City Secretary's Office

Supplement Officeholder	tal Report		FOR Cover She	MSR etSR
1. CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr	FIRST MI Omar F	Total Pages Filed: 15	
	NICKNAME	LAST SUFFIX Narvaez	3. Office Held	
4. SUPPLEMENTAL REPORT TYPE	c January 15	c 30th day before election c Runoff	c 15th day after camp treasurer appointme (officeholder only)	
	💢 July 15	c 8th day before election c Exceeded \$500 limit	c Final Report	
5. PERIOD / COVERED		4/25/2019 THROUGH 6/30/2019		
6. ELECTION	Month Day Year			
		c Primary c Runoff $oldsymbol{X}$ (General c Spe	cial c N/A
7. OFFICE- HOLDER	CONTRIBUTION TOTALS	1. TOTAL OFFICEHOLDER CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED \$0.00		\$ 0.00
_		2. TOTAL OFFICEHOLDER CONTRIBUTIONS OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$0.00		
	EXPENDITURE	3. TOTAL OFFICEHOLDER EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$0.00		\$ 0.00
	TOTALS	4. TOTAL OFFICEHOLDER EXPENDITURES		\$ 388.14
8. POLITICAL	CONTRIBUTION TOTALS	5. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	•	\$0.00
(Campaign)		6. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LO	DANS)	\$ 3,387.00
	EXPENDITURE	7. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS UNLESS ITEMIZED		\$ 3,245.47
	TOTALS			\$ 30691.55
9. OFFICEHOLDER FUN FOR CAMPAIGN PUR		9. TOTAL DOLLAR AMOUNT OF OFFICEHOLDER CONTRIE CAMPAIGN EXPEND TURES DURING THE REPORTING PE		\$ 0.00
10. AFFIDAVIT		I swear, or affirm, under penalty of perj is true and correct and includes all infor me under Title 15, Election code.	,	J 0 .
		ELECTRONICALLY CI	ERTIFIED	
AFFIX NOTARY STAMP / SEAL ABOVE Signature of Candidate or Officeholder				
Sworn to and subscribed	before me, by the said Mr O	mar F Narvaez	this the15th	day
of July , 2	0_19, to certify which	, witness my hand and seal of office.		
Signature of officer ad	Iministering eath	Printed name of officer administering oath	Title of officer add	ministering oath

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 1 of 2
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 (\$)
04/30/2019	Donna Rauch	10.00
Campaign	6 Contributor address; City; State; Zip Code	
Contribution	2140 21st. Street Astoria, NY 11105	
8 Principal occu	pation / Job title (See Instructions) 9 Employer (See Instructions)	tructions)
Date	Full name of contributor	Amount of contribution (\$)
05/02/2019	Flora Hernandez	300.00
Campaign	Contributor address; City; State; Zip Code	
Contribution	6042 Prestonshire Lane Dallas, TX 75225	
Principal occup	pation / Job title (See Instructions) Employer (See Instructions)	tructions)
Date	Full name of contributor) Amount of contribution (\$)
05/02/2019	Eileen Vallejo	100.00
Campaign Contribution	Contributor address; City; State; Zip Code 2803 Rushwood Dr Augusta, KS 67010	
Principal occup	pation / Job title (See Instructions) Employer (See Instructions)	tructions)
Date 05/02/2019	Full name of contributor out-of-state PAC (ID#:	_) Amount of contribution (\$) 300.00
Campaign Contribution	Contributor address; City; State; Zip Code 5411 Monticello Avenue Dallas, TX 75206	
Principal occup	pation / Job title (See Instructions) Employer (See Instructions)	tructions)

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

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 2 of 2
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 (\$)
05/03/2019	Deborah Carpenter	50.00
Campaign	6 Contributor address; City; State; Zip Code	
Contribution	2009 Neal Dallas, TX 75208	
8 Principal occu	pation / Job title (See Instructions) 9 Employer	(See Instructions)
Date	Full name of contributor	Amount of contribution (\$)
05/03/2019	William Weinberg	100.00
Campaign	Contributor address; City; State; Zip Code	
Contribution	2349 Allen Street Dallas, TX 75204	
Principal occup	pation / Job title (See Instructions) Employer	(See Instructions)
Date	Full name of contributor	Amount of contribution (\$)
05/18/2019	Lee Daugherty	27.00
Campaign Contribution	Contributor address; City; State; Zip Code 4123 Cedar Springs Rd. Dallas, TX 75219	
Principal occup	pation / Job title (See Instructions) Employer	(See Instructions)
Date	Full name of contributor) Amount of contribution (\$)
05/08/2019	Apartment Association of Greater Dallas PAC	2500.00
Campaign Contribution	Contributor address; City; State; Zip Code 5728 LBJ Freeway Suite 100 Dallas, TX 75240	
Principal occu	pation / Job title (See Instructions) 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.

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 1 of 12	2 FILER NAME Mr Omar F Narvaez		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
04/26/2019	Lora Ramirez		
6 Amount (\$) 150.00 Campaign Funds for	7 Payee address; City; State; Zip Code 2639 Ingersoll Dallas, TX 75212		
Campaign Expenditures	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
8			utside of Texas. Complete Schedule T.
PURPOSE OF	Polling Expense		, TX, officeholder living expense
EXPENDITURE		Polling	,,
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
04/26/2019	Venton Jones-Hill		
Amount (\$) 750.00	Payee address; City; State; Zip Code		
Campaign Funds for	1611 Stella Dallas, TX 75216		
Campaign Expenditures			
PURPOSE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Check if travel out	tside of Texas. Complete Schedule T.
OF EXPENDITURE	Consuming Expense	Consulting	, TX, officeholder living expense
OF	Candidate / Officeholder name		TX, officeholder living expense Office held
OF EXPENDITURE Complete ONLY if direct	Candidate / Officeholder name	Consulting	
OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Consulting	
OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Consulting	
OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 04/26/2019	Candidate / Officeholder name Payee name Jayzmine Lyons Payee address; City; State; Zip Code	Consulting	
OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 04/26/2019 Amount (\$) 360.00	Candidate / Officeholder name Payee name Jayzmine Lyons	Consulting	
OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 04/26/2019	Candidate / Officeholder name Payee name Jayzmine Lyons Payee address; City; State; Zip Code	Consulting	
OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 04/26/2019 Amount (\$) 360.00 Campaign Funds for	Candidate / Officeholder name Payee name Jayzmine Lyons Payee address; City; State; Zip Code	Consulting	
OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 04/26/2019 Amount (\$) 360.00 Campaign Funds for Campaign Expenditures	Candidate / Officeholder name Payee name Jayzmine Lyons Payee address; City; State; Zip Code 3636 Redbird Lane Dallas, TX 75237	Office sought Description	
OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 04/26/2019 Amount (\$) 360.00 Campaign Funds for Campaign Expenditures	Candidate / Officeholder name Payee name Jayzmine Lyons Payee address; City; State; Zip Code 3636 Redbird Lane Dallas, TX 75237 Category (See Categories listed at the top of this schedule)	Office sought Description Check if travel ou	Office held
OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 04/26/2019 Amount (\$) 360.00 Campaign Funds for Campaign Expenditures PURPOSE OF	Candidate / Officeholder name Payee name Jayzmine Lyons Payee address; City; State; Zip Code 3636 Redbird Lane Dallas, TX 75237 Category (See Categories listed at the top of this schedule)	Office sought Description Check if travel ou	Office held tside of Texas. Complete Schedule T.
OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 04/26/2019 Amount (\$) 360.00 Campaign Funds for Campaign Expenditures PURPOSE OF EXPENDITURE	Candidate / Officeholder name Payee name Jayzmine Lyons Payee address; City; State; Zip Code 3636 Redbird Lane Dallas, TX 75237 Category (See Categories listed at the top of this schedule) Consulting Expense	Office sought Description Check if travel ou Check if Austin Consulting	Office held tside of Texas. Complete Schedule T. TX, officeholder living expense
OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 04/26/2019 Amount (\$) 360.00 Campaign Funds for Campaign Expenditures PURPOSE OF	Candidate / Officeholder name Payee name Jayzmine Lyons Payee address; City; State; Zip Code 3636 Redbird Lane Dallas, TX 75237 Category (See Categories listed at the top of this schedule) Consulting Expense Candidate / Officeholder name	Office sought Office sought Description Check if travel ou Check if Austin	Office held tside of Texas. Complete Schedule T.

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to d	complete this form.	Other (enter a category not instead above)
1 Total pages Schedule F1: 2 of 12	2 FILER NAME Mr Omar F Narvaez		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
04/26/2019	Billy Lyons		
6 Amount (\$) 360.00 Campaign Funds for Campaign Expenditures	7 Payee address; City; State; Zip Code 3636 Redbird Dallas, TX 75237		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Consulting Expense	Check if travel ou	utside of Texas. Complete Schedule T.
OF EXPENDITURE	Consulting Expense	Check if Austin	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
04/26/2019	Brent Taylor		
Amount (\$) 800.00	Payee address; City; State; Zip Code		
Campaign Funds for Campaign Expenditures	3321 Alabama Dallas, TX 75216		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense		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	Payee name		
04/26/2019	Jesse Hernandez		
Amount (\$) 250.00	Payee address; City; State; Zip Code 1611 Gallagher Dallas, TX 75212		
Campaign Funds for Campaign Expenditures	Torr Ganagner Danas, 1A 73212		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF	Consulting Expense		tside of Texas. Complete Schedule T.
EXPENDITURE		Consulting	, 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	SCHEDIII E VS NEE	-DED

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

Carididate/Officerfolder/Politica	-	ction Guide explains how to	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 3 of 12	2 FILER NAME Mr Omar F Narvaez			3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name			I
04/26/2019	Paula Tprrez			
6 Amount (\$) 200.00 Campaign Funds for Campaign Expenditures	7 Payee address; 3320 Morris	City; State; Zip Code Dallas, TX 75212		
8	(a) Category (See Categorie	s listed at the top of this schedule)	(b) Description	
PURPOSE		- · · · · · · · · · · · · · · · · · · ·		utside of Texas. Complete Schedule T.
OF	Consulting Expense		Check if Austin	n, TX, officeholder living expense
EXPENDITURE			Consulting	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeho	older name	Office sought	Office held
Date	Payee name			
05/06/2019	Eric Rodriguez			
Amount (\$) 75.00	Payee address;	City; State; Zip Code		
Campaign Funds for	3531 Furey	Dallas, TX 75212		
Campaign Expenditures				
PURPOSE OF EXPENDITURE	Category (See Categorie 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/OF	Candidate / Officeho	older name	Office sought	Office held
Date	Payee name			
05/06/2019	Venton Jones Hill			
Amount (\$) 1500.00	Payee address;	City; State; Zip Code		
Campaign Funds for	1611 Stella	Dallas, TX 75216		
Campaign Expenditures				
	Category (See Categorie	s listed at the top of this schedule)	Description	
PURPOSE	Consulting Expense		Check if travel ou	tside of Texas. Complete Schedule T.
OF EXPENDITURE			Check if Austin	, TX, officeholder living expense
_			Consulting	
Complete ONLY if direct	Candidate / Officeh	older name	Office sought	Office held
expenditure to benefit C/OF		5.55. Hamo	Since Sought	Since new
	ATTACH ADDI	TIONAL 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 Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Carididate/Officerfolder/Politica	The Instruction Guide explains how to d	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 4 of 12	2 FILER NAME Mr Omar F Narvaez		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
05/06/2019	Brent Taylor		
6 Amount (\$) 350.00 Campaign Funds for Campaign Expenditures	7 Payee address; City; State; Zip Code 3321 Alabama Dallas, TX 75216		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE		1	utside of Texas. Complete Schedule T.
OF	Consulting Expense	Check if Austin	ı, TX, officeholder living expense
EXPENDITURE		Consulting	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
04/29/2019	DFW Mail Today		
Amount (\$)	Payee address; City; State; Zip Code		
1819.36	8505 Chancellor Suite CDallas, TX 75247		
Campaign Funds for Campaign Expenditures			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		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	Payee name		
0.4/20/2010	W. N. D. J.		
04/29/2019	Walls Printin		
Amount (\$) 2742.89	Payee address; City; State; Zip Code 9271 King Arthur Dallas, TX 75247		
Campaign Funds for	2 mm, 112 / 62 / /		
Campaign Expenditures		1	
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF	Advertising Expense		tside of Texas. Complete Schedule T.
EXPENDITURE		Mail Check if Austin,	, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Office sought	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al Committee 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: 5 of 12	2 FILER NAME Mr Omar F Narvaez	3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	-
05/01/2019	Scott Griggs Campaign	
6 Amount (\$) 2500.00	7 Payee address; City; State; Zip Code P.O. Box 22716 Dallas, TX 75222	
Campaign Funds for Campaign Expenditures		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description
PURPOSE	Contributions/Donations Made By	Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE	Candidate/Officeholder/Political Committee	Check if Austin, TX, officeholder living expense
EXI ENDITORE		Donation
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
05/04/2019	Trees	
Amount (\$) 500.00	Payee address; City; State; Zip Code 2709 Elm Dallas, TX 75226	
Campaign Funds for Campaign Expenditures		
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE OF	Event Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin, TX, officeholder living expense
		Food and drinks
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
05/06/2019	Scott Griggs Campaign	
Amount (\$) 2500.00	Payee address; City; State; Zip Code	
Campaign Funds for	P.O. Box 22716 Dallas, TX 75222	
Campaign Expenditures		
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE	Contributions/Donations Made By	Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE	Candidate/Officeholder/Political Committee	Check if Austin, TX, officeholder living expense
EX ENDITORE		Donation
	0 511 / 055 1 11	0//
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS	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

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

Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/N The Instruction Guide explains how to 0	Wages/Contract Labor Other (enter a category not listed above) complete this form.
1 Total pages Schedule F1: 6 of 12	2 FILER NAME Mr Omar F Narvaez	3 Filer ID (Ethics Commission Filers)
4 Date 05/04/2019	5 Payee name Philip Kingston Campaign	
6 Amount (\$) 1000.00 Campaign Funds for Campaign Expenditures	7 Payee address; City; State; Zip Code 5901 Palo Pinto Dallas, TX 75206	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
05/03/2019 Amount (\$) 1000.00 Campaign Funds for Campaign Expenditures	Scott Griggs Campaign Payee address; City; State; Zip Code P.O. Box 22716 Dallas, TX 75222	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	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 05/09/2019	Payee name Venton Jones	
Amount (\$) 1000.00 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code Dallas, TX 75216	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS	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 Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to d	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 7 of 12	2 FILER NAME Mr Omar F Narvaez		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
05/09/2019	Brent Taylor		
6 Amount (\$) 500.00 Campaign Funds for Campaign Expenditures	7 Payee address; City; State; Zip Code 3321 Alabama Dallas, TX 75216		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Consulting Expense	Check if travel ou	utside of Texas. Complete Schedule T.
OF EXPENDITURE		Consulting	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
05/30/2019	Chad West Campaign		
Amount (\$) 250.00	Payee address; City; State; Zip Code		
Campaign Funds for Campaign Expenditures	3606 S Tyler Dallas, TX 75224		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		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	Payee name		
06/08/2019	Longhorn Ballroom		
Amount (\$) 500.00	Payee address; City; State; Zip Code 216 Corinth Dallas, TX 75207		
Campaign Funds for Campaign Expenditures	Zio Commi Danas, 17(1320)		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF	Event Expense		tside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin	, 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

Candidate/Officeholder/Politica	al Committee 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: 8 of 12	2 FILER NAME Mr Omar F Narvaez		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
06/14/2019	Walls Printing		
6 Amount (\$) 527.18	7 Payee address; City; State; Zip Code 9721 King Arthur Dallas, TX 75247		
Campaign Funds for Campaign Expenditures			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Advertising Expense		utside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin	n, TX, officeholder living expense
		Printing	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
06/17/2019	Artstillery		
Amount (\$)	Payee address; City; State; Zip Code		
250.00 Compaign Funds for	723 Fort Worth Dallas, TX 75208		
Campaign Funds for Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Contributions/Donations Made By	Check if travel out	tside of Texas. Complete Schedule T.
OF EXPENDITURE	Candidate/Officeholder/Political Committee	Check if Austin	, TX, officeholder living expense
		Donation	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
05/10/2019	Intocable 27 Consulting		
Amount (\$) 1000.00	Payee address; City; State; Zip Code 4250 Harpers Ferry Dr Grand Prairie, TX 75052		
Campaign Funds for	4230 Harpers Ferry Dr. Grand Frame, 1A 73032		
Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Consulting Expense	Check if travel ou	tside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin	, TX, officeholder living expense
		Consulting	
Complete ONLY 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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (enter a category not isseed above)
1 Total pages Schedule F1: 9 of 12	2 FILER NAME Mr Omar F Narvaez		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
05/03/2019	Jesse Hernandez		
6 Amount (\$) 397.50 Campaign Funds for Campaign Expenditures	7 Payee address; City; State; Zip Code 1611 Gallagher Dallas, TX 75212		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Consulting Expense	Check if travel or	utside of Texas. Complete Schedule T.
OF EXPENDITURE		Consulting	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
05/09/2019	Sarah White		
Amount (\$) 590.00	Payee address; City; State; Zip Code		
Campaign Funds for Campaign Expenditures	3321 Alabama Dallas, TX 75216		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense		atside of Texas. Complete Schedule T. 1, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
05/09/2019	Enrique Rodriguez		
Amount (\$) 625.00	Payee address; City; State; Zip Code 4002 Odessa Dallas, TX 75212		
Campaign Funds for Campaign Expenditures	4002 Odessa Ballas, 1X 73212		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Consulting Expense		utside of Texas. Complete Schedule T.
OF EXPENDITURE		Consulting	n, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OF	1		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Credit Card Payment	The Instruction Guide explains how to d	complete this form.	Other (enter a category not listed above)		
1 Total pages Schedule F1: 10 of 12	2 FILER NAME Mr Omar F Narvaez		3 Filer ID (Ethics Commission Filers)		
4 Date	5 Payee name				
05/03/2019	Jazmyne Lyons				
6 Amount (\$) 480.00 Campaign Funds for Campaign Expenditures	7 Payee address; City; State; Zip Code 3636 Redbird Dallas, TX 75237				
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description			
PURPOSE	Consulting Expense	Check if travel ou	utside of Texas. Complete Schedule T.		
OF EXPENDITURE		Consulting	n, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held		
Date	Payee name				
05/09/2019	Billy Lyons				
Amount (\$) 590.00	Payee address; City; State; Zip Code				
Campaign Funds for Campaign Expenditures	3636 Redbird Dallas, TX 75237				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Consulting			
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held		
Date	Payee name				
05/03/2019	Lora Ramirez				
Amount (\$) 202.50	Payee address; City; State; Zip Code 2639 Ingersoll Dallas, TX 75212				
Campaign Funds for Campaign Expenditures	2037 Higeison Danas, 174 73212				
	Category (See Categories listed at the top of this schedule)	Description			
PURPOSE OF	Polling Expense	Check if travel outside of Texas. Complete Schedule T.			
EXPENDITURE		Polling	, 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 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 Other (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to o	complete this form.	outer (outer a satisfier) not noted assister,		
1 Total pages Schedule F1:	<u> </u>	-	3 Filer ID (Ethics Commission Filers)		
4 Date 04/26/2019	5 Payee name K&R Graphics				
6 Amount (\$) 2752.34 Campaign Funds for Campaign Expenditures	7 Payee address; City; State; Zip Code 3915 Main Dallas, TX 75226				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		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	Payee name				
05/04/2019 Amount (\$) 338.47 Campaign Funds for Campaign Expenditures	Whataburger Payee address; City; State; Zip Code 2741 N Stemmons Dallas, TX 75207				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Food			
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held		
Date 05/03/2019	Payee name Kroger				
Amount (\$) 278.34 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 4901 Maple Dallas, TX 75235				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		ntside of Texas. Complete Schedule T.		
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held		
ATTACH ADDITIONAL COPIES OF THIS 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 Gilt/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 a	complete this form.	Other (enter a category not listed above)		
1 Total pages Schedule F1: 12 of 12	2 FILER NAME Mr Omar F Narvaez		3 Filer ID (Ethics Commission Filers)		
4 Date	5 Payee name				
04/26/2019	Home Depot				
6 Amount (\$) 388.14	7 Payee address; City; State; Zip Code 2610 Fort Worth Dallas, TX 75211				
Officeholder Funds for Officeholder Expenditures					
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description			
PURPOSE	Advertising Expense		itside of Texas. Complete Schedule T.		
OF EXPENDITURE		Check if Austin	, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held		
Date	Payee name				
05/09/2019	Jacob Ramos				
Amount (\$)	Payee address; City; State; Zip Code				
307.50	3210 Topeka Dallas, TX 75212				
Campaign Funds for Campaign Expenditures	_	T			
	Category (See Categories listed at the top of this schedule)	Description			
PURPOSE OF	Consulting Expense		tside of Texas. Complete Schedule T.		
EXPENDITURE			, TX, officeholder living expense		
		Consulting			
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held		
Date	Payee name				
Amount (\$)	Payee address; City; State; Zip Code				
	Category (See Categories listed at the top of this schedule)	Description			
PURPOSE		Check if travel out	tside of Texas. Complete Schedule T.		
OF EXPENDITURE		Check if Austin	, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					