CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	auide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 37	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST Mr Omar NICKNAME LAST Narvaez	MI F suffix	OFFICE USE ONLY Date Received	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address		eity; state; zip code		
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER	EXTENSION	Date Hand-delivered or Date Postmarked	
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST Mr Dustin NICKNAME LAST Gadberry	MI SUFFIX	Receipt # Amount \$ Date Processed Date Imaged	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SU 1312 Conant St	JITE #; CITY; STATE; Dallas TX 75207	ZIP CODE	
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (214) 325 5628	EXTENSION		
9 REPORT TYPE	January 15 X 30th day before electrical Sth day before electrical Str. (1997).		15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)	
10 PERIOD COVERED	Month Day Year 01 / 01 / 2019	THROUGH 03	Day Year 25 2019	
11 ELECTION	ELECTION DATE Month Day Year Primary Mean Market	Runoff Other Description Special		
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known Council District 6		
	GO TO PAGE 2			

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME			-	15 Filer ID (Ethics Commission Filers)
Mr Omar F Narvaez				
16 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.			
	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
	SPECIFIC	COMMITTEE ADDRESS		
		COMMITTEE CAMPAIGN TREASURE	R NAME	
Additional Pages				
		COMMITTEE CAMPAIGN TREASURE	ER ADDRESS	
17 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF S S, LOANS, OR GUARANTEES OF		
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GL		\$ 28741.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED		\$ 493.50	
	4. TOTAL	POLITICAL EXPENDITURES		\$ 10293.41
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAIN	NTAINED AS OF THE LAST	DAY \$ 57172.82
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTS AY OF THE REPORTING PERIOD	STANDING LOANS AS OF	\$ 11000.00
18 AFFIDAVIT		true and		perjury, that the accompanying report is permation required to be reported by me
		***	ELECTRONICALLY (CERTIFIED***
			Signature of Can	didate or Officeholder
AFFIX NOTARY STAM	P/SEALABOVE			
Sworn to and subsc	ribed before me, I	by the said Mr Omar F Narva	aez	, this the 4th
day of <u>April</u>	, 2019,	to certify which, witness my h	nand and seal of office.	
Signature of officer a	administering oath	Printed name of officer a	administering oath	Title of officer administering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

-	19 FILER NAME Mr Omar F Narvaez 20 Filer ID (Ethics Con			mmission Filers)
	SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICA	CAL CONTRIBUTIONS		\$ 28,741.00
2.	SCHEDULE A2: NON-MONETARY (IN	N-KIND) POLITICAL CONTRIBUTIONS		\$ 0.00
3.	SCHEDULE B: PLEDGED CONTRIBU	JTIONS		\$ 0.00
4.	SCHEDULE E: LOANS			\$ 0.00
5.	SCHEDULE F1: POLITICAL EXPEND	DITURES MADE FROM POLITICAL CON	NTRIBUTIONS	\$ 9,799.91
6.	SCHEDULE F2: UNPAID INCURRED (OBLIGATIONS		\$ 0.00
7.	7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS			\$ 0.00
8.	SCHEDULE F4: EXPENDITURES MA	ADE BY CREDIT CARD		\$ 0.00
9.	SCHEDULE G: POLITICAL EXPENDI	DITURES MADE FROM PERSONAL FUN	IDS	\$ 0.00
10.	SCHEDULE H: PAYMENT MADE FRO	OM POLITICAL CONTRIBUTIONS TO A	BUSINESS OF C/OH	\$ 0.00
11.	SCHEDULE I: NON-POLITICAL EXPEN	NDITURES MADE FROM POLITICAL CO	NTRIBUTIONS	\$ 0.00
12.	SCHEDULE K: INTEREST, CREDITS, RETURNED TO FILER	S, GAINS, REFUNDS, AND CONTRIBUTI	ONS	\$ 0.00

SCHEDULE A1

The	Instruction Guide explains how to complete this fo	rm.	1 Total pages Schedule A1: 1 of 27
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mr Omar F Narv	aez		
4 Date	5 Full name of contributor uut-of-state PAC (ID	#:)	7 Amount of contribution (\$)
01/04/2019	Anthony Page		1000.00
	6 Contributor address; City; State;	Zip Code	
	3210 Carlisle St. Unit 1 Dallas, T2	X 75204	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor ut-of-state PAC (ID)#:)	Amount of contribution (\$)
01/06/2019	James White		100.00
01/00/2019	Contributor address; City; State;	Zip Code	100.00
	12330 Creekspan Drive Dallas, TX	X 75243	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor)#:)	Amount of contribution (\$)
01/07/2019	Andrew Kochie		250.00
	Contributor address; City; State;	Zip Code	
	1551 Oak Lawn Ave Dallas, T2	X 75207	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor out-of-state PAC (ID	D#:)	Amount of contribution (\$)
01/07/2019	Joanna St. Angelo		250.00
		Zip Code e, TX 76051	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 2 of 27
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mr Omar F Narv	nez		
4 Date	5 Full name of contributor out-of-state_PAC (ID#:)	7 Amount of contribution (\$)
01/09/2019	Chris heinbaugh		50.00
01/05/2015	6 Contributor address; City; State;	Zip Code	20.00
	1801 annex ave Dallas, 7	ΓX 75204	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
01/09/2019	Lee Daugherty		100.00
	Contributor address; City; State;	Zip Code	
	4123 Cedar Springs Rd Dallas, 7	ΓX 75219	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
01/09/2019	Robiin Emery		100.00
	Contributor address; City; State; 6211 W NW Hwy Dallas, 7	Zip Code ΓX 75225	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)
01/09/2019	Keith Pomykal		100.00
		Zip Code ΓX 75219	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 3 of 27
2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Mr Omar F Narvaez	
4 Date 5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of contribution (\$)
01/12/2019 John Maline	200.00
6 Contributor address; City; State; Zip Code	
5331 E Mockingbird Ln Dallas, TX 75206	
O District and accounting (lab title (Con Instructions)	4:>
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instruc	eions)
Date Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)
01/14/2010 Kim Noltemy	
01/14/2019	250.00
Contributor address; City; State; Zip Code	
222 Browder St Dallas, TX 75201	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	tions)
	,
Date Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)
01/14/2019 Sara Cardona	50.00
Contributor address; City; State; Zip Code	
304 South Montclair Avenue Dallas, TX 75208	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	tions)
Date Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)
01/14/2019 Keith Pomykal	100.00
Contributor address; City; State; Zip Code	
P.O. Box 192723 Dallas, TX 75219	
Principal occupation / Job title (See Instructions) Employer (See Instruc	tions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 4 of 27
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mr Omar F Narv	nez		
4 Date	5 Full name of contributor uut-of-state PAC	(ID#:)	7 Amount of contribution (\$)
01/15/2019	Cannon Flowers		100.00
	6 Contributor address; City; State;	Zip Code	
	3809 Parry Ave Dallas, 7	TX 75226	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ione)
6 Filicipal occu	Sation / Job title (See Instituctions)	9 Employer (See instruct	ions)
Date	Full name of contributor uut-of-state PAC	(ID#:)	Amount of contribution (\$)
01/15/2019	Joanna Hampton		100.00
01/13/2019	Contributor address; City; State;	1	100.00
		TX 75214	
	5400 SWISS TVC Dullus,	174 / 5/214	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	(ID#:)	Α
	Lee Daugherty	(10#)	Amount of contribution (\$)
01/18/2019			27.00
	Contributor address; City; State;		
	4123 Cedar Springs Rd. Dallas, 7	TX 75219	
Principal occup	nation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
01/18/2019	Johnny Aguinaga	('-"	100.00
01/10/2019	Contributor address:	Zin Code	100.00
		Zip Code TX 75205	
	,		
Principal occup	nation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 5 of 27
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mr Omar F Narv	aez		
4 Date	5 Full name of contributor out-of-state PAC (IE	D#:)	7 Amount of contribution (\$)
01/22/2019	Michael Amonett		100.00
	6 Contributor address; City; State;	Zip Code	
	2210 West 10th Street Dallas, T.	X 75208	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
01/22/2019	david jensen		250.00
01/22/2017	Contributor address; City; State;	Zip Code	250.00
	8055 FM 779 Alba, TX	75410	
Principal occup	vation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
01/22/2019	Sean Hubbard		50.00
	Contributor address; City; State; 149 Bon Aire Drive Dallas, T	•	
Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
01/28/2019	Jay Narey		100.00
	Contributor address; City; State; 4188 Wilada Dallas, T	Zip Code	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ons)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 6 of 27
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mr Omar F Narv	aez		
4 Date	5 Full name of contributor out-of-state PAC ((ID#:)	7 Amount of contribution (\$)
01/28/2019	Lauren Berman		500.00
	6 Contributor address; City; State;	Zip Code	
	3890 Dunhaven Rd DALLA	AS, TX 75220	
0 0 0 0 0			
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
01/29/2019	John Turner-McClelland		25.00
01/23/2013	Contributor address; City; State;	Zip Code	23.00
	2417 Stone Creek Dr Plano, T	TX 75075	
	·		
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor uut-of-state PAC ((ID#:)	Amount of contribution (\$)
01/29/2019	Staci Reznik		500.00
01/29/2019	Contributor address; City; State;	Zin Code	300.00
		TX 75220	
	Salas,	111,0220	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
01/29/2019	Scott Reznik	,10#	500.00
01/29/2019			300.00
	Contributor address; City; State; 4007 Lively Lane Dallas, 7	Zip Code TX 75220	
	+007 Livery Lane Danas,	1X 73220	
Principal occur	pation / Job title (See Instructions)	Employer (See Instructi	ions)
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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 7 of 27
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mr Omar F Narv	aez		
4 Date	5 Full name of contributor out-of-state PAC ((ID#:)	7 Amount of contribution (\$)
02/01/2019	Ruth Klein		100.00
	6 Contributor address; City; State;	Zip Code	
	4023 Glenridge Road Dallas, T	TX 75220	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
	,	. , ,	,
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
02/02/2019	Allen Almodovar		100.00
	Contributor address; City; State;		
	3747 Manana Drive Dallas, 7	TX 75220	
D. C. C. C.			
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor out-of-state PAC ((ID#:)	Amount of contribution (\$)
02/04/2019	Susan Magee		50.00
02/01/2019	Contributor address; City; State;	Zip Code	20.00
	•	TX 75220	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
02/05/2019	Josi Umo	(10#)	500.00
02/03/2019			300.00
		Zip Code n, TX 75001	
	12.10 200.000	, 111 /0001	
Principal occup	vation / Job title (See Instructions)	Employer (See Instructi	ions)
	<u> </u>		

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 8 of 27
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mr Omar F Narv	aez		
4 Date	5 Full name of contributor ut-of-state PAC	(ID#:)	7 Amount of contribution (\$)
02/06/2019	Steve Atkinson		100.00
	6 Contributor address; City; State;	Zip Code	
	5926 Tree Shadow Trl Dallas, '	TX 75252	
0 D: :			•
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruction	ions)
Date	Full name of contributor out-of-state_PAC	(ID#:)	Amount of contribution (\$)
02/06/2010	Wick Allison		
02/06/2019	Contributor address; City; State;	Zin Codo	1000.00
	750 North St. Paul St. Dallas,	TX 75201	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
02/06/2019	Monica Bravo		250.00
	Contributor address; City; State;	Zip Code	
	1155 Timplemore Drive Dallas,	TX 75218	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ions)
Date	Full name of contributor	(10.1)	A (A)
	Sandi Pruitt	(ID#:)	Amount of contribution (\$)
02/06/2019			150.00
		Zip Code TX 75220	
	9921 Elinada Lane Danas,	1A 73220	
Principal occur	eation / Job title (See Instructions)	Employer (See Instructi	ions)
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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 9 of 27
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mr Omar F Narv	nez		
4 Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
02/07/2019	Lucy Billingsley		1000.00
02/07/2019	6 Contributor address; City; State;	Zip Code	1000.00
	1722 Routh Street Dallas,	TX 75201	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ione\
• Filicipal occu	valion / Job title (See instructions)	g Employer (See mstructi	ions)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
02/08/2019	Elizabeth Post		50.00
02/00/2019	Contributor address; City; State;	Zip Code	30.00
	4064 Clover Lane Dallas,	TX 75220	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
02/09/2019	Donna Bando		100.00
02/09/2019	Contributor address; City; State;	Zip Code	100.00
		TX 75220	
	-		
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	(10#-	Amount of contribution (\$)
02/09/2019	Steven Frazee	,	100.00
	Contributor address; City; State;	Zip Code	
	3803 Clover Lane Dallas,	TX 75220	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

out-of-state PAC (ID#:	Amount of contribution (\$) 10.00 e for (See Instructions)
City; State; Zip Code Dallas, TX 75219 9 Employ out-of-state PAC (ID#:	7 Amount of contribution (\$) 50.00 Per (See Instructions) Amount of contribution (\$) 10.00 Per (See Instructions) Amount of contribution (\$)
City; State; Zip Code Dallas, TX 75219 9 Employ out-of-state PAC (ID#:	Amount of contribution (\$) 10.00 er (See Instructions) Amount of contribution (\$) Amount of contribution (\$)
City; State; Zip Code Dallas, TX 75219 9 Employ out-of-state PAC (ID#:	Amount of contribution (\$) 10.00 er (See Instructions) Amount of contribution (\$) Amount of contribution (\$)
Dallas, TX 75219 9 Employ Out-of-state PAC (ID#:	Amount of contribution (\$) 10.00 e Ter (See Instructions) Amount of contribution (\$) Amount of contribution (\$)
Dallas, TX 75219 9 Employ Out-of-state PAC (ID#:	Amount of contribution (\$) 10.00 e Ter (See Instructions) Amount of contribution (\$) Amount of contribution (\$)
out-of-state PAC (ID#:	Amount of contribution (\$) 10.00 e for (See Instructions) Amount of contribution (\$)
out-of-state PAC (ID#:	Amount of contribution (\$) 10.00 e for (See Instructions) Amount of contribution (\$)
City; State; Zip Code Astoria, NY 11105 Employe out-of-state PAC (ID#:	10.00 e for (See Instructions) Amount of contribution (\$)
City; State; Zip Code Astoria, NY 11105 Employe out-of-state PAC (ID#:	rer (See Instructions) Amount of contribution (\$)
City; State; Zip Code Astoria, NY 11105 Employe out-of-state PAC (ID#:	rer (See Instructions) Amount of contribution (\$)
□ out-of-state PAC (ID#:	Per (See Instructions) Amount of contribution (\$)
out-of-state PAC (ID#:	Amount of contribution (\$)
City; State; Zip Code	(4)
City; State; Zip Code	
City; State; Zip Code	
Irving, TX 75063	•
Employ	ver (See Instructions)
Quit of state PAC (ID#-) Amount of contribution (\$)
out of state The (IBII.	250.00
City; State; Zip Code Dallas, TX 75212	• • • • • • • • • • • • • • • • • • • •
Employ	ver (See Instructions)
	City; State; Zip Code Dallas, TX 75212

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SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 11 of 27
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mr Omar F Narv	aez		
4 Date	5 Full name of contributor out-of-state PAC (I	ID#:)	7 Amount of contribution (\$)
02/15/2019 Heather Gorham			27.00
	6 Contributor address; City; State;	Zip Code	
	3753 Matador Dr Dallas, T	ΓX 75220	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ions)
6 Fincipal occu	Sation / Job title (See Instructions)	, Employer (See instruct	ions)
Date	Full name of contributor ut-of-state PAC (I	ID#:)	Amount of contribution (\$)
02/15/2019	Susan Gandy		1000.00
02/13/2019		Zip Code	1000.00
	•	ГX 75209	
	3217 Shady wood Zune Zune Zunas, 1	.11 73207	
Principal occup	eation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$\Psi\)
	Lee Daugherty	,	Amount of contribution (\$)
02/18/2019			27.00
	Contributor address; City; State;	· ·	
	4123 Cedar Springs Rd Dallas, T	ΓX 75219	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
_			
Date	Full name of contributor out-of-state PAC (I	ID#:)	Amount of contribution (\$)
02/18/2019	Ingrid Burgan		100.00
	Contributor address; City; State;	Zip Code	
	9740 Mixon Drive Dallas, T	ΓX 75220	
5			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	form.	1 Total pages Schedule A1: 12 of 27
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mr Omar F Narv	aez		
4 Date	5 Full name of contributor out-of-state PAC ((ID#:)	7 Amount of contribution (\$)
02/18/2019	Timothy Dickey		150.00
	6 Contributor address; City; State;	Zip Code	
	3134 Lockmoor Ln. Dallas, T	ΓX 75220	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
o i incipal occu	Sation / Sob title (See Instructions)	• Employer (See manuch	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
02/19/2019	Robert Salcido		50.00
02/19/2019	Contributor address; City; State;	Zip Code	30.00
		onio, TX 78212	
	1.0. Box 120115	01110, 111 70212	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	(ID#:)	
	Terri StClair	,ID#:)	Amount of contribution (\$)
02/19/2019 Terri Stelair 100.00			
	Contributor address; City; State;		
	2361 Water Way Rockwal	ll, TX 75087	
Principal occur	pation / Job title (See Instructions)	Employer (See Instructi	ions)
i illicipai occup	ation 7 300 title (See instructions)	Employer (See manuch	ions)
Date	Full name of contributor out-of-state_PAC ((ID#:)	Amount of contribution (\$)
02/19/2019	Nicholas DiCarlo		50.00
	Contributor address; City; State;	Zip Code	
		ΓX 75214	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 13 of 27
2 FILER NAME Mr Omar F Narv	aez		3 Filer ID (Ethics Commission Filers)
4 Date 02/20/2019	Nancy Gruber 6 Contributor address; City; State;	; Zip Code TX 75220	7 Amount of contribution (\$) 50.00
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)
Date 02/20/2019	Clinton Haley Contributor address; City; State;	; Zip Code TX 75214	Amount of contribution (\$) 100.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date 02/26/2019	Deborah Carpenter Contributor address; City; State;	; Zip Code TX 75208	Amount of contribution (\$) 100.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date 02/27/2019	Julian and Sonia Almaguer Contributor address; City; State;		Amount of contribution (\$) 100.00
Principal occup	action / Job title (See Instructions)	Employer (See Instruct	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	form.	1 Total pages Schedule A1: 14 of 27
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mr Omar F Narv	aez		
4 Date	5 Full name of contributor out-of-state PAC ((ID#:)	7 Amount of contribution (\$)
03/08/2019	Mayur Patel		1000.00
	6 Contributor address; City; State;	Zip Code	
	2380 w Nw hwy Dallas, 7	TX 75220	
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)			ions)
• Timoparocca	Satisfity out the (eee instructions)	y Employer (occ manden	10113)
Date	Full name of contributor out-of-state PAC ((ID#:)	Amount of contribution (\$)
03/09/2019	James Reynolds		1000.00
03/09/2019	Contributor address; City; State;	Zip Code	1000.00
		TX 75093	
	panio, 1		
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	(ID#:)	A
	Libby Hamer	,10#	Amount of contribution (\$)
03/14/2019			20.00
	Contributor address; City; State;	·	
	3950 HAWICK LN DALLA	AS, TX 75220	
Principal occur	pation / Job title (See Instructions)	Employer (See Instructi	ions)
i inicipal cocap	anony see the (see mendedno)	Employer (ede menden	iono,
Date	Full name of contributor out-of-state PAC ((ID#:)	Amount of contribution (\$)
03/15/2019	Cyndi Long		50.00
	Contributor address; City; State;		
		TX 75207	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	form.	1 Total pages Schedule A1: 15 of 27
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mr Omar F Narv	aez		
4 Date	5 Full name of contributor out-of-state PAC ((ID#:)	7 Amount of contribution (\$)
03/16/2019	Sandra De La Cruz		50.00
	6 Contributor address; City; State;	Zip Code	
	3917 Van Ness Lane Dallas, 7	TX 75220	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ione)
• I Illicipal occu	Sation / Bob title (Gee Histractions)	y Employer (See instructi	ions
Date	Full name of contributor out-of-state PAC ((ID#:)	Amount of contribution (\$)
03/18/2019	Lee Daugherty		27.00
03/16/2019	Contributor address; City; State;		27.00
		TX 75219	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor out-of-state_PAC ((ID#:)	Amount of contribution (\$)
03/21/2019	Victor Toledo		250.00
03/21/2019	Contributor address; City; State;		230.00
		TX 75212	
	2100 Singleton Boulevard Bullas, 1	111 /3212	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	(10#.	Amount of contribution (\$)
03/21/2019	Christopher Walter	(ID#:)	25.00
03/21/2019			23.00
		Zip Code TX 75206	
	2310 14. Helidelson 11ve	111 73200	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	form.	1 Total pages Schedule A1: 16 of 27
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mr Omar F Narv	aez		
4 Date		(ID#:)	7 Amount of contribution (\$)
03/23/2019	Chad Benedict		50.00
6 Contributor address; City; State; Zip Code			
	P.O. Box 190653 Dallas, T	ΓX 75219	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	tions)
6 Filicipal occu	Sation / Sob title (See Instructions)	j Employer (See instructi	10115)
Date	Full name of contributor out-of-state PAC (I	(ID#:)	Amount of contribution (\$)
03/24/2019	Erica Almendarez		20.00
03/24/2019	Contributor address; City; State;		20.00
		TX 75212	
	5222 Bataan Banas, 1	1X 13212	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Data	Full name of contributor		
Date		(ID#:)	Amount of contribution (\$)
03/25/2019	VIVIENNE ARMSTRONG		27.00
	Contributor address; City; State;		
	6156 BERWYN LN DALLA	AS, TX 75214	
Bringinal occur	pation / Job title (See Instructions)	Employer (See Instructi	iana\
Fillicipal occup	ation / Job title (See Instructions)	Employer (See instructi	ions)
Date	Full name of contributor out-of-state PAC (I	(ID#:)	Amount of contribution (\$)
03/25/2019	Jeff Strater		50.00
00, 00, 00,	Contributor address; City; State;		
		ΓX 75204	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 17 of 27
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mr Omar F Narv	aez		
4 Date	5 Full name of contributor out-of-state PAC (IE	D#:)	7 Amount of contribution (\$)
03/25/2019 Susan Magee			50.00
	6 Contributor address; City; State;		
	9935 Coppedge Ln Dallas, T.	'X 75220	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
03/25/2019	Eric Johnson		250.00
	Contributor address; City; State;		
	3525 Turtle Creek Blvd Dallas, T.	'X 75219	
Principal occup	nation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor out-of-state PAC (IE	D#:)	Amount of contribution (\$)
03/25/2019	Cherie Batsel		150.00
	Contributor address; City; State;		
	3722 Seguin Dr Dallas, T	X 75220	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
03/25/2019	Chad Dugger		27.00
	Contributor address; City; State; 3208 Newcastle Drive Dallas, T.	Zip Code "X 75220	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 18 of 27
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mr Omar F Narv	aez		
4 Date	5 Full name of contributor out-of-state PAC ((ID#:)	7 Amount of contribution (\$)
03/25/2019	Sharon Howard		200.00
	6 Contributor address; City; State;	Zip Code	
	4116 Plum leaf Court Dallas, 7	TX 75212	
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)		ions)	
Date	Full name of contributor ut-of-state PAC ((ID#:)	Amount of contribution (\$)
03/25/2019	Jeannette Salazar		27.00
	Contributor address; City; State;	•	
	3330 Bataan st Dallas, 7	TX 75212	
Principal occup	nation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor ut-of-state PAC ((ID#:)	Amount of contribution (\$)
03/25/2019	Ed & Kathy Zahra		100.00
	Contributor address; City; State; 2404 Farrington Dallas, 7	Zip Code TX 75207	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
03/25/2019	Giles Davidson		100.00
	Contributor address; City; State; 1111 N Montclair Ave Dallas, 7		
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 19 of 27
2 FILER NAME Mr Omar F Narv	aez		3 Filer ID (Ethics Commission Filers)
4 Date 03/25/2019	Mack Campbell 6 Contributor address; City; State;	Zip Code TX 75219	7 Amount of contribution (\$) 27.00
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
Date 03/25/2019	Alfredo Pedroza Contributor address; City; State;	Zip Code uncisco, CA 94110	Amount of contribution (\$) 100.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date 03/25/2019	Gaurav Patel Contributor address; City; State;	Zip Code TX 75220	Amount of contribution (\$) 250.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date 03/25/2019	Full name of contributor Jesuorobo Enobakhare Jr Contributor address; City; State; 305 W Commerce St Dallas,		Amount of contribution (\$) 50.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 20 of 27
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mr Omar F Narv	aez		
4 Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
01/14/2019	Gilbert Aranza	1000.00	
	6 Contributor address; City; State;	Zip Code	
	7929 Brookriver Suite 200 Dallas,	TX 75247	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
01/14/2019	Rosalinde Aranza		1000.00
01/14/2019	Contributor address; City; State;	Zip Code	1000.00
		TX 75247	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
01/14/2019	Ariana Cook		250.00
Contributor address; City; State; Zip Code 4400 W University Blvd Suite 4304 Dallas, TX 75209			
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
01/18/2019	Suzanne Smith		150.00
	-	Zip Code TX 75219	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	form.	1 Total pages Schedule A1: 21 of 27
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mr Omar F Narv	aez		
4 Date	5 Full name of contributor out-of-state PAC ((ID#:)	7 Amount of contribution (\$)
01/19/2019	Juan Cadena		500.00
	6 Contributor address; City; State;	Zip Code	
	6815 American way Dallas, T	ΓX 75237	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)
Date	Full name of contributor out-of-state PAC ((ID#:)	Amount of contribution (\$)
01/19/2019	Elsa Cadena		500.00
	Contributor address; City; State;	Zip Code	
	6815 American Way Dallas, T	ΓX 75237	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor out-of-state PAC ((ID#:)	Amount of contribution (\$)
02/06/2019	Shanali Bhagat		1000.00
02/00/2019	Contributor address; City; State;	Zin Code	1000.00
	-	ΓX 75077	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
02/06/2019	Susanna Brown		300.00
	Contributor address; City; State; 4175 Wilda Dallas, T		
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 22 of 27
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Mr Omar F Narv	aez	
4 Date	5 Full name of contributor out-of-state PAC (ID#:	7 Amount of contribution (\$)
02/04/2019	Carl Seeger	100.00
	6 Contributor address; City; State; Zip	
	3747 Manana Dallas, TX 75	5220
8 Principal occu	pation / Job title (See Instructions) 9 E	mployer (See Instructions)
Date	Full name of contributor	Amount of contribution (\$)
02/02/2019	Belinda Thomas	100.00
02/02/2019	Contributor address; City; State; Zip	
	1803 S Ervay Dallas, TX 7:	3215
Principal occup	ation / Job title (See Instructions)	mployer (See Instructions)
Date	Full name of contributor	Amount of contribution (\$)
02/06/2019	Marty Loring	100.00
	Contributor address; City; State; Zip 9917 Lenel Pl Dallas, TX 75	Code 5220
Principal occup	eation / Job title (See Instructions)	mployer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#:	
02/06/2019	Rebecca Greenan	100.00
	Contributor address; City; State; Zip 511 N Akard St Suite 1501 Dallas, TX 75	Code
Principal occup	pation / Job title (See Instructions)	mployer (See Instructions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 23 of 27
2 FILER NAME Mr Omar F Narv	ne7		3 Filer ID (Ethics Commission Filers)
4 Date 02/06/2019	5 Full name of contributor ☐ out-of-state PAC (ID Theresa M Daniel 6 Contributor address; City; State; 2228 Springhill Dallas, T2	Zip Code	7 Amount of contribution (\$) 50.00
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date 02/27/2019	Full name of contributor	Zip Code	Amount of contribution (\$) 1000.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date 03/04/2019	Full name of contributor Pauline Medrano Contributor address; City; State; Dallas, T2	Zip Code	Amount of contribution (\$) 250.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date 02/20/2019	Full name of contributor	n Greater Dallas Chapte Zip Code	Amount of contribution (\$) r 250.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	form.	1 Total pages Schedule A1: 24 of 27
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mr Omar F Narv	nez		
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of contribution (\$)
03/05/2019	D. Karen Wilkerson		125.00
	6 Contributor address; City; State;	Zip Code	
	P.O. Box 6236 Tyler, T	X 75711	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
02/27/2019	Belinda Thomas		100.00
	Contributor address; City; State;	Zip Code	
	1803 S Ervay Dallas, 7	ΓX 75215	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
02/27/2019	Rebecca Greenan		50.00
	Contributor address; City; State;	Zip Code	
		ΓX 75201	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor out-of-state_PAC (ID#:)	Amount of contribution (\$)
01/14/2019	Joshua Quinn		1000.00
		Zip Code ΓX 75230	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this form	1 Total pages Schedule A1: 25 of 27
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Mr Omar F Nar	/aez	
4 Date	5 Full name of contributor out-of-state PAC (ID#:	7 Amount of contribution (\$)
01/19/2019	Samuel Herskovitz	1000.00
	6 Contributor address; City; State; Zig	p Code
	6214 Presoncrest Dallas, TX 7	75230
8 Principal occi	upation / Job title (See Instructions) 9 E	Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
01/18/2019	Eric Berlin Contributor address; City; State; Zi	250.00
	4129 Southwestern Dallas, TX 7	75225
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
03/25/2019	Jean Dean	1000.00
	Contributor address; City; State; Zip P.O. Box 140039 Dallas, TX 7	
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
03/25/2019	dallas police officer pac	250.00
	Contributor address; City; State; Zip 1412 griffin st Dallas, TX 7	o Code
	pation / Job title (See Instructions)	Employer (See Instructions)
Principal occu	patient to be the test mendeles.e,	

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 26 of 27
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mr Omar F Narv	aez		
4 Date	5 Full name of contributor out-of-state_PAC	(ID#:)	7 Amount of contribution (\$)
02/14/2019	Brandon Harsten		500.00
02/11/2019	6 Contributor address; City; State;	Zip Code	200.00
	5701 Coral Cove Plano, T	TX 75093	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
• Timolpai occu	Sation / Goo title (Gee motitudions)	2 Employer (See Institution	
Date	Full name of contributor uut-of-state PAC	(ID#:)	Amount of contribution (\$)
02/18/2019	Ron Barnhill		500.00
02/10/2019	Contributor address; City; State;	Zip Code	200.00
	2313 Amhearst Flower	Mound, TX 75026	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
03/12/2019	Vincent Tricomi		750.00
	Contributor address; City; State; 1005 Shady Rest Corinth,	Zip Code , TX 76208	
Principal occup	nation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
02/15/2019	Edgar Solis	,	250.00
		Zip Code son, TX 75081	
Principal occup	nation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	form.	1 Total pages Schedule A1: 27 of 27
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mr Omar F Narv	aez		
4 Date	5 Full name of contributor ut-of-state PAC ((ID#:)	7 Amount of contribution (\$)
03/19/2019	Mary Fairchild		250.00
	6 Contributor address; City; State;	Zip Code	
	1600 Bent Creek South la	ıke, TX 76092	
O Deinster Lance	and the state (O and the state of the state		·
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
00/4 7/0040	Christopher Luna		
03/15/2019			500.00
	Contributor address; City; State;		
	P.O. Box 131523 Dallas, 7	TX 75313	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor ut-of-state PAC ((ID#:)	Amount of contribution (\$)
02/14/2019	Jack Parker		500.00
	Contributor address; City; State;	Zip Code	
	-	TX 75244	
Principal occup	eation / Job title (See Instructions)	Employer (See Instruction	ions)
Date			
	Full name of contributor uut-of-state PAC (Roger Albright	(ID#:)	Amount of contribution (\$)
03/19/2019			500.00
	Contributor address; City; State;	Zip Code	
	3301 Elm St Dallas, T	TX 75226	
Duin sin al an ann	-Air-r- / John Airlin (Cons. Installung)		·
Principal occup	eation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)

Credit Card Payment	The Instru	ction Guide explains how to o	complete this form.		
1 Total pages Schedule F1:	2 FILER NAME Mr Omar F Narvaez			3 Filer ID (Ethics Commission Filers))
4 Date 01/01/2019	5 Payee name Huey Fischer				
6 Amount (\$) 300.00	7 Payee address; 4321 Hazard	City; State; Zip Code Houston, TX 77098			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories Consulting Expense	s listed at the top of this schedule)		utside of Texas. Complete Schedule T. n, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeho	older name	Office sought	Office held	
Date 02/01/2019	Payee name Huey Fischer				
Amount (\$) 300.00	Payee address; 4321 Hazard	City; State; Zip Code Houston, TX 77098			
PURPOSE OF EXPENDITURE	Category (See Categories Consulting Expense	s listed at the top of this schedule)		tside of Texas. Complete Schedule T. , TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeho	older name	Office sought	Office held	
Date 03/01/2019	Payee name Huey Fischer				
Amount (\$) 300.00	Payee address; 4321 Hazard	City; State; Zip Code Houston, TX 77098			
PURPOSE OF EXPENDITURE	Category (See Categories Consulting Expense	s listed at the top of this schedule)		ntside of Texas. Complete Schedule T.	
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeho	older name	Office sought	Office held	
	ATTACH ADDI	TIONAL COPIES OF THIS	SCHEDULE AS NEI	EDED	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Other (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 2 of 7	2 FILER NAME Mr Omar F Narvaez	3 Filer ID (Ethics Commission Filers)	
4 Date 03/06/2019	5 Payee name Walls Printing		
6 Amount (\$) 1384.05	7 Payee address; City; State; Zip Code 9171 King Arthur Dallas, TX 75247		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Printing	
9 Complete ONLY if direct expenditure to benefit C/Ol	Candidate / Officeholder name H	Office sought Office held	
Date 02/10/2019	Payee name Westmoreland Heights Community		
Amount (\$) 300.00	Payee address; City; State; Zip Code 3739 Homeland Dallas, TX 75212		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Comm	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held	
Date 02/08/2019	Payee name Walls Printing		
Amount (\$) 1160.15	Payee address; City; State; Zip Code 9171 King Arthur Dallas, TX 75247		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Polling Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Printing	
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held	
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al Committee Legal Services	Salaries	Wages/Contract Labor	Other (enter a category not listed above)	
Credit Card Payment	The Instruc	tion Guide explains how to	complete this form.		
1 Total pages Schedule F1: 3 of 7	2 FILER NAME Mr Omar F Narvaez			3 Filer ID (Ethics Commission Filers)	
4 Date 02/14/2019	5 Payee name K & R Screen Graphics				
6 Amount (\$) 2707.09	7 Payee address; 3915 Main	City; State; Zip Code Dallas, TX 75226			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories Printing Expense	isted at the top of this schedule)		utside of Texas. Complete Schedule T. n, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate / Officehol	der name	Office sought	Office held	
Date 01/23/2019	Payee name K & R Screen Graphics				
Amount (\$) 1500.00	Payee address; 3915 Main	City; State; Zip Code Dallas, TX 75226			
PURPOSE OF EXPENDITURE	Category (See Categories Printing Expense	isted at the top of this schedule)		tside of Texas. Complete Schedule T. , TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officehol	der name	Office sought	Office held	
Date 01/03/2019	Payee name Act Blue				
Amount (\$) 43.45	Payee address; P.O. Box 441446	City; State; Zip Code Somerville, MA 02144			
PURPOSE OF EXPENDITURE	Category (See Categories Fees	isted at the top of this schedule)		ntside of Texas. Complete Schedule T.	
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeho	der name	Office sought	Office held	_
	ATTACH ADDIT	IONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	_

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Others (actions extensions thirted above)

Credit Card Payment	The Instruction Guide explains how to (complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 4 of 7	2 FILER NAME Mr Omar F Narvaez		3 Filer ID (Ethics Commission Filers)
4 Date 01/16/2019	5 Payee name Act Blue		
6 Amount (\$) 41.49	7 Payee address; City; State; Zip Code P.O. Box 441146 Somerville, MA 02144		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 01/23/2019	Payee name Act Blue		
Amount (\$) 28.73	Payee address; City; State; Zip Code P.O. Box 441146 Somerville, MA 02144		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 01/30/2019	Payee name Act Blue		
Amount (\$) 15.81	Payee address; City; State; Zip Code P.O. Box 441146 Somerville, MA 02144		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to	complete this form.	outer (onter a dategory not noted above)
1 Total pages Schedule F1: 5 of 7		·	3 Filer ID (Ethics Commission Filers)
4 Date 02/06/2019	5 Payee name Act Blue		
6 Amount (\$) 72.09	7 Payee address; City; State; Zip Code P.O. Box 441146 Somerville, MA 02144		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 02/13/2019	Payee name Act Blue		
Amount (\$) 132.75	Payee address; City; State; Zip Code P.O. Box 441146 Somerville, MA 02144		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 02/20/2019	Payee name Act Blue		
Amount (\$) 54.40	Payee address; City; State; Zip Code P.O. Box 441146 Somerville, MA 02144		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District

Credit Card Payment	The Instruction Guide explains how to o	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 6 of 7	2 FILER NAME Mr Omar F Narvaez		3 Filer ID (Ethics Commission Filers)
4 Date 02/27/2019	5 Payee name Act Blue		
6 Amount (\$) 27.79	7 Payee address; City; State; Zip Code P.O. Box 441146 Somerville, MA 02144		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/Oł	Candidate / Officeholder name	Office sought	Office held
Date 03/13/2019	Payee name Act Blue		
Amount (\$) 79.00	Payee address; City; State; Zip Code P.O. Box 441146 Somerville, MA 02144		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 03/20/2019	Payee name Act Blue		
Amount (\$) 66.61	Payee address; City; State; Zip Code P.O. Box 441146 Somerville, MA 02144		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		ntside of Texas. Complete Schedule T.
Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 7 of 7	2 FILER NAME Mr Omar F Narvaez	3 Filer ID (Ethics Commission Filers)
4 Date 02/18/2019	5 Payee name Home Depot	,
6 Amount (\$) 415.37	7 Payee address; City; State; Zip Code 2610 Fort Worth Ave Dallas, TX 75211	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Supplies
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held
Date 02/25/2019	Payee name Robert Rojas	
Amount (\$) 685.35	Payee address; City; State; Zip Code 3915 Main Dallas, TX 75226	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense T-shirts
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held
Date 03/12/2019	Payee name Robert Rojas	
Amount (\$) 185.78	Payee address; City; State; Zip Code 3915 Main Dallas, TX 75226	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense T-shirts
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED