreet Commons Way Charlotte, NC 28215-7432	7 Amount of contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Executive Director		9 Employer (See Instructions) Coalition for Equity in Wholesaling
4 Date 02/01/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Caleb Tewolde 6 Contributor address; City; State; Zip Code 2415 Calling Bird Ct Missouri City, TX 77459-1955	7 Amount of contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 02/21/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Dave Tolle 6 Contributor address; City; State; Zip Code 4014 Bratton St Sugar Land, TX 77479-2983	7 Amount of contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: not available
2 FILER NAME Dexter Lorange-Navario McCoy		3 Filer ID (Ethics Commission Filers)
4 Date 01/31/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Jahan Tolliver 6 Contributor address; City; State; Zip Code 8234 Gunston Commons Way Lorton, VA 22079-5027	7 Amount of contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 02/18/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Asim Tufail 6 Contributor address; City; State; Zip Code 5447 Larkin St Houston, TX 77007-1803	7 Amount of contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Blackline Engineering
4 Date 02/12/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ LLARANCE TURNER 6 Contributor address; City; State; Zip Code 1311 Lodge Ct Missouri City, TX 77489-1615	7 Amount of contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) SUEVING & ENGINEERING		9 Employer (See Instructions) KALUZA INC
4 Date 01/31/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Garlanda Walker 6 Contributor address; City; State; Zip Code 8510 Fredericksburg Ln Houston, TX 77083-6368	7 Amount of contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 01/31/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Anthony Warren 6 Contributor address; City; State; Zip Code 7418 Tye Creek Ln Richmond, TX 77469-2855	7 Amount of contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: not available
2 FILER NAME Dexter Lorance-Navario McCoy		3 Filer ID (Ethics Commission Filers)
4 Date 01/30/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Wilbert Watkins 6 Contributor address; City; State; Zip Code 224 S Oak Park Ave Apt 2C Oak Park, IL 60302-3245	7 Amount of contribution (\$) \$31.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 02/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Kimberly Watley 6 Contributor address; City; State; Zip Code 11443 Bromley Bend Dr Missouri City, TX 77459-3548	7 Amount of contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 02/09/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Way to Lead Texas PAC 6 Contributor address; City; State; Zip Code 750 N Saint Paul St Ste Pm 250 Dallas, TX 75201-3206	7 Amount of contribution (\$) \$10,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 02/16/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Matthew Webster 6 Contributor address; City; State; Zip Code 21114 Idle Wind Dr Richmond, TX 77406-7161	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 01/28/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Nancy Wenzel 6 Contributor address; City; State; Zip Code 2611 Colonel Court Dr Richmond, TX 77406-6741	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: not available
2 FILER NAME Dexter Lorange-Navario McCoy		3 Filer ID (Ethics Commission Filers)
4 Date 02/01/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Shelly Williams 6 Contributor address; City; State; Zip Code 25214 Melody Oaks Ln Katy, TX 77494-3002	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 01/31/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Audrey Wynne 6 Contributor address; City; State; Zip Code 2106 Peachwood Dr Missouri City, TX 77489-5019	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

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

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: not available
2 FILER NAME Dexter Lorange-Navario McCoy		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$0.00

5 Date 02/09/2026	6 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Texas Organizing Project PAC	8 Amount of Contribution (\$) \$2,599.70	9 In-kind contribution description Canvassing
	7 Contributor address; City; State; Zip Code PO Box 120296 San Antonio, TX 78212-9496		
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			
10 Principal occupation / Job Title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

5 Date 02/10/2026	6 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Texas Organizing Project PAC	8 Amount of Contribution (\$) \$489.05	9 In-kind contribution description Gas cards
	7 Contributor address; City; State; Zip Code PO Box 120296 San Antonio, TX 78212-9496		
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			
10 Principal occupation / Job Title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

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

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A2: not available
2 FILER NAME Dexter Lorange-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS	\$0.00

5 Date 02/17/2026	6 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Texas Organizing Project PAC	8 Amount of Contribution (\$) \$26.00	9 In-kind contribution description Advertising/Graphic Design Services
	7 Contributor address; City; State; Zip Code PO Box 120296 San Antonio, TX 78212-9496	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job Title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

5 Date 02/17/2026	6 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Texas Organizing Project PAC	8 Amount of Contribution (\$) \$42.61	9 In-kind contribution description Travel reimbursement
	7 Contributor address; City; State; Zip Code PO Box 120296 San Antonio, TX 78212-9496	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job Title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

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NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: not available
2 FILER NAME Dexter Lorance-Navario McCoy		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$0.00

5 Date 02/18/2026	6 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Texas Organizing Project PAC	8 Amount of Contribution (\$) \$332.92	9 In-kind contribution description Printing
	7 Contributor address; City; State; Zip Code PO Box 120296 San Antonio, TX 78212-9496		
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			
10 Principal occupation / Job Title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

5 Date 02/18/2026	6 Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Texas Organizing Project PAC	8 Amount of Contribution (\$) \$5,459.36	9 In-kind contribution description Canvassing
	7 Contributor address; City; State; Zip Code PO Box 120296 San Antonio, TX 78212-9496		
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			
10 Principal occupation / Job Title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

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NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: not available	
2 FILER NAME Dexter Lorance-Navario McCoy		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$0.00	
5 Date 02/19/2026	6 Full name of contributor <input type="checkbox"/> out-of-state PAC Texas Organizing Project PAC	8 Amount of Contribution (\$) \$31.14	9 In-kind contribution description Travel
	7 Contributor address; City; State; Zip Code PO Box 120296 San Antonio, TX 78212-9496	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job Title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorange-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 01/25/2026	5 Payee name ActBlue	
6 Amount (\$) \$3.21	7 Payee address; City: State: Zip Code 366 Summer St Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description Service Fee
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 02/01/2026	5 Payee name ActBlue	
6 Amount (\$) \$171.60	7 Payee address; City: State: Zip Code 366 Summer St Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description Service Fee
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorance-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 02/08/2026	5 Payee name ActBlue	
6 Amount (\$) \$12.85	7 Payee address; City; State: Zip Code 366 Summer St Somerville, MA 02144-3132	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule): Fees	(b) Description Service Fee
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 02/15/2026	5 Payee name ActBlue	
6 Amount (\$) \$244.46	7 Payee address; City; State: Zip Code 366 Summer St Somerville, MA 02144-3132	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule): Fees	(b) Description Service Fee
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorance-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 02/04/2026	5 Payee name Delilah Agho-Otoghile	
6 Amount (\$) \$10,000.00	7 Payee address; City: State: Zip Code 11615 Radford Ln Houston, TX 77099-4640	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Consulting Expense	(b) Description Consulting fee
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 02/06/2026	5 Payee name Allied Signs	
6 Amount (\$) \$3,192.82	7 Payee address; City: State: Zip Code 6820 Harwin Dr Houston, TX 77036-2210	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Printing Expense	(b) Description Printing
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorance-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 02/06/2026	5 Payee name Allied Signs	
6 Amount (\$) \$10,194.05	7 Payee address; City: State: Zip Code 6820 Harwin Dr Houston, TX 77036-2210	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Printing Expense	(b) Description Printing
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 02/17/2026	5 Payee name Amazon	
6 Amount (\$) \$275.19	7 Payee address; City: State: Zip Code 410 Terry Ave N Seattle, WA 98109-5210	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description video, and photography equipment
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorance-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 02/17/2026	5 Payee name Amazon	
6 Amount (\$) \$604.56	7 Payee address; City: State: Zip Code 410 Terry Ave N Seattle, WA 98109-5210	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description video, and photography equipment
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 02/19/2026	5 Payee name Amazon	
6 Amount (\$) \$77.55	7 Payee address; City: State: Zip Code 410 Terry Ave N Seattle, WA 98109-5210	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description video, and photography equipment
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorange-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 02/19/2026	5 Payee name Best Buy	
6 Amount (\$) \$51.95	7 Payee address; City; State: Zip Code 16980 Southwest Fwy Sugar Land, TX 77479-2350	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Communications Equipment
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 02/02/2026	5 Payee name James Cardona	
6 Amount (\$) \$10,000.00	7 Payee address; City; State: Zip Code 5216 Leeland St Houston, TX 77023-2022	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Consulting Expense	(b) Description Consulting fee
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorange-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 02/06/2026	5 Payee name Costco	
6 Amount (\$) \$133.27	7 Payee address; City: State: Zip Code 17520 Southwest Fwy Sugar Land, TX 77479-2359	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Event Expense	(b) Description Campaign supplies
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 02/12/2026	5 Payee name FIRST WATCH	
6 Amount (\$) \$215.08	7 Payee address; City: State: Zip Code 9920 Highway 90 Alt Ste 150C Sugar Land, TX 77478	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Meeting
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorange-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 01/26/2026	5 Payee name Frost Bank	
6 Amount (\$) \$15.00	7 Payee address; City: State: Zip Code PO Box 1600 San Antonio, TX 78296-1600	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description wire transfer fee
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 02/02/2026	5 Payee name Frost Bank	
6 Amount (\$) \$17.00	7 Payee address; City: State: Zip Code PO Box 1600 San Antonio, TX 78296-1600	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description wire transfer fee
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorance-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 02/09/2026	5 Payee name Frost Bank	
6 Amount (\$) \$16.00	7 Payee address; City: State: Zip Code PO Box 1600 San Antonio, TX 78296-1600	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description wire transfer fee
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 02/02/2026	5 Payee name Google	
6 Amount (\$) \$28.27	7 Payee address; City: State: Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043-1351	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Campaign emails
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorange-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 01/29/2026	5 Payee name Gusto	
6 Amount (\$) \$483.97	7 Payee address; City; State: Zip Code 525 20th St San Francisco, CA 94107-4345	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Payroll taxes
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 01/29/2026	5 Payee name Gusto	
6 Amount (\$) \$587.09	7 Payee address; City; State: Zip Code 525 20th St San Francisco, CA 94107-4345	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Payroll taxes
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorance-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 01/29/2026	5 Payee name Gusto	
6 Amount (\$) \$597.68	7 Payee address; City; State: Zip Code 525 20th St San Francisco, CA 94107-4345	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Payroll taxes
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 02/04/2026	5 Payee name Gusto	
6 Amount (\$) \$250.95	7 Payee address; City; State: Zip Code 525 20th St San Francisco, CA 94107-4345	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description Processing Fee
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorange-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 02/20/2026	5 Payee name H-E-B	
6 Amount (\$) \$118.58	7 Payee address; City; State: Zip Code 19988 Southwest Fwy Sugar Land, TX 77479-6505	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Supplies
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 02/18/2026	5 Payee name Haraz Coffeeshouse	
6 Amount (\$) \$12.61	7 Payee address; City; State: Zip Code 13582 University Blvd Sugar Land, TX 77479-6870	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Campaign meeting
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorance-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 02/05/2026	5 Payee name Robert Hightower	
6 Amount (\$) \$740.00	7 Payee address; City; State: Zip Code 5239 Honeyvine Dr Houston, TX 77048-4171	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Sign placement
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 02/03/2026	5 Payee name Houston Police Credit Union	
6 Amount (\$) \$1,141.23	7 Payee address; City; State: Zip Code 1600 Memorial Dr Houston, TX 77007-7702	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description Campaign vehicle
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorange-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 02/09/2026	5 Payee name Human Age Digital	
6 Amount (\$) \$61,000.00	7 Payee address; City: State: Zip Code 2700 Post Oak Blvd Fl 21 Houston, TX 77056-5798	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Digital Advertising
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 02/09/2026	5 Payee name Human Age Digital	
6 Amount (\$) \$80,000.00	7 Payee address; City: State: Zip Code 2700 Post Oak Blvd Fl 21 Houston, TX 77056-5798	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Digital Advertising
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorance-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 02/05/2026	5 Payee name Kohiko Coffee House	
6 Amount (\$) \$28.32	7 Payee address; City: State: Zip Code 4617 Austin Pkwy Sugar Land, TX 77479-2146	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Campaign meeting
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 01/27/2026	5 Payee name Lowe's	
6 Amount (\$) \$26.95	7 Payee address; City: State: Zip Code 16510 Southwest Fwy Sugar Land, TX 77479-2361	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description office keys
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorange-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 02/02/2026	5 Payee name M3 Graphics	
6 Amount (\$) \$2,354.44	7 Payee address; City: State: Zip Code 11730 S Wilcrest Dr Houston, TX 77099-4757	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Printing Expense	(b) Description Printing
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 02/19/2026	5 Payee name Midas 5K Race Agains Childhood Obesity	
6 Amount (\$) \$39.19	7 Payee address; City: State: Zip Code 18427 SOUTHWEST Fwy Sugar Land, TX 77479	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description Donation
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorance-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 02/02/2026	5 Payee name Merci Mohagheghi	
6 Amount (\$) \$9,300.00	7 Payee address; City: State: Zip Code 1010 Rosine St Apt 25 Houston, TX 77019-3871	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Consulting Expense	(b) Description Consulting Fee
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 01/30/2026	5 Payee name Hajar Mohammad	
6 Amount (\$) \$450.00	7 Payee address; City: State: Zip Code 7515 Timber Ridge Trl Sugar Land, TX 77479-6121	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Healthcare and fuel stipend
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorange-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 01/30/2026	5 Payee name Hajar Mohammad	
6 Amount (\$) \$3,700.00	7 Payee address; City; State: Zip Code 7515 Timber Ridge Trl Sugar Land, TX 77479-6121	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Payroll
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 02/18/2026	5 Payee name Hajar Mohammad	
6 Amount (\$) \$179.99	7 Payee address; City; State: Zip Code 7515 Timber Ridge Trl Sugar Land, TX 77479-6121	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description Reimbursement for video editing software
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorance-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 02/13/2026	5 Payee name Nesbitt Research	
6 Amount (\$) \$1,395.00	7 Payee address; City: State: Zip Code 44 Montgomery St San Francisco, CA 94104-4602	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Consulting Expense	(b) Description Opposition research
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 02/06/2026	5 Payee name NGP VAN	
6 Amount (\$) \$1,680.00	7 Payee address; City: State: Zip Code 1445 New York Ave NW Ste 200 Washington, DC 20005-2158	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Database
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorange-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 02/17/2026	5 Payee name Nirmanz Food Boutique	
6 Amount (\$) \$62.84	7 Payee address; City; State: Zip Code 11143 Harlem Rd Ste 410 Richmond, TX 77406-3639	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage Expense	(b) Description campaign meeting
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 01/26/2026	5 Payee name Resonance Campaigns, LLC	
6 Amount (\$) \$4,827.30	7 Payee address; City; State: Zip Code 1319 F St NW Ste # 301 Washington, DC 20004-1140	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Production and Design, Direct mail
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorance-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 02/04/2026	5 Payee name Resonance Campaigns, LLC	
6 Amount (\$) \$31,254.53	7 Payee address; City; State: Zip Code 1319 F St NW Ste # 301 Washington, DC 20004-1140	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Production and Design, Direct mail
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 02/11/2026	5 Payee name Resonance Campaigns, LLC	
6 Amount (\$) \$28,880.87	7 Payee address; City; State: Zip Code 1319 F St NW Ste # 301 Washington, DC 20004-1140	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Production and Design, Direct mail
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorange-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 02/11/2026	5 Payee name Resonance Campaigns, LLC	
6 Amount (\$) \$31,254.53	7 Payee address; City; State; Zip Code 1319 F St NW Ste # 301 Washington, DC 20004-1140	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Production and Design, Direct mail
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 02/11/2026	5 Payee name Resonance Campaigns, LLC	
6 Amount (\$) \$34,419.41	7 Payee address; City; State; Zip Code 1319 F St NW Ste # 301 Washington, DC 20004-1140	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Production and Design, Direct mail
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorance-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 02/11/2026	5 Payee name Resonance Campaigns, LLC	
6 Amount (\$) \$64,509.98	7 Payee address; City: State: Zip Code 1319 F St NW Ste # 301 Washington, DC 20004-1140	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Production and Design, Direct mail
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 02/17/2026	5 Payee name Resonance Campaigns, LLC	
6 Amount (\$) \$33,231.24	7 Payee address; City: State: Zip Code 1319 F St NW Ste # 301 Washington, DC 20004-1140	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Production and Design, Direct mail
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorange-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 02/18/2026	5 Payee name Resonance Campaigns, LLC	
6 Amount (\$) \$13,991.80	7 Payee address; City; State: Zip Code 1319 F St NW Ste # 301 Washington, DC 20004-1140	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Production and Design, Direct mail
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 02/19/2026	5 Payee name Resonance Campaigns, LLC	
6 Amount (\$) \$10,694.88	7 Payee address; City; State: Zip Code 1319 F St NW Ste # 301 Washington, DC 20004-1140	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Production and Design, Direct mail
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorange-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 02/19/2026	5 Payee name Resonance Campaigns, LLC	
6 Amount (\$) \$15,444.54	7 Payee address; City: State: Zip Code 1319 F St NW Ste # 301 Washington, DC 20004-1140	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Production and Design, Direct mail
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 02/19/2026	5 Payee name Resonance Campaigns, LLC	
6 Amount (\$) \$31,254.53	7 Payee address; City: State: Zip Code 1319 F St NW Ste # 301 Washington, DC 20004-1140	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Production and Design, Direct mail
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorange-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 02/19/2026	5 Payee name Resonance Campaigns, LLC	
6 Amount (\$) \$31,254.53	7 Payee address; City; State; Zip Code 1319 F St NW Ste # 301 Washington, DC 20004-1140	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Production and Design, Direct mail
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 01/26/2026	5 Payee name ReStream Inc.	
6 Amount (\$) \$9.74	7 Payee address; City; State; Zip Code 515 Congress Ave Ste 1050 Austin, TX 78701-3504	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Live streaming service
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorance-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 02/02/2026	5 Payee name ReStream Inc.	
6 Amount (\$) \$53.04	7 Payee address; City: State: Zip Code 515 Congress Ave Ste 1050 Austin, TX 78701-3504	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Live streaming service
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 02/02/2026	5 Payee name Scale to Win	
6 Amount (\$) \$596.15	7 Payee address; City: State: Zip Code 455 Market St Ste 1940 San Francisco, CA 94105-2448	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Text messages
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorange-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 01/30/2026	5 Payee name Eos Sison	
6 Amount (\$) \$450.00	7 Payee address; City: State: Zip Code 623 Hawthorne St Apt 1 Houston, TX 77006-4056	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Healthcare and fuel stipend
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 01/30/2026	5 Payee name Eos Sison	
6 Amount (\$) \$4,900.00	7 Payee address; City: State: Zip Code 623 Hawthorne St Apt 1 Houston, TX 77006-4056	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Payroll
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorance-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 02/12/2026	5 Payee name Sprint to Print	
6 Amount (\$) \$649.50	7 Payee address; City: State: Zip Code 8750 Clay Rd Houston, TX 77080-1859	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Printing Expense	(b) Description Campaign materials
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 02/17/2026	5 Payee name Sprint to Print	
6 Amount (\$) \$649.50	7 Payee address; City: State: Zip Code 8750 Clay Rd Houston, TX 77080-1859	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Printing Expense	(b) Description Campaign materials
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorange-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 02/17/2026	5 Payee name Sprint to Print	
6 Amount (\$) \$1,001.32	7 Payee address; City; State: Zip Code 8750 Clay Rd Houston, TX 77080-1859	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Printing Expense	(b) Description Campaign materials
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 02/10/2026	5 Payee name State Farm	
6 Amount (\$) \$54.42	7 Payee address; City; State: Zip Code PO Box 588002 North Metro, GA 30029-8002	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Insurance
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorance-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 01/30/2026	5 Payee name TagVenue	
6 Amount (\$) \$85.00	7 Payee address; City; State: Zip Code 77 Sugar Creek Center Blvd Sugar Land, TX 77478-3580	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Conference room for campaign meeting
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 01/30/2026	5 Payee name Thai Town	
6 Amount (\$) \$296.34	7 Payee address; City; State: Zip Code 222 Highway 6 Ste 500 Sugar Land, TX 77478-4995	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Campaign meeting
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorange-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 02/09/2026	5 Payee name Third Way Strategies	
6 Amount (\$) \$6,000.00	7 Payee address; City; State; Zip Code 1543 Cheshire Ln Houston, TX 77018-4136	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Consulting Expense	(b) Description Consulting Fee
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 02/18/2026	5 Payee name Uber Eats	
6 Amount (\$) \$389.56	7 Payee address; City; State; Zip Code 405 Howard St San Francisco, CA 94105-2625	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Catering for Meet and greet event
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorance-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 02/20/2026	5 Payee name Verizon	
6 Amount (\$) \$128.13	7 Payee address; City: State: Zip Code 10203 W Grand Pkwy S Richmond, TX 77407-2380	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Campaign phone
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 02/13/2026	5 Payee name Yallternative Strategies	
6 Amount (\$) \$5,980.84	7 Payee address; City: State: Zip Code 247 W Main St Fredericksburg, TX 78624-3709	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description List acquisition
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

1 Total pages Schedule F1: not available	2 FILER NAME Dexter Lorance-Navario McCoy	3 Filer ID (Ethics Commission Filers)
4 Date 02/05/2026	5 Payee name Zoom	
6 Amount (\$) \$17.84	7 Payee address; City: State: Zip Code 6601 College Blvd Leawood, KS 66211-1504	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Video conferencing software
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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