

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 1

| | | | | | | | | | | | |
|---|---|---|--|--|---|---------------------------------|--|----------------------------------|--|--|--|
| The JC/OH Instruction Guide explains how to complete this form. | | 1 Filer ID (Ethics Commission Filers) 00081747 | 2 Total pages filed: 26 | | | | | | | | |
| 3 CANDIDATE / OFFICEHOLDER NAME | MS / MRS / MR FIRST MI The Honorable Danilo | | OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/15/2026 | | | | | | | | |
| | NICKNAME LAST SUFFIX Danny Lacayo | | | | | | | | | | |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE <div style="background-color: black; color: white; text-align: center; padding: 5px;"> REDACTED PER 254.0313, GOV'T CODE </div> | | Date Hand-delivered or Date Postmarked | | | | | | | | |
| | | | Receipt # Amount | | | | | | | | |
| | | | Date Processed | | | | | | | | |
| | | | Date Imaged | | | | | | | | |
| 5 CAMPAIGN TREASURER NAME | MS / MRS / MR FIRST MI Ms. Savannah | | | | | | | | | | |
| | NICKNAME LAST SUFFIX Luna | | | | | | | | | | |
| 6 CAMPAIGN TREASURER ADDRESS (Residence or Business) | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <div style="background-color: black; color: white; text-align: center; padding: 5px;"> REDACTED PER 254.0313, GOV'T CODE </div> | | | | | | | | | | |
| | | | | | | | | | | | |
| 7 CAMPAIGN TREASURER PHONE | AREA CODE PHONE NUMBER EXTENSION (832) 253-7300 | | | | | | | | | | |
| 8 REPORT TYPE | <table style="width: 100%;"> <tr> <td><input checked="" type="checkbox"/> January 15</td> <td><input type="checkbox"/> 30th day before election</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)</td> </tr> <tr> <td><input type="checkbox"/> July 15</td> <td><input type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> Exceeded modified reporting limit</td> <td><input type="checkbox"/> Final Report (Attach C/OH-FR)</td> </tr> </table> | | | <input checked="" 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 type="checkbox"/> 8th day before election | <input type="checkbox"/> Exceeded modified reporting limit | <input type="checkbox"/> Final Report (Attach C/OH-FR) |
| <input checked="" 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 type="checkbox"/> 8th day before election | <input type="checkbox"/> Exceeded modified reporting limit | <input type="checkbox"/> Final Report (Attach C/OH-FR) | | | | | | | | |
| 9 PERIOD COVERED | Month Day Year Month Day Year 07/01/2025 THROUGH 12/31/2025 | | | | | | | | | | |
| 10 ELECTION | ELECTION DATE Month Day Year 03/03/2026 | | ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special | | | | | | | | |
| | | | | | | | | | | | |
| 11 OFFICE | OFFICE HELD (if any) Criminal District Court Judge District 182 Harris | | 12 OFFICE SOUGHT (if known) District Judge District 182 | | | | | | | | |

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH
COVER SHEET PG 2

2 of 26

| | |
|--|---|
| 13 C / OH NAME Lacayo, Danilo (The Honorable) | 14 Filer ID (Ethics Commission Filers) 00081747 |
|--|---|

| | | |
|---|--|--------------------------|
| 15 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. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures. | |
| | COMMITTEE TYPE | COMMITTEE NAME |
| | <input type="checkbox"/> GENERAL | COMMITTEE ADDRESS |
| | <input type="checkbox"/> SPECIFIC | |
| | COMMITTEE CAMPAIGN TREASURER NAME | |
| | COMMITTEE CAMPAIGN TREASURER ADDRESS | |

| | | |
|--------------------------------|--|--------------|
| 16 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) | \$ 26,753.00 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | \$ 0.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ 5,382.00 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 19,178.00 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 0.00 |

17 AFFIDAVIT

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.

The Honorable Danilo Lacayo

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

SUBTOTALS - JC/OH

FORM JC/OH
COVER SHEET PG 3

3 of 26

| | | | |
|--|---|--------------------------------|----------------------------|
| 18 FILER NAME Lacayo, Danilo (The Honorable) | | 19 Filer ID 00081747 | (Ethics Commission Filers) |
| 20 SCHEDULE SUBTOTALS NAME OF SCHEDULE | | | SUBTOTAL AMOUNT |
| 1. | <input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL) | \$ | 24,260.00 |
| 2. | <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ | 2,493.00 |
| 3. | <input checked="" type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL) | \$ | 0.00 |
| 4. | <input checked="" type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL) | \$ | 0.00 |
| 5. | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ | 5,382.00 |
| 6. | <input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ | 0.00 |
| 7. | <input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS | \$ | 0.00 |
| 8. | <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ | 0.00 |
| 9. | <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS | \$ | 0.00 |
| 10. | <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH | \$ | |
| 11. | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ | |
| 12. | <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 1/10 Rpt: 4/26 |
| 2 FILER NAME Lacayo, Danilo (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081747 |
| 4 Date 11/06/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aguirre, Juan (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77009 | 7 Amount of Contribution (\$) \$250.00 |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Law Office Of Juan Aguirre | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 11/06/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Akers, Cordt (Mr.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77018 | Amount of Contribution (\$) \$500.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm The Akers Firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 09/18/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bacy, Akilah (Mrs.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77243 | Amount of Contribution (\$) \$250.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Bacy Law, PLLC | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 2/10 Rpt: 5/26 |
| 2 FILER NAME Lacayo, Danilo (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081747 |
| 4 Date 11/07/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Antoy (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77004 | 7 Amount of Contribution (\$) \$100.00 |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Johnson Bell Law Firm | | 11 Law firm of contributor's spouse (if any) Harris County/State of Texas |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 09/10/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corral, Adam (Mr.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77223 | Amount of Contribution (\$) \$5,000.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm The Corral law Firm PLLC | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 11/06/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cortes, Eddie (Mr.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77076 | Amount of Contribution (\$) \$250.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Cortes Law | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 3/10 Rpt: 6/26 |
| 2 FILER NAME Lacayo, Danilo (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081747 |
| 4 Date 12/07/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dupont, Todd (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77008 | 7 Amount of Contribution (\$) <div style="text-align: right;">\$1,000.00</div> |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Harris County District Attorney's Office | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 11/03/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Marco (Mr.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77087 | Amount of Contribution (\$) <div style="text-align: right;">\$500.00</div> |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Managing Partner |
| Contributor's employer/law firm The Gonzalez Law Group | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 11/03/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, Christopher (Mr.) <hr/> Contributor address; City; State; Zip Code Bellaire, TX 77401 | Amount of Contribution (\$) <div style="text-align: right;">\$1,000.00</div> |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Law Office of Henderson and Hall | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 4/10 Rpt: 7/26 |
| 2 FILER NAME Lacayo, Danilo (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081747 |
| 4 Date 11/06/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jewett, Terrance (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77096 | 7 Amount of Contribution (\$) \$250.00 |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Jewett Legal Group | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 11/06/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keiter, Justin (Mr.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77002 | Amount of Contribution (\$) \$2,000.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm The Keiter Law Firm PLLC | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 11/06/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luna, Ruben (Mr.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77064 | Amount of Contribution (\$) \$300.00 |
| Contributor's Principal Occupation Retired HPD Police Office | | Contributor's Job Title Retired Police Office |
| Contributor's employer/law firm Retired HPD | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 5/10 Rpt: 8/26 |
| 2 FILER NAME Lacayo, Danilo (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081747 |
| 4 Date 10/14/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luna, Savannah (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77079 | 7 Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$10.00</div> |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Maverick Ray Law | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 11/06/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Macerola, Gianpaolo (Mr.) <hr/> Contributor address; City; State; Zip Code Cypress, TX 77433 | Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$2,500.00</div> |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Macerola, PLLC | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 11/07/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCann, Patrick (Mr.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77002 | Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$250.00</div> |
| Contributor's Principal Occupation Lawyer | | Contributor's Job Title Lawyer |
| Contributor's employer/law firm Self | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|--|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 6/10 Rpt: 9/26 |
| 2 FILER NAME Lacayo, Danilo (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081747 |
| 4 Date 11/06/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Milledge, Samuel (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77003 | 7 Amount of Contribution (\$) \$100.00 |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm The Milledge Law Group | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 11/04/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muldrow, Adam (Mr.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77005 | Amount of Contribution (\$) \$500.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Muldrow Law Firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/15/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newman, Murray (Mr.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77008 | Amount of Contribution (\$) \$500.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm The Law Office of Murray Newman, PLLC | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 7/10 Rpt: 10/26 |
| 2 FILER NAME Lacayo, Danilo (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081747 |
| 4 Date 11/06/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parrish, Damon (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77054 | 7 Amount of Contribution (\$) \$250.00 |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Parrish Law | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 11/15/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyes, George (Mr.) <hr/> Contributor address; City; State; Zip Code Seabrook, TX 77586 | Amount of Contribution (\$) \$300.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Self | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 11/06/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saldana, Aaron (Mr.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77048 | Amount of Contribution (\$) \$250.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Aaron Saldana DBA | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 8/10 Rpt: 11/26 |
| 2 FILER NAME Lacayo, Danilo (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081747 |
| 4 Date 11/07/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siegler, Kelly (Mrs.) <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77004 | 7 Amount of Contribution (\$) \$1,000.00 |
| 8 Contributor's Principal Occupation Lawyer | | 9 Contributor's Job Title Lawyer |
| 10 Contributor's employer/law firm Self | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 11/06/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, David (Mr.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77007 | Amount of Contribution (\$) \$100.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm self employed | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 11/04/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tanner, Allen (Mr.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77002 | Amount of Contribution (\$) \$2,000.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Law Office of Allen Tanner | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 9/10 Rpt: 12/26 |
| 2 FILER NAME Lacayo, Danilo (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081747 |
| 4 Date 11/06/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomason , Rene (Mrs.) <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77057 | 7 Amount of Contribution (\$) \$250.00 |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm The Thomason Law Firm | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 11/06/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Varela, Jacky (Mrs.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77008 | Amount of Contribution (\$) \$100.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Varela Legal | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/15/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vela, Jonathan (Mr.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77002 | Amount of Contribution (\$) \$1,000.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Jonathan Vela Law | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 10/10 Rpt: 13/26 |
| 2 FILER NAME Lacayo, Danilo (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081747 |
| 4 Date 11/06/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vela, Jose (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77002 | 7 Amount of Contribution (\$) \$3,500.00 |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Self employed | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 11/06/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Mekisha (Mrs.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77002 | Amount of Contribution (\$) \$250.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Walker Law Office | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

| | | | | | |
|--|---|---|--|--|--|
| The Instruction Guide explains how to complete this form. | | | | 1 Total pages Schedule A2: Sch: 1/1 Rpt: 14/26 | |
| 2 FILER NAME Lacayo, Danilo (The Honorable) | | | | 3 Filer ID (Ethics Commission Filers) 00081747 | |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS | | | | \$ | |
| 5 Date 11/06/2025 | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loper, Brad (Mr.) | 8 Amount of contribution (\$) \$831.00 | 9 In-kind contribution description Patterson Park re election fundraiser. total bill \$2493.25 divided by 3 sponsors | | |
| 7 Contributor address; City; State; Zip Code Houston, TX 77008 | | <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) Attorney | | | 13 Contributor's job title (FOR JUDICIAL) (See instructions) Attorney | | |
| 14 Contributor's employer/law firm (FOR JUDICIAL) Loper Law | | | 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) | | | | | |
| Date 11/06/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rucker, Wes (Mr.) | Amount of contribution (\$) \$831.00 | In-kind contribution description Patterson park venue re-elect Lacayo; total bill \$2,493.25 divided by 3 sponsors | | |
| Contributor address; City; State; Zip Code Houston, TX 77007 | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | | |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) | | | Employer (FOR NON-JUDICIAL) (See instructions) | | |
| Contributor's principal occupation (FOR JUDICIAL) Attorney | | | Contributor's job title (FOR JUDICIAL) (See instructions) Attorney | | |
| Contributor's employer/law firm (FOR JUDICIAL) Wes Rucker Law | | | Law firm of contributor's spouse (if any) (FOR JUDICIAL) | | |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | | | |
| Date 11/06/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephenson, John (Mr.) | Amount of contribution (\$) \$831.00 | In-kind contribution description Patterson Park fundraiser for re-election total bill \$2,493.26 divided by 3 sponsors totaling \$831 | | |
| Contributor address; City; State; Zip Code Houston, TX 77008 | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | | |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) | | | Employer (FOR NON-JUDICIAL) (See instructions) | | |
| Contributor's principal occupation (FOR JUDICIAL) Attorney | | | Contributor's job title (FOR JUDICIAL) (See instructions) Attorney | | |
| Contributor's employer/law firm (FOR JUDICIAL) self employed | | | Law firm of contributor's spouse (if any) (FOR JUDICIAL) | | |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | | | |

PLEDGED CONTRIBUTIONS (JUDICIAL)

SCHEDULE B(J)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B(J):
Sch: 1/1 Rpt: 15/26

2 FILER NAME
Lacayo, Danilo (The Honorable)

3 Filer ID (Ethics Commission Filers)
00081747

4 TOTAL OF UNITEMIZED PLEDGES

\$ 0.00

5 Date

6 Full name of pledgor ☐ out-of-state PAC (ID#: _____)

8 Amount of
pledge (\$)

9 In-kind description
(If applicable)

7 Pledgor Address; City; State; Zip Code

☐ Check if travel outside of Texas. Complete Schedule T.

10 Pledgor's principal occupation

11 Pledgor's job title

12 Pledgor's employer/law firm

13 Law firm of pledgor's spouse (if any)

14 If pledgor is a child, law firm of parent(s) (if any)

LOANS (JUDICIAL)

SCHEDULE E(J)

| | | |
|--|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule E(J): Sch: 1/1 Rpt: 16/26 |
| 2 FILER NAME Lacayo, Danilo (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081747 |
| 4 TOTAL OF UNITEMIZED LOANS | | \$ 0.00 |
| 5 Date of loan | 7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) | 9 Loan Amount (\$) |
| 6 Is lender a financial institution? | 8 Lender address; City; State; Zip Code | 10 Interest Rate |
| | | 11 Maturity Date |
| 12 Lender's Principal Occupation | | 13 Lender's Job Title |
| 14 Lender's Employer/Law Firm | | 15 Law Firm of lender's spouse (if any) |
| 16 If lender is child, law firm of parent(s) (if any) | | |
| 17 Description of Collateral <input type="checkbox"/> None | | 18 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/> |
| 19 GUARANTOR INFORMATION <input type="checkbox"/> not applicable | 20 Name of guarantor | 22 Amount Guaranteed (\$) |
| | 21 Guarantor address; City; State; Zip Code | |
| 23 Guarantor's Principal Occupation | | 24 Guarantor's Job Title |
| 25 Guarantor's Employer/Law Firm | | 26 Law Firm of guarantor's spouse (if any) |
| 27 If guarantor is child, law firm of parent(s) (if any) | | |
| | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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)

The Instruction Guide explains how to complete this form.

| | | |
|---|--|---|
| 1 Total pages Schedule F1: Sch: 1/10 Rpt: 17/26 | 2 FILER NAME Lacayo, Danilo (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00081747 |
| 4 Date 10/20/2025 | 5 Payee name Fedex | |
| 6 Amount (\$) \$29.61 | 7 Payee address; City; State; Zip Code 12191 Katy Fwy Houston, TX 77079 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 3 transactions \$14.54, 14.58, and .49 cents Copies for petition for ballot requirements |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 11/24/2025 | Payee name Graces Restaurant | |
| Amount (\$) \$800.62 | Payee address; City; State; Zip Code 3111 Kirby Dr. Houston, TX 77098 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Thanksgiving lunch for staff and team building |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 11/06/2025 | Payee name HEB | |
| Amount (\$) \$297.99 | Payee address; City; State; Zip Code 4955 Beechnut St. Houston, TX 77096 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food for Fundraiser at Patterson Park |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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)

The Instruction Guide explains how to complete this form.

| | | |
|---|--|---|
| 1 Total pages Schedule F1: Sch: 2/10 Rpt: 18/26 | 2 FILER NAME Lacayo, Danilo (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00081747 |
| 4 Date 11/13/2025 | 5 Payee name HEB | |
| 6 Amount (\$) \$49.31 | 7 Payee address; City; State; Zip Code 4955 Beechnut St. Houston, TX 77096 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Coffee products for jurors |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 11/26/2025 | Payee name Harris County Democratic Party | |
| Amount (\$) \$2,515.00 | Payee address; City; State; Zip Code 3302 Canal St. Houston, TX 77003 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Filing fee for ballot for Danilo Lacayo 182nd Judicial District Court |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 12/24/2025 | Payee name Mia Bella | |
| Amount (\$) \$918.25 | Payee address; City; State; Zip Code 3773 Richmond Ave Houston, TX 77046 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Christmas lunch and team building |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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)

The Instruction Guide explains how to complete this form.

| | | |
|---|--|---|
| 1 Total pages Schedule F1: Sch: 3/10 Rpt: 19/26 | 2 FILER NAME Lacayo, Danilo (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00081747 |
| 4 Date 10/14/2025 | 5 Payee name Raise the Money | |
| 6 Amount (\$) \$0.74 | 7 Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing fees for donations online |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 11/06/2025 | Candidate/Officeholder name Payee name Raise the Money | |
| Amount (\$) \$12.50 | Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee for online campaign donation |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 11/06/2025 | Candidate/Officeholder name Payee name Raise the Money | |
| Amount (\$) \$24.75 | Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing fee for online donation |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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)

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 4/10 Rpt: 20/26 | 2 FILER NAME Lacayo, Danilo (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00081747 |
| 4 Date 11/07/2025 | 5 Payee name Raise the Money | |
| 6 Amount (\$) \$5.15 | 7 Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing fees for online donation |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 11/06/2025 | Candidate/Officeholder name Payee name Raise the Money | |
| Amount (\$) \$12.50 | Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing free for online campaign donation |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 12/07/2025 | Candidate/Officeholder name Payee name Raise the Money | |
| Amount (\$) \$57.24 | Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online processing fee for donations |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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)

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 5/10 Rpt: 21/26 | 2 FILER NAME Lacayo, Danilo (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00081747 |
| 4 Date 11/15/2025 | 5 Payee name Raise the Money | |
| 6 Amount (\$) \$14.95 | 7 Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee for online contributions |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 11/07/2025 | Candidate/Officeholder name Payee name Raise the Money | |
| Amount (\$) \$12.50 | Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fees for online political contributions |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 11/06/2025 | Candidate/Officeholder name Payee name Raise the Money | |
| Amount (\$) \$14.95 | Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing fees for online political donations |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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)

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 6/10 Rpt: 22/26 | 2 FILER NAME Lacayo, Danilo (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00081747 |
| 4 Date 11/06/2025 | 5 Payee name Raise the Money | |
| 6 Amount (\$) \$171.75 | 7 Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing fees for online political donations |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 11/06/2025 | Candidate/Officeholder name | Office sought |
| Amount (\$) \$5.15 | Payee name Raise the Money | Office held |
| Purpose of Expenditure | Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing fees for online political donations |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 11/06/2025 | Candidate/Officeholder name | Office sought |
| Amount (\$) \$12.50 | Payee name Raise the Money | Office held |
| Purpose of Expenditure | Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fees for online political donations |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 11/06/2025 | Candidate/Officeholder name | Office sought |
| Amount (\$) \$12.50 | Payee name Raise the Money | Office held |
| Purpose of Expenditure | Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fees for online political donations |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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)

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 7/10 Rpt: 23/26 | 2 FILER NAME Lacayo, Danilo (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00081747 |
| 4 Date 11/06/2025 | 5 Payee name Raise the Money | |
| 6 Amount (\$) \$12.50 | 7 Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fees for online political donations |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 11/06/2025 | Candidate/Officeholder name | Office sought |
| Payee name Raise the Money | Office held | |
| Amount (\$) \$5.15 | Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing fees from online political donations |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 11/06/2025 | Candidate/Officeholder name | Office sought |
| Payee name Raise the Money | Office held | |
| Amount (\$) \$12.50 | Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fees for online political donations |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 11/06/2025 | Candidate/Officeholder name | Office sought |
| Payee name Raise the Money | Office held | |
| Amount (\$) \$12.50 | Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fees for online political donations |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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)

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 8/10 Rpt: 24/26 | 2 FILER NAME Lacayo, Danilo (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00081747 |
| 4 Date 11/06/2025 | 5 Payee name Raise the Money | |
| 6 Amount (\$) \$12.50 | 7 Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fees for online political donations |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 11/06/2025 | Candidate/Officeholder name | Office sought |
| Payee name Raise the Money | Office held | |
| Amount (\$) \$122.75 | Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing fees for online political contributions |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 11/06/2025 | Candidate/Officeholder name | Office sought |
| Payee name Raise the Money | Office held | |
| Amount (\$) \$5.15 | Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fees for online political campaign donations |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 11/06/2025 | Candidate/Officeholder name | Office sought |
| Payee name Raise the Money | Office held | |
| Amount (\$) \$5.15 | Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fees for online political campaign donations |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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)

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 9/10 Rpt: 25/26 | 2 FILER NAME Lacayo, Danilo (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00081747 |
| 4 Date 11/04/2025 | 5 Payee name Raise the Money | |
| 6 Amount (\$) \$24.75 | 7 Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fees for online donations |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 11/03/2025 | Payee name Raise the Money | |
| Amount (\$) \$24.75 | Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fees for online political donations |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 10/15/2025 | Payee name Raise the Money | |
| Amount (\$) \$57.24 | Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fees for online political donations |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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)

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 10/10 Rpt: 26/26 | 2 FILER NAME Lacayo, Danilo (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00081747 |
| 4 Date 11/03/2025 | 5 Payee name Raise the Money | |
| 6 Amount (\$) \$49.25 | 7 Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fees for online political donations |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 10/19/2025 | Payee name Spring Branch Democrats | |
| Amount (\$) \$100.00 | Payee address; City; State; Zip Code P.O. Box 550161 Houston, TX 77255 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Democrat club sponsorship of event |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |