



**Official Public Records of
Harris County
Diane Trautman
County Clerk**

Campaign Finance Report



Diane Trautman

**COUNTY CLERK
HARRIS COUNTY, TEXAS**

FileNo: 201996
Received By Clerk: 1/15/2019
File Date: January 15, 2019
Office: County Judge
Candidate: Hidalgo, Lina
Treasurer: Pickett, G. Troy
Category: Contributions And Expenditures
Delivered By: Courier
Type: COR

Harris County No Fee

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

201996

The C/OH Instruction Guide explains how to complete this form.		1. Filer ID (Ethics Commission Filers)		2. Total pages filed: 64	
3 CANDIDATE/ OFFICEHOLDER NAME	MS/MRS/MR	FIRST	MI		OFFICE USE ONLY
	NICKNAME	LAST	SUFFIX		
		Lina			Date Received
		Hidalgo			Date Hand-delivered or Date Postmarked
4 CANDIDATE/ OFFICEHOLDER ADDRESS	ADDRESS /PO BOX:	APT/SUITE #	CITY	STATE:	ZIP CODE
	P. O. Box 88392		Houston	TX	77288
<input type="checkbox"/> Change of Address					
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		Receipt #
		(713) 898-4624			Amount \$
6 CAMPAIGN TREASURER NAME	MS/MRS/MR	FIRST	MI		Date Processed
	NICKNAME	LAST	SUFFIX		Date Imaged
		G. Troy			
		Pickett			
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS:	APT/SUITE #	CITY	STATE:	ZIP CODE
	2222 Bissonnet Street		Ste 203	Houston	TX
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		
		(713) 589-8692			
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15		<input type="checkbox"/> 30th day before election		<input type="checkbox"/> Runoff
	<input type="checkbox"/> July 15		<input type="checkbox"/> 8th day before election		<input type="checkbox"/> Exceeded \$500 limit
				<input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)	
				<input type="checkbox"/> Final report (Attach- COH-FR)	
10 PERIOD COVERED	Month	Day	Year	Month	Day
		10/28/2018		THROUGH	12/31/2018
11 ELECTION	ELECTION DATE		ELECTION TYPE		
	Month	Day	Year	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff
		11/06/2018		<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special
12 OFFICE	OFFICE HELD (if any)			13 OFFICE SOUGHT (if known)	
	Harris County Judge			N/A	
GO TO PAGE 2					

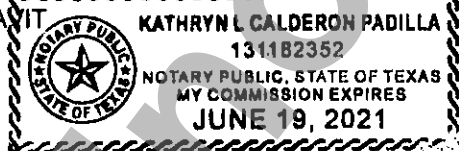
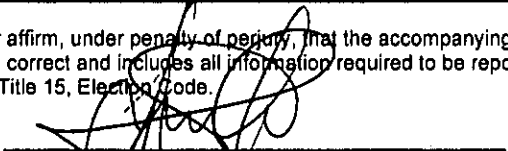
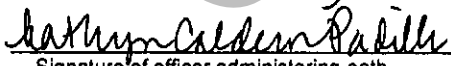
Page - 2

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

**FORM C/OH
COVER SHEET PG 2**

14 C/OH NAME	Lina Hidalgo	15 Filer ID (Ethics Commission Filers)
16 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> additional pages	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.	
	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME
	COMMITTEE ADDRESS	
	COMMITTEE CAMPAIGN TREASURER NAME	
COMMITTEE CAMPAIGN TREASURER ADDRESS		

17 CONTRIBUTION TOTALS	1 TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$500.00
EXPENDITURE TOTALS	2 TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$239,834.87
	3 TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$532.67
	4 TOTAL POLITICAL EXPENDITURES	\$161,503.92
CONTRIBUTION BALANCE	5 TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$51,836.17
OUTSTANDING LOAN TOTALS	6 TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$1,400.00

18 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.  _____ Signature of Candidate or Officeholder
AFFIX NOTARY STAMP / SEAL ABOVE	
Sworn to and subscribed before me, by the said <u>Lina Hidalgo</u> this the <u>15th</u> day of <u>January</u> 20 <u>19</u> to certify which, witness my hand and seal of office.	
 Signature of officer administering oath	Kathryn Calderon Padilla Printed name of officer administering oath
Notary Public Title of officer administering oath	

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

201996

19. FILER NAME Lina Hidalgo		20. FILER ID (Ethics Commission Filers)
21. SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTALS AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$140,865.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$98,969.87
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$0.00
4.	SCHEDULE E: LOANS	\$0.00
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$161,503.92
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$0.00
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$0.00
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$0.00
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$0.00
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$0.00
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$0.00
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS AND CONTRIBUTIONS RETURNED TO FILER	\$72.90

Page - 4

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A1: not available
2. FILER NAME Lina Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 10/28/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Sufi Ahmad 6. Contributor address; City; State; ZIP Code 3221 Avalon Pl Houston, TX 77019-5917	7. Amount of contribution (\$) \$500.00
8. Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) AZA
4. Date 10/31/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC REHAN AHMED 6. Contributor address; City; State; ZIP Code 2206 Branard St Houston, TX 77098-2408	7. Amount of contribution (\$) \$199.00
8. Principal occupation / Job title (See Instructions) physician		9 Employer (See Instructions) self-employed
4. Date 11/11/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Chris Akbari 6. Contributor address; City; State; ZIP Code 9 Greenway Plz Houston, TX 77046-0901	7. Amount of contribution (\$) \$500.00
8. Principal occupation / Job title (See Instructions) ITEX		9 Employer (See Instructions) Real Estate
4. Date 11/18/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Hamza Ali 6. Contributor address; City; State; ZIP Code 3939 W Alabama St Apt 352 Houston, TX 77027-2017	7. Amount of contribution (\$) \$2,500.00
8. Principal occupation / Job title (See Instructions) Real Estate		9 Employer (See Instructions) Gray Spear Inc.
4. Date 10/28/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Kristen Arbuckle 6. Contributor address; City; State; ZIP Code 3713 Yuma St NW Washington, DC 20016-2211	7. Amount of contribution (\$) \$10.00
8. Principal occupation / Job title (See Instructions) Analyst		9 Employer (See Instructions) Pc

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: not available
2. FILER NAME Lina Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 11/02/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Arnold & Itkin, LLP 6. Contributor address; City; State; ZIP Code 6009 Memorial Dr Houston, TX 77007-7035	7. Amount of contribution (\$) \$10,000.00
8. Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4. Date 11/11/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Betty Baer 6. Contributor address; City; State; ZIP Code 9023 Ilona Ln Houston, TX 77025-3619	7. Amount of contribution (\$) \$200.00
8. Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
4. Date 11/11/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Brooks Ballard 6. Contributor address; City; State; ZIP Code 8019 Pagosa Springs Dr Houston, TX 77040-5098	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Texas Broker		9 Employer (See Instructions) Engel & Völkers
4. Date 11/11/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Gina Biondo 6. Contributor address; City; State; ZIP Code 10315 Briar River Dr Houston, TX 77042-2947	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Senior Compliance Manager		9 Employer (See Instructions) Hines Securities Inc
4. Date 10/28/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Loren Blackford 6. Contributor address; City; State; ZIP Code 53 W 68th St New York, NY 10023-5301	7. Amount of contribution (\$) \$125.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed

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: not available
2. FILER NAME Lina Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 11/11/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Pedro Blandon 6. Contributor address; City; State; ZIP Code 1702 Eado Point Ln Houston, TX 77003-1160	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Flight attendant		9 Employer (See Instructions) American airlines
4. Date 12/30/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Julian F. Boddy 6. Contributor address; City; State; ZIP Code 11302 New Vista Ln Houston, TX 77067-3364	7. Amount of contribution (\$) \$5,000.00
8. Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Total Construction Inspections
4. Date 10/28/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Emma Brooks 6. Contributor address; City; State; ZIP Code 5667 Wickersham Ln Houston, TX 77056-4030	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) The Law Office of William B. Brooks
4. Date 10/31/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Sandra Bustamante 6. Contributor address; City; State; ZIP Code 1701 Hermann Dr Houston, TX 77004-7452	7. Amount of contribution (\$) \$60.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
4. Date 11/06/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Juan Canizales 6. Contributor address; City; State; ZIP Code 5706 Belrose Dr Houston, TX 77035-2410	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Hargrove engineers

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: not available
2. FILER NAME Lina Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 10/31/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Alonzo Cantu 6. Contributor address; City; State; ZIP Code PO Box 2673 McAllen, TX 78502-2673	7. Amount of contribution (\$) \$1,000.00
8. Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Cantu Construction
4. Date 11/06/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Victor Cardenas 6. Contributor address; City; State; ZIP Code 2422 Blue Water Ln Houston, TX 77018-1015	7. Amount of contribution (\$) \$10.00
8. Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Hartline Dacus Barger Dreyer LLP
4. Date 10/28/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Eric Carter 6. Contributor address; City; State; ZIP Code 1811 Southmore Blvd Houston, TX 77004-5946	7. Amount of contribution (\$) \$500.00
8. Principal occupation / Job title (See Instructions) Justice of the Peace		9 Employer (See Instructions) Harris County
4. Date 10/28/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Troy Chandler 6. Contributor address; City; State; ZIP Code 6575 West Loop S Ste 605 Bellaire, TX 77401-3509	7. Amount of contribution (\$) \$1,000.00
8. Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Chandler McNulty
4. Date 11/30/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Citizens For Texas 6. Contributor address; City; State; ZIP Code 600 Travis St Ste 2300 Houston, TX 77002-3005	7. Amount of contribution (\$) \$10,000.00
8. Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A1: not available
2. FILER NAME Lina Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 11/18/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Fuad Cochinwala 6. Contributor address; City; State; ZIP Code 77 Sunset Park Ln Sugar Land, TX 77479-2742	7. Amount of contribution (\$) \$2,500.00
8. Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) One Step Diagnostic
4. Date 11/18/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Garnet Coleman 6. Contributor address; City; State; ZIP Code PO Box 88140 Houston, TX 77288-0140	7. Amount of contribution (\$) \$1,000.00
8. Principal occupation / Job title (See Instructions) Business Consultant		9 Employer (See Instructions) Edgardo Colon P.C.
4. Date 11/01/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Jonathan Coopersmith 6. Contributor address; City; State; ZIP Code 1811 Shadowwood Dr Tam College Station, TX 77840-4846	7. Amount of contribution (\$) \$50.00
8. Principal occupation / Job title (See Instructions) academic		9 Employer (See Instructions) Texas A&M
4. Date 10/28/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Jose Luis Cubria 6. Contributor address; City; State; ZIP Code 2111 Bering Dr Houston, TX 77057-3711	7. Amount of contribution (\$) \$250.00
8. Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Self
4. Date 10/31/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Ali Davari 6. Contributor address; City; State; ZIP Code PO Box 570427 Houston, TX 77257-0427	7. Amount of contribution (\$) \$2,500.00 Returned
8. Principal occupation / Job title (See Instructions) NA		9 Employer (See Instructions) NA

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: not available
2. FILER NAME Lina Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 10/28/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Caitlin Dean 6. Contributor address; City; State; ZIP Code 3131 Memorial Ct Apt 17103 Houston, TX 77007-6268	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) Fish & Richardson
4. Date 11/06/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Jaclyn Dean 6. Contributor address; City; State; ZIP Code 1006 Otis Pl NW Washington, DC 20010-1414	7. Amount of contribution (\$) \$50.00
8. Principal occupation / Job title (See Instructions) Policy Associate		9 Employer (See Instructions) Tides Center
4. Date 10/28/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Ben Dominguez 6. Contributor address; City; State; ZIP Code 4899 Montrose Blvd Houston, TX 77006-6164	7. Amount of contribution (\$) \$250.00
8. Principal occupation / Job title (See Instructions) attorney		9 Employer (See Instructions) self
4. Date 11/18/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Mohan Draksharam 6. Contributor address; City; State; ZIP Code 2020 Buffalo Ter Apt A Houston, TX 77019-2436	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) information technology		9 Employer (See Instructions) infor
4. Date 10/31/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Kolby Duhon 6. Contributor address; City; State; ZIP Code 600 S 1st St Apt 108 Austin, TX 78704-1101	7. Amount of contribution (\$) \$10.00
8. Principal occupation / Job title (See Instructions) Court clerk		9 Employer (See Instructions) Travis county

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: not available
2. FILER NAME Lina Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 10/28/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Sarah Dunning 6. Contributor address; City; State; ZIP Code 9239 Hathaway St Dallas, TX 75220-2227	7. Amount of contribution (\$) \$250.00
8. Principal occupation / Job title (See Instructions) Self/Interior Designer		9 Employer (See Instructions) self employed
4. Date 11/06/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Emily Eldridge 6. Contributor address; City; State; ZIP Code 99 Inwood Ave Montclair, NJ 07043-2316	7. Amount of contribution (\$) \$50.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
4. Date 11/18/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Eva Engelhart 6. Contributor address; City; State; ZIP Code 4402 Holt St Bellaire, TX 77401-5621	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) attorney		9 Employer (See Instructions) Ross Banks
4. Date 11/11/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Rafael Enriquez 6. Contributor address; City; State; ZIP Code 7603 Keller St Houston, TX 77012-3504	7. Amount of contribution (\$) \$1.00
8. Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Pasadena ISD
4. Date 10/28/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC David Farris 6. Contributor address; City; State; ZIP Code 1503 Elmen St Houston, TX 77019-5315	7. Amount of contribution (\$) \$500.00
8. Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) cPanel Inc.

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: not available
2. FILER NAME Lina Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 12/30/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC GENE FEIGELSON 6. Contributor address; City; State; ZIP Code 8706 Ariel St Houston, TX 77074-2704	7. Amount of contribution (\$) \$250.00
8. Principal occupation / Job title (See Instructions) REAL ESTATE		9 Employer (See Instructions) RE/MAX UNITED
4. Date 11/16/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Feldman & Feldman, PC 6. Contributor address; City; State; ZIP Code 3355 W Alabama St Ste 1220 Houston, TX 77098-1789	7. Amount of contribution (\$) \$500.00
8. Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4. Date 11/06/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Holly Maria Fiyinn Vilaseca 6. Contributor address; City; State; ZIP Code 11823 Cedar Pass Dr Houston, TX 77077-4101	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Chief Relationship Officer		9 Employer (See Instructions) thinkLaw
4. Date 11/11/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Charles Foster 6. Contributor address; City; State; ZIP Code 17 Courtlandt Pl Houston, TX 77006-4013	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) foster LLP
4. Date 11/16/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC JEAN C. FRIZZELL 6. Contributor address; City; State; ZIP Code 1100 Louisiana St Ste 3500 Houston, TX 77002-5212	7. Amount of contribution (\$) \$5,000.00
8. Principal occupation / Job title (See Instructions) Private Practice		9 Employer (See Instructions) REYNOLDS FRIZZELL LLP

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: not available
2. FILER NAME Lina Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 10/28/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Justin Galle 6. Contributor address; City; State; ZIP Code 508 McBride Dr Lafayette, CA 94549-5718	7. Amount of contribution (\$) \$25.00
8. Principal occupation / Job title (See Instructions) Student		9 Employer (See Instructions) HKS
4. Date 10/28/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Aracely Garcia 6. Contributor address; City; State; ZIP Code 80 Iyerly, Apt 39 Houston, TX 77022	7. Amount of contribution (\$) \$25.00
8. Principal occupation / Job title (See Instructions) Community liaison		9 Employer (See Instructions) Texas Senate
4. Date 11/16/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Gilbert Garcia 6. Contributor address; City; State; ZIP Code 3526 Durness Way Houston, TX 77025-2516	7. Amount of contribution (\$) \$5,000.00
8. Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) Garcia Hamilton and Associates
4. Date 10/31/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Dax Garza 6. Contributor address; City; State; ZIP Code 1021 Main St Ste 1400 Houston, TX 77002-6602	7. Amount of contribution (\$) \$500.00
8. Principal occupation / Job title (See Instructions) Self		9 Employer (See Instructions) Self
4. Date 11/06/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Karen Ostrum George 6. Contributor address; City; State; ZIP Code 2328 Rice Blvd Houston, TX 77005-2622	7. Amount of contribution (\$) \$50.00
8. Principal occupation / Job title (See Instructions) Financial Consultant		9 Employer (See Instructions) Ralph S. O'Connor & Associates

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: not available
2. FILER NAME Lina Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 10/28/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Karissa Gerhke 6. Contributor address; City; State; ZIP Code 2013 Essex St Berkeley, CA 94703-2512	7. Amount of contribution (\$) \$5.00
8. Principal occupation / Job title (See Instructions) Director Sierra Student Coalition		9 Employer (See Instructions) Sierra Club
4. Date 10/28/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Aziz Gilani 6. Contributor address; City; State; ZIP Code 2345 Glen Haven Blvd Houston, TX 77030-3625	7. Amount of contribution (\$) \$250.00
8. Principal occupation / Job title (See Instructions) Venture Capitalist		9 Employer (See Instructions) Mercury Fund
4. Date 11/11/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Lance Gilliam 6. Contributor address; City; State; ZIP Code 1177 West Loop S Houston, TX 77027-9006	7. Amount of contribution (\$) \$1,000.00
8. Principal occupation / Job title (See Instructions) Real Estate		9 Employer (See Instructions) Waterman Steele Real Estate Advisors
4. Date 12/27/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC GLADYS R. GOFFNEY 6. Contributor address; City; State; ZIP Code PO Box 3441 Houston, TX 77253-3441	7. Amount of contribution (\$) \$200.00
8. Principal occupation / Job title (See Instructions) Private Practice		9 Employer (See Instructions) GLADYS R. GOFFNEY, ATTORNEY AT
4. Date 11/16/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Jeff Goss 6. Contributor address; City; State; ZIP Code 1051 Hillstar St Houston, TX 77009-1491	7. Amount of contribution (\$) \$250.00
8. Principal occupation / Job title (See Instructions) Veterinary Services		9 Employer (See Instructions) BC Partners

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: not available
2. FILER NAME Lina Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 11/11/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Allison Gower 6. Contributor address; City; State; ZIP Code 710 W Creekside Dr Houston, TX 77024-3210	7. Amount of contribution (\$) \$50.00
8. Principal occupation / Job title (See Instructions) Business owner		9 Employer (See Instructions) Self
4. Date 11/11/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Stephen J. Gross 6. Contributor address; City; State; ZIP Code 411 W Gaywood Dr Houston, TX 77079-7213	7. Amount of contribution (\$) \$50.00
8. Principal occupation / Job title (See Instructions) Energy Engineer		9 Employer (See Instructions) ChevronTexaco
4. Date 11/18/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Marc Grossberg 6. Contributor address; City; State; ZIP Code 300 St Joseph Pkwy Apt 417 Houston, TX 77002-8702	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) Thompson & Knight
4. Date 10/28/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Reynaldo Guerra 6. Contributor address; City; State; ZIP Code 906 Westford St Houston, TX 77022-6342	7. Amount of contribution (\$) \$250.00
8. Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Siemens
4. Date 10/28/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Thomas Gutting 6. Contributor address; City; State; ZIP Code 733 W 20th St # SY Houston, TX 77008-3507	7. Amount of contribution (\$) \$250.00
8. Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) King & Spalding LLP

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: not available
2. FILER NAME Lina Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 11/13/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Devney Hamilton 6. Contributor address; City; State; ZIP Code 281 Stevens Dr Apt 204 Ypsilanti, MI 48197-4532	7. Amount of contribution (\$) \$501.00
8. Principal occupation / Job title (See Instructions) Software Developer		9 Employer (See Instructions) Sassafras Tech Collective
4. Date 11/01/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Jessica Handelman 6. Contributor address; City; State; ZIP Code 2025 Broadway Apt 27F New York, NY 10023-5017	7. Amount of contribution (\$) \$50.00
8. Principal occupation / Job title (See Instructions) Creative Director		9 Employer (See Instructions) Houghton Mifflin Harcourt
4. Date 11/01/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Harris County Democratic Party 6. Contributor address; City; State; ZIP Code 1445 North Loop W Ste 110 Houston, TX 77008-1654	7. Amount of contribution (\$) \$10,000.00
8. Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4. Date 11/02/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Harris County Democratic Party 6. Contributor address; City; State; ZIP Code 1445 North Loop W Ste 110 Houston, TX 77008-1654	7. Amount of contribution (\$) \$2,500.00
8. Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4. Date 11/16/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Michael R. Harris 6. Contributor address; City; State; ZIP Code 1235 North Loop W Ste 1210 Houston, TX 77008-4710	7. Amount of contribution (\$) \$2,000.00
8. Principal occupation / Job title (See Instructions) Attorney at Law		9 Employer (See Instructions) The Harris Law Firm

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: not available
2. FILER NAME Lina Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 10/31/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Robert Harrison 6. Contributor address; City; State; ZIP Code 2885 Sanford Ave SW # 20874 Grandville, MI 49418-1342	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Administrator		9 Employer (See Instructions) ACS
4. Date 11/06/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Gilbert Herrera 6. Contributor address; City; State; ZIP Code 1440 Springrock Ln Houston, TX 77055-4368	7. Amount of contribution (\$) \$500.00
8. Principal occupation / Job title (See Instructions) Financial Consultant		9 Employer (See Instructions) Herrera Partners
4. Date 10/31/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Magdalena Hightower 6. Contributor address; City; State; ZIP Code 13453 Garden Grv Houston, TX 77082-3441	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
4. Date 12/31/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ HouconPAC 6. Contributor address; City; State; ZIP Code PO Box 920843 Houston, TX 77292-0843	7. Amount of contribution (\$) \$1,000.00 Returned
8. Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4. Date 12/27/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Houston ILA Dock & Marine Council PAC Fund 6. Contributor address; City; State; ZIP Code 7524 Avenue N Houston, TX 77012-1046	7. Amount of contribution (\$) \$10,000.00
8. Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A1: not available
2. FILER NAME Lina Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 12/30/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Martha Huebel 6. Contributor address; City; State; ZIP Code 5830 McKnight St Houston, TX 77035-2424	7. Amount of contribution (\$) \$25.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
4. Date 11/06/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC muna Hussaini 6. Contributor address; City; State; ZIP Code 5719 Penny Creek Dr Austin, TX 78759-4814	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) sr mgr		9 Employer (See Instructions) paypal
4. Date 10/28/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Obinna Iwuchukwu 6. Contributor address; City; State; ZIP Code 8714 Chelsworth Dr Houston, TX 77083-5656	7. Amount of contribution (\$) \$20.00
8. Principal occupation / Job title (See Instructions) Research Technician		9 Employer (See Instructions) Baylor College of Medicine
4. Date 12/30/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Maria Jimenez 6. Contributor address; City; State; ZIP Code 7105 Sherman St Houston, TX 77011-3747	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Research Associate		9 Employer (See Instructions) UT Health School of Public Health
4. Date 10/28/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Brad Johnson 6. Contributor address; City; State; ZIP Code 1324 Otis Pl NW Washington, DC 20010-3432	7. Amount of contribution (\$) \$12.50
8. Principal occupation / Job title (See Instructions) Climate hawk		9 Employer (See Instructions) self

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: not available
2. FILER NAME Lina Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 10/28/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Brad Johnson	7. Amount of contribution (\$) \$20.00
6. Contributor address; City; State; ZIP Code 1324 Otis Pl NW Washington, DC 20010-3432		
8. Principal occupation / Job title (See Instructions) Climate hawk		9 Employer (See Instructions) self
4. Date 11/11/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC James Jones	7. Amount of contribution (\$) \$5.00
6. Contributor address; City; State; ZIP Code 6330 West Loop S Ste 150 Bellaire, TX 77401-2920		
8. Principal occupation / Job title (See Instructions) Civil Engineer		9 Employer (See Instructions) Jones & Carter Inc.
4. Date 12/02/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC James Tynan Kelly	7. Amount of contribution (\$) \$500.00
6. Contributor address; City; State; ZIP Code 67 Tiel Way Houston, TX 77019-1509		
8. Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) self
4. Date 10/31/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Shelley Kennedy	7. Amount of contribution (\$) \$100.00
6. Contributor address; City; State; ZIP Code 706 Sue Barnett Dr Houston, TX 77018-5412		
8. Principal occupation / Job title (See Instructions) Healthcare Consultant		9 Employer (See Instructions) Kennedy Benefits Group
4. Date 11/18/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Shelley Kennedy	7. Amount of contribution (\$) \$15.00
6. Contributor address; City; State; ZIP Code 706 Sue Barnett Dr Houston, TX 77018-5412		
8. Principal occupation / Job title (See Instructions) Healthcare Consultant		9 Employer (See Instructions) Kennedy Benefits Group

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: not available
2. FILER NAME Lina Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 10/31/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Kyle Kern 6. Contributor address; City; State; ZIP Code 43 Cedar Dunes Dr New Smyrna Beach, FL 32169-3862	7. Amount of contribution (\$) \$10.00
8. Principal occupation / Job title (See Instructions) Food Truck owner and operator		9 Employer (See Instructions) Self
4. Date 12/02/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Kyle Kern 6. Contributor address; City; State; ZIP Code 43 Cedar Dunes Dr New Smyrna Beach, FL 32169-3862	7. Amount of contribution (\$) \$10.00
8. Principal occupation / Job title (See Instructions) Food Truck owner and operator		9 Employer (See Instructions) Self
4. Date 12/30/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Tina Kingshill 6. Contributor address; City; State; ZIP Code 11315 Wickersham Ln Houston, TX 77077-6825	7. Amount of contribution (\$) \$25.00
8. Principal occupation / Job title (See Instructions) none		9 Employer (See Instructions) none
4. Date 10/28/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC John Koston 6. Contributor address; City; State; ZIP Code 2550 North Loop W Ste 4006 Houston, TX 77092-8983	7. Amount of contribution (\$) \$1,000.00
8. Principal occupation / Job title (See Instructions) Executive		9 Employer (See Instructions) cPanel LLC
4. Date 11/11/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC FELIX KUBOSH 6. Contributor address; City; State; ZIP Code 1701 Lubbock St Houston, TX 77007-7717	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) SURETY		9 Employer (See Instructions) SELF

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: not available
2. FILER NAME Lina Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 11/02/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Latino Labor Leadership PAC 6. Contributor address; City; State; ZIP Code PO Box 230991 Houston, TX 77223-0991	7. Amount of contribution (\$) \$4,000.00
8. Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4. Date 11/06/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Mary Cay Liebig 6. Contributor address; City; State; ZIP Code 427 SE 67th Ave Portland, OR 97215-1332	7. Amount of contribution (\$) \$25.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
4. Date 10/28/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Sandra A Linton 6. Contributor address; City; State; ZIP Code 1722 Capstan Rd Houston, TX 77062-4522	7. Amount of contribution (\$) \$5.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
4. Date 10/28/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Sandra A Linton 6. Contributor address; City; State; ZIP Code 1722 Capstan Rd Houston, TX 77062-4522	7. Amount of contribution (\$) \$5.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
4. Date 11/25/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Sandra A Linton 6. Contributor address; City; State; ZIP Code 1722 Capstan Rd Houston, TX 77062-4522	7. Amount of contribution (\$) \$5.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed

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: not available
2. FILER NAME Lina Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 11/25/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Sandra A Linton 6. Contributor address; City; State; ZIP Code 1722 Capstan Rd Houston, TX 77062-4522	7. Amount of contribution (\$) \$5.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
4. Date 12/30/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Sandra A Linton 6. Contributor address; City; State; ZIP Code 1722 Capstan Rd Houston, TX 77062-4522	7. Amount of contribution (\$) \$5.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
4. Date 12/30/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Sandra A Linton 6. Contributor address; City; State; ZIP Code 1722 Capstan Rd Houston, TX 77062-4522	7. Amount of contribution (\$) \$5.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
4. Date 11/11/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ VICTOR LOPEZ 6. Contributor address; City; State; ZIP Code 9044 Blue Raven Ave Las Vegas, NV 89143-1150	7. Amount of contribution (\$) \$25.00
8. Principal occupation / Job title (See Instructions) Pilot		9 Employer (See Instructions) DoD
4. Date 10/31/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Rachel Love 6. Contributor address; City; State; ZIP Code 915 Corby Blvd South Bend, IN 46617-1501	7. Amount of contribution (\$) \$2.50
8. Principal occupation / Job title (See Instructions) scientist		9 Employer (See Instructions) University of Notre Dame

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: not available
2. FILER NAME Lina Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 10/31/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Rene Lugo 6. Contributor address; City; State; ZIP Code 7600 Greenfield Dr Alvarado, TX 76009-7277	7. Amount of contribution (\$) \$5.00
8. Principal occupation / Job title (See Instructions) Community Health Worker		9 Employer (See Instructions) Centene
4. Date 11/16/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Neal S. Manne 6. Contributor address; City; State; ZIP Code 1000 Louisiana St Ste 5100 Houston, TX 77002-5091	7. Amount of contribution (\$) \$1,000.00
8. Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Susman Godfrey
4. Date 11/11/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC John Martinez 6. Contributor address; City; State; ZIP Code 15206 Via Verde Dr Houston, TX 77083-4334	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) engineer		9 Employer (See Instructions) production associates
4. Date 10/28/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Andy McGarrahan 6. Contributor address; City; State; ZIP Code 7110 Canongate Dr Dallas, TX 75248-1505	7. Amount of contribution (\$) \$3.00
8. Principal occupation / Job title (See Instructions) Psychologist		9 Employer (See Instructions) Self
4. Date 10/28/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Andy McGarrahan 6. Contributor address; City; State; ZIP Code 7110 Canongate Dr Dallas, TX 75248-1505	7. Amount of contribution (\$) \$3.00
8. Principal occupation / Job title (See Instructions) Psychologist		9 Employer (See Instructions) Self

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: not available
2. FILER NAME Lina Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 11/06/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Andy McGarahan 6. Contributor address; City; State; ZIP Code 7110 Canongate Dr Dallas, TX 75248-1505	7. Amount of contribution (\$) \$3.00
8. Principal occupation / Job title (See Instructions) Psychologist		9 Employer (See Instructions) Self
4. Date 11/11/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Debra McLeod 6. Contributor address; City; State; ZIP Code 14529 Memorial Dr Houston, TX 77079-5428	7. Amount of contribution (\$) \$5,000.00
8. Principal occupation / Job title (See Instructions) Executive Director		9 Employer (See Instructions) Grant Me The Wisdom Foundation
4. Date 10/31/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Ruthie Miller 6. Contributor address; City; State; ZIP Code 3853 Del Monte Dr Houston, TX 77019-3019	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Copywriter		9 Employer (See Instructions) Salesforce.com
4. Date 10/31/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Thomas Miller 6. Contributor address; City; State; ZIP Code 725 Washington St # 300 Oakland, CA 94607-3924	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) Miller Washington & Kim
4. Date 12/27/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Linda Morales 6. Contributor address; City; State; ZIP Code 5712 Irvington Blvd Houston, TX 77009-1928	7. Amount of contribution (\$) \$250.00
8. Principal occupation / Job title (See Instructions) Organizing Coordinator		9 Employer (See Instructions) AFL-CIO

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: not available
2. FILER NAME Lina Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 11/18/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Booker Morris 6. Contributor address; City; State; ZIP Code 2451 Covington Way Pearland, TX 77584-4807	7. Amount of contribution (\$) \$500.00
8. Principal occupation / Job title (See Instructions) Realtor		9 Employer (See Instructions) Womack Development & Investment Realtors
4. Date 11/13/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Rufi Natarajan 6. Contributor address; City; State; ZIP Code 5201 Memorial Dr Unit 234 Houston, TX 77007-8243	7. Amount of contribution (\$) \$2,500.00
8. Principal occupation / Job title (See Instructions) Realtor		9 Employer (See Instructions) Mint Homes, Inc.
4. Date 10/31/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Joanna Nathan 6. Contributor address; City; State; ZIP Code 2617 Riverside Dr Houston, TX 77004-7610	7. Amount of contribution (\$) \$1,000.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
4. Date 10/31/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Robert Nava 6. Contributor address; City; State; ZIP Code 2411 Fondren Rd Apt 6104 Houston, TX 77063-2333	7. Amount of contribution (\$) \$50.00
8. Principal occupation / Job title (See Instructions) projects		9 Employer (See Instructions) AI
4. Date 11/06/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Meredith Nelson 6. Contributor address; City; State; ZIP Code 3417 37th St Apt 4 Long Island City, NY 11101-1355	7. Amount of contribution (\$) \$50.00
8. Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) Holwell Shuster & Goldberg LLP

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: not available
2. FILER NAME Lina Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 11/11/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Patricia Nesom 6. Contributor address; City; State; ZIP Code 6206 Grape St Houston, TX 77074-7422	7. Amount of contribution (\$) \$25.00
8. Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
4. Date 10/28/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Rand Nolen 6. Contributor address; City; State; ZIP Code 2126 Pine Valley Dr Houston, TX 77019-3508	7. Amount of contribution (\$) \$250.00
8. Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Fleming Nolen & Jez L.L.P.
4. Date 12/30/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Melissa Noriega 6. Contributor address; City; State; ZIP Code 4430 Pease St Houston, TX 77023-3024	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) BakerRipley
4. Date 10/28/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Michael Olivas 6. Contributor address; City; State; ZIP Code 2522 Talina Way Houston, TX 77080-3807	7. Amount of contribution (\$) \$200.00
8. Principal occupation / Job title (See Instructions) Associate Dean		9 Employer (See Instructions) UH-School of Law
4. Date 10/31/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Opportunity First 6. Contributor address; City; State; ZIP Code 1150 N Loop 1604 W Ste 108-230 San Antonio, TX 78248-4552	7. Amount of contribution (\$) \$500.00
8. Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A1: not available
2. FILER NAME Lina Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 11/11/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Carrin Patman 6. Contributor address; City; State; ZIP Code 3262 Westheimer Rd No 212 Houston, TX 77098-1002	7. Amount of contribution (\$) \$1,000.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
4. Date 11/06/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Christopher Patterson 6. Contributor address; City; State; ZIP Code 4507 1/2 Inman St Houston, TX 77020-7817	7. Amount of contribution (\$) \$20.00
8. Principal occupation / Job title (See Instructions) Electrician Apprentice		9 Employer (See Instructions) Contech Control
4. Date 10/28/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Ricardo Perusquia 6. Contributor address; City; State; ZIP Code 5401 Sturbridge Dr Houston, TX 77056-1620	7. Amount of contribution (\$) \$500.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
4. Date 10/28/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Gary Pinkerton 6. Contributor address; City; State; ZIP Code 8906 Blankenship Dr Houston, TX 77080-3003	7. Amount of contribution (\$) \$50.00
8. Principal occupation / Job title (See Instructions) HR Director		9 Employer (See Instructions) Brock Enterprises
4. Date 10/28/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Stewart Pisocco 6. Contributor address; City; State; ZIP Code 1930 Dunstan Rd Houston, TX 77005-1620	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Self

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: not available
2. FILER NAME Lina Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 11/11/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Kelly Prather 6. Contributor address; City; State; ZIP Code 2009 N Durham Dr Houston, TX 77008-3517	7. Amount of contribution (\$) \$50.00
8. Principal occupation / Job title (See Instructions) attorney		9 Employer (See Instructions) The Greenwood Prather Law Firm
4. Date 12/31/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Gregg T. Reyes 6. Contributor address; City; State; ZIP Code 26 Hedwig Cir Houston, TX 77024-4519	7. Amount of contribution (\$) \$2,500.00 Returned
8. Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) Reytec Construction Resources, Inc.
4. Date 10/28/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Neli Rigo 6. Contributor address; City; State; ZIP Code 4742 Post Oak Timber Dr Houston, TX 77056-2258	7. Amount of contribution (\$) \$1,000.00
8. Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) Farmkey Investments
4. Date 12/30/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Alvaro Rodriguez 6. Contributor address; City; State; ZIP Code 4403 Prince Pine Trl Houston, TX 77059-3123	7. Amount of contribution (\$) \$25.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
4. Date 11/11/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC David Rodriguez 6. Contributor address; City; State; ZIP Code 606 Marshall St Apt 3 Houston, TX 77006-4429	7. Amount of contribution (\$) \$25.00
8. Principal occupation / Job title (See Instructions) Crane operator		9 Employer (See Instructions) Pasadena Tank Corp

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: not available
2. FILER NAME Lina Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 11/06/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC JR Rothenberg 6. Contributor address; City; State; ZIP Code 200 Chambers St New York, NY 10007-1131	7. Amount of contribution (\$) \$10.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
4. Date 12/09/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Graciela Saenz 6. Contributor address; City; State; ZIP Code 1108 Hackney St Houston, TX 77023-3312	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Law Offices of Graciela Saenz
4. Date 10/28/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Marla Schaefer 6. Contributor address; City; State; ZIP Code 1500 S Ocean Blvd Boca Raton, FL 33432-8529	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
4. Date 10/31/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC John Sember 6. Contributor address; City; State; ZIP Code 22 Commonwealth Ave San Francisco, CA 94118-2602	7. Amount of contribution (\$) \$20.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
4. Date 10/28/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Steven Schuster 6. Contributor address; City; State; ZIP Code PO Box 230734 Houston, TX 77223-0734	7. Amount of contribution (\$) \$25.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed

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: not available
2. FILER NAME Lina Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 10/28/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC David Segal 6. Contributor address; City; State; ZIP Code 2901 Sunset Blvd Houston, TX 77005-2349	7. Amount of contribution (\$) \$10.00
8. Principal occupation / Job title (See Instructions) Organizer		9 Employer (See Instructions) Religious Action Center
4. Date 12/02/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC David Segal 6. Contributor address; City; State; ZIP Code 2901 Sunset Blvd Houston, TX 77005-2349	7. Amount of contribution (\$) \$10.00
8. Principal occupation / Job title (See Instructions) Organizer		9 Employer (See Instructions) Religious Action Center
4. Date 11/01/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Zain Shaik 6. Contributor address; City; State; ZIP Code 1301 Richmond Ave Apt 338 Houston, TX 77006-5489	7. Amount of contribution (\$) \$500.00
8. Principal occupation / Job title (See Instructions) Business Owner		9 Employer (See Instructions) Dream Harvest Farming Company
4. Date 11/06/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Brian Smith 6. Contributor address; City; State; ZIP Code 5311 Blythewood St Houston, TX 77021-1602	7. Amount of contribution (\$) \$500.00
8. Principal occupation / Job title (See Instructions) Construction Manager		9 Employer (See Instructions) Brian Smith Construction Inspection Inc.
4. Date 11/01/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Lenora Sorola-Pohlman 6. Contributor address; City; State; ZIP Code 2314 Tannehill Dr Houston, TX 77008-3049	7. Amount of contribution (\$) \$300.00
8. Principal occupation / Job title (See Instructions) Ins broker		9 Employer (See Instructions) Sorola Ins service

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: not available
2. FILER NAME Lina Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 10/31/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ JOE STEPHENS 6. Contributor address; City; State; ZIP Code 250 W Thorn Way Houston, TX 77015-2068	7. Amount of contribution (\$) \$1,000.00
8. Principal occupation / Job title (See Instructions) Judge		9 Employer (See Instructions) Harris county
4. Date 10/28/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Jeffrey Stern 6. Contributor address; City; State; ZIP Code 4909 Bissonnet St Ste 100 Bellaire, TX 77401-4051	7. Amount of contribution (\$) \$500.00
8. Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Stern Law Group
4. Date 10/28/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Mark Steuer 6. Contributor address; City; State; ZIP Code 2004 Sheldon St Houston, TX 77008-4454	7. Amount of contribution (\$) \$50.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
4. Date 10/28/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Susan Taylor 6. Contributor address; City; State; ZIP Code 2322 Robinhood St Houston, TX 77005-2606	7. Amount of contribution (\$) \$25.00
8. Principal occupation / Job title (See Instructions) attorney		9 Employer (See Instructions) Self
4. Date 12/27/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Teamsters Local Union #988 6. Contributor address; City; State; ZIP Code 4303 N Sam Houston Pkwy E Houston, TX 77032-3821	7. Amount of contribution (\$) \$5,000.00
8. Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A1: not available
2. FILER NAME Lina Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 11/01/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Texans For Fairness 6. Contributor address; City; State; ZIP Code 16335 Lasting Light Ln Houston, TX 77095-3282	7. Amount of contribution (\$) \$3,000.00
8. Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4. Date 11/16/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ The Manor Law Firm PC 6. Contributor address; City; State; ZIP Code 4504 Caroline St Houston, TX 77004-4912	7. Amount of contribution (\$) \$250.00
8. Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4. Date 11/06/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Wretha Thomas 6. Contributor address; City; State; ZIP Code 14227 Ballfour Park Ln Houston, TX 77047-4554	7. Amount of contribution (\$) \$50.00
8. Principal occupation / Job title (See Instructions) Union president		9 Employer (See Instructions) HESP/AFT 6315
4. Date 11/02/2018	5. Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC C00002766 United Food & Commercial Workers International Union 6. Contributor address; City; State; ZIP Code 1775 K St NW Bsmt Washington, DC 20006-1521	7. Amount of contribution (\$) \$5,000.00
8. Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4. Date 11/06/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Daniel Vasquez 6. Contributor address; City; State; ZIP Code 1640 E T C Jester Blvd Houston, TX 77008-2526	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed

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: not available
2. FILER NAME Lina Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 11/16/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC David Veiseh 6. Contributor address; City; State; ZIP Code 407 Hunterwood Dr Houston, TX 77024-6902	7. Amount of contribution (\$) \$1,000.00
8. Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) Texpo Energy
4. Date 11/18/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Marcia Vilas 6. Contributor address; City; State; ZIP Code 9023 Chatsworth Dr Houston, TX 77024-3711	7. Amount of contribution (\$) \$50.00
8. Principal occupation / Job title (See Instructions) SAHM		9 Employer (See Instructions) N/A
4. Date 10/28/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Vuk Vujasinovic 6. Contributor address; City; State; ZIP Code 8 Stillforest St Houston, TX 77024-7518	7. Amount of contribution (\$) \$1,000.00
8. Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Vujasinovic & Beckcom PLLC
4. Date 11/25/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Janna Webber 6. Contributor address; City; State; ZIP Code 2335 Quenby St Houston, TX 77005-1503	7. Amount of contribution (\$) \$10.00
8. Principal occupation / Job title (See Instructions) Real Estate Attorney		9 Employer (See Instructions) Charlton Webber PLLC
4. Date 11/06/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Harvill Weller 6. Contributor address; City; State; ZIP Code 17225 El Camino Real Ste 190 Houston, TX 77058-2767	7. Amount of contribution (\$) \$50.00
8. Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self Employed

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: not available
2. FILER NAME Lina Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 10/28/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Claude Whitaker 6. Contributor address; City; State; ZIP Code 419 Cherry Springs Ln Spring, TX 77373-8186	7. Amount of contribution (\$) \$50.00
8. Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
4. Date 11/18/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Gerald Wayne Womack 6. Contributor address; City; State; ZIP Code 4412 Almeda Rd Houston, TX 77004-4902	7. Amount of contribution (\$) \$500.00
8. Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) Womack Development, Inc.
4. Date 11/16/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Earnest Wotring 6. Contributor address; City; State; ZIP Code 819 Holton St Bellaire, TX 77401-2812	7. Amount of contribution (\$) \$2,500.00
8. Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Connelly Baker & Wotring, LLP
4. Date 11/16/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Zehl & Associates, PC 6. Contributor address; City; State; ZIP Code 2700 Post Oak Blvd Ste 1120 Houston, TX 77056-5767	7. Amount of contribution (\$) \$5,000.00
8. Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4. Date 11/19/2018	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Michael Zilkha 6. Contributor address; City; State; ZIP Code 1001 McKinney St Houston, TX 77002-6417	7. Amount of contribution (\$) \$10,000.00
8. Principal occupation / Job title (See Instructions) Energy		9 Employer (See Instructions) Zilkha Biomass Energy

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

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A2: not available	
2. FILER NAME Lina Hidalgo		3. Filer ID (Ethics Commission Filers)	
4. TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$0.00	
5 Date 12/31/2018	6 Full name of contributor Battleground Texas <input type="checkbox"/> out-of-state PAC	8 Amount of contribution (\$) \$2,580.76	9 In-Kind contribution description In-kind of staff salaries
7 Contributor address; City; State; Zip Code PO Box 11525 P. O. Box 11525 Austin, TX 78711-1525		<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T	
10 Principal occupation / Job Title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parents (if any) (FOR JUDICIAL)			
5 Date 11/01/2018	6 Full name of contributor MoveOn.org Political Action <input checked="" type="checkbox"/> out-of-state PAC C00341396	8 Amount of contribution (\$) \$144.37	9 In-Kind contribution description Inkind of Text Messages
7 Contributor address; City; State; Zip Code PO Box 96142 Washington, DC 20090-6142		<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T	
10 Principal occupation / Job Title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parents (if any) (FOR JUDICIAL)			

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

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A2: not available	
2. FILER NAME Lina Hidalgo		3. Filer ID (Ethics Commission Filers)	
4. TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$0.00	
5 Date 11/06/2018	6 Full name of contributor MoveOn.org Political Action 7 Contributor address; City; State; Zip Code PO Box 96142 Washington, DC 20090-6142	<input checked="" type="checkbox"/> out-of-state PAC C00341396 8 Amount of contribution (\$) \$911.08	9 In-Kind contribution description Inkind of emails
10 Principal occupation / Job Title (FOR NON-JUDICIAL) (See Instructions)		<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T	
11 Employer (FOR NON-JUDICIAL) (See Instructions)			
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parents (if any) (FOR JUDICIAL)			
5 Date 12/31/2018	6 Full name of contributor Texas Organizing Project PAC 7 Contributor address; City; State; Zip Code PO Box 120296 San Antonio, TX 78212-9496	<input type="checkbox"/> out-of-state PAC 8 Amount of contribution (\$) \$95,333.66	9 In-Kind contribution description Field Work and Strategic Consulting
10 Principal occupation / Job Title (FOR NON-JUDICIAL) (See Instructions)		<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T	
11 Employer (FOR NON-JUDICIAL) (See Instructions)			
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parents (if any) (FOR JUDICIAL)			

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

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

201996

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Lina Hidalgo	3. Filer ID (Ethics Commission Filers)
4 Date 10/28/2018	5 Payee name ActBlue Technical Services, Inc.	
6 Amount \$368.17	7 Payee address; City; State: Zip Code 14 Arrow St Ste 11 Cambridge, MA 02138-5106	
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 Credit Card Processing Fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 10/31/2018	5 Payee name ActBlue Technical Services, Inc.	
6 Amount \$130.24	7 Payee address; City; State: Zip Code 14 Arrow St Ste 11 Cambridge, MA 02138-5106	
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 Credit Card Processing Fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 11/01/2018	5 Payee name ActBlue Technical Services, Inc.	
6 Amount \$35.56	7 Payee address; City; State: Zip Code 14 Arrow St Ste 11 Cambridge, MA 02138-5106	
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 Credit Card Processing Fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

201996

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:		2. FILER NAME Lina Hidalgo		3. Filer ID (Ethics Commission Filers)	
4 Date 11/06/2018		5 Payee name ActBlue Technical Services, Inc.			
6 Amount \$69.88		7 Payee address; City: 14 Arrow St Ste 11 Cambridge, MA 02138-5106		State: Zip Code	
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 Credit Card Processing Fee	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
4 Date 11/11/2018		5 Payee name ActBlue Technical Services, Inc.			
6 Amount \$337.00		7 Payee address; City: 14 Arrow St Ste 11 Cambridge, MA 02138-5106		State: Zip Code	
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 Credit Card Processing Fee	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
4 Date 11/18/2018		5 Payee name ActBlue Technical Services, Inc.			
6 Amount \$290.93		7 Payee address; City: 14 Arrow St Ste 11 Cambridge, MA 02138-5106		State: Zip Code	
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 Credit Card Processing Fee	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

201996

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:		2. FILER NAME Lina Hidalgo		3. Filer ID (Ethics Commission Filers)	
4 Date 11/25/2018		5 Payee name ActBlue Technical Services, Inc.			
6 Amount \$0.80		7 Payee address; City: State: Zip Code 14 Arrow St Ste 11 Cambridge, MA 02138-5106			
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 Credit Card Processing Fee	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
4 Date 12/02/2018		5 Payee name ActBlue Technical Services, Inc.			
6 Amount \$20.55		7 Payee address; City: State: Zip Code 14 Arrow St Ste 11 Cambridge, MA 02138-5106			
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 Credit Card Processing Fee	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
4 Date 12/09/2018		5 Payee name ActBlue Technical Services, Inc.			
6 Amount \$3.95		7 Payee address; City: State: Zip Code 14 Arrow St Ste 11 Cambridge, MA 02138-5106			
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 Credit Card Processing Fee	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

201996

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Lina Hidalgo	3. Filer ID (Ethics Commission Filers)
4 Date 12/30/2018	5 Payee name ActiBlue Technical Services, Inc.	
6 Amount \$218.65	7 Payee address; City; State; Zip Code 14 Arrow St Ste 11 Cambridge, MA 02138-5106	
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 Credit Card Processing Fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 11/13/2018	5 Payee name Administrative Business Services, LLC	
6 Amount \$3,080.00	7 Payee address; City; State; Zip Code 10205 Atkins Ridge Dr Charlotte, NC 28213-4290	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting Services
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/10/2018	5 Payee name Administrative Business Services, LLC	
6 Amount \$505.00	7 Payee address; City; State; Zip Code 10205 Atkins Ridge Dr Charlotte, NC 28213-4290	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting Services
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

201996

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:		2. FILER NAME Lina Hidalgo		3. Filer ID (Ethics Commission Filers)	
4 Date 12/07/2018		5 Payee name ADP, Inc.			
6 Amount \$86.53		7 Payee address; City: State: Zip Code 504 Clinton Center Dr Ste 4400 Clinton, MS 39056-5610			
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 Payroll Fees	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
4 Date 12/27/2018		5 Payee name Bayou City Strategies			
6 Amount \$2,000.00		7 Payee address; City: State: Zip Code 1 Greenway Plz Ste 740 Houston, TX 77046-0102			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising Consultant	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
4 Date 11/30/2018		5 Payee name Best Buy			
6 Amount \$109.24		7 Payee address; City: State: Zip Code 8210 S Gessner Rd Houston, TX 77036-7422			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Advertising 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 Advertising & Marketing	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Page - 41

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

201996

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Lina Hidalgo	3. Filer ID (Ethics Commission Filers)
4 Date 12/27/2018	5 Payee name Ali Davari	
6 Amount \$2,500.00	7 Payee address; City; State: Zip Code PO Box 570427 Houston, TX 77257-0427	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) OTHER (enter a category not listed above)	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Refund of Contribution Received on 10.31.2018
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 10/30/2018	5 Payee name Do Big Things LLC	
6 Amount \$60,000.00	7 Payee address; City; State: Zip Code PO Box 128 Mill Valley, CA 94942-0128	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising 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 Advertising Expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 11/05/2018	5 Payee name Do Big Things LLC	
6 Amount \$2,500.00	7 Payee address; City; State: Zip Code PO Box 128 Mill Valley, CA 94942-0128	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising 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 Advertising Expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

201996

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Lina Hidalgo	3. Filer ID (Ethics Commission Filers)
4 Date 11/19/2018	5 Payee name Kay Fukui	
6 Amount \$391.00	7 Payee address; City; State; Zip Code 4408 Hazard St Houston, TX 77098-4214	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Support
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 11/21/2018	5 Payee name Kay Fukui	
6 Amount \$25.82	7 Payee address; City; State; Zip Code 4408 Hazard St Houston, TX 77098-4214	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Support
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/03/2018	5 Payee name Kay Fukui	
6 Amount \$982.30	7 Payee address; City; State; Zip Code 4408 Hazard St Houston, TX 77098-4214	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Support
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

201996

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Lina Hidalgo	3. Filer ID (Ethics Commission Filers)
4 Date 12/14/2018	5 Payee name Kay Fukui	
6 Amount \$1,673.99	7 Payee address; City; State; Zip Code 4408 Hazard St Houston, TX 77098-4214	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Support
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 11/01/2018	5 Payee name Google	
6 Amount \$46.93	7 Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043-1351	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising 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 Campaign Email
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/03/2018	5 Payee name Google	
6 Amount \$55.60	7 Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043-1351	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising 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 Campaign Email
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

201996

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Lina Hidalgo	3. Filer ID (Ethics Commission Filers)
4 Date 10/30/2018	5 Payee name Green Bank	
6 Amount \$17.00	7 Payee address; City: State: Zip Code 4000 Greenbriar Dr Houston, TX 77098-5204	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental 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 Bank Charges & Fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 11/01/2018	5 Payee name Green Bank	
6 Amount \$2.50	7 Payee address; City: State: Zip Code 4000 Greenbriar Dr Houston, TX 77098-5204	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental 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 Bank Charges & Fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 11/01/2018	5 Payee name Green Bank	
6 Amount \$10.00	7 Payee address; City: State: Zip Code 4000 Greenbriar Dr Houston, TX 77098-5204	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental 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 Bank Charges & Fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

201996

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Lina Hidalgo	3. Filer ID (Ethics Commission Filers)
4 Date 11/02/2018	5 Payee name Green Bank	
6 Amount \$10.00	7 Payee address; City; State; Zip Code 4000 Greenbriar Dr Houston, TX 77098-5204	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental 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 Bank Charges & Fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 11/07/2018	5 Payee name Green Bank	
6 Amount \$10.00	7 Payee address; City; State; Zip Code 4000 Greenbriar Dr Houston, TX 77098-5204	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental 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 Bank Fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 11/13/2018	5 Payee name Green Bank	
6 Amount \$10.00	7 Payee address; City; State; Zip Code 4000 Greenbriar Dr Houston, TX 77098-5204	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental 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 Bank Charges & Fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

201996

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:		2. FILER NAME Lina Hidalgo		3. Filer ID (Ethics Commission Filers)	
4 Date 11/19/2018		5 Payee name Green Bank			
6 Amount \$10.00		7 Payee address; City; State: Zip Code 4000 Greenbriar Dr Houston, TX 77098-5204			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental 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 Bank Charges & Fees	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
4 Date 11/26/2018		5 Payee name Green Bank			
6 Amount \$10.00		7 Payee address; City; State: Zip Code 4000 Greenbriar Dr Houston, TX 77098-5204			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental 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 Bank Charges & Fees	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
4 Date 12/03/2018		5 Payee name Green Bank			
6 Amount \$2.50		7 Payee address; City; State: Zip Code 4000 Greenbriar Dr Houston, TX 77098-5204			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental 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 Bank Charges & Fees	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Page - 47

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

201996

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Lina Hidalgo	3. Filer ID (Ethics Commission Filers)
4 Date 12/03/2018	5 Payee name Green Bank	
6 Amount \$10.00	7 Payee address; City: State: Zip Code 4000 Greenbriar Dr Houston, TX 77098-5204	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental 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 Bank Charges & Fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/10/2018	5 Payee name Green Bank	
6 Amount \$10.00	7 Payee address; City: State: Zip Code 4000 Greenbriar Dr Houston, TX 77098-5204	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental 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 Bank Charges & Fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 11/20/2018	5 Payee name Hilton Hotels	
6 Amount \$113.80	7 Payee address; City: State: Zip Code 10 E Grand Ave Chicago, IL 60611-3506	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Travel Out Of District	(b) Description <input checked="" type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Lina Hidalgo	3. Filer ID (Ethics Commission Filers)
4 Date 12/10/2018	5 Payee name Hilton Hotels	
6 Amount \$865.43	7 Payee address; City; State: Zip Code 10 E Grand Ave Chicago, IL 60611-3506	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Travel Out Of District	(b) Description <input checked="" type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 11/05/2018	5 Payee name Houston Chronicle	
6 Amount \$20.00	7 Payee address; City; State: Zip Code 4747 Southwest Fwy Houston, TX 77027-6901	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental 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 Dues and Subscription
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/03/2018	5 Payee name Houston Chronicle	
6 Amount \$20.00	7 Payee address; City; State: Zip Code 4747 Southwest Fwy Houston, TX 77027-6901	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental 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 Dues and Subscription
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

201996

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Lina Hidalgo	3. Filer ID (Ethics Commission Filers)
4 Date 12/31/2018	5 Payee name Houston Chronicle	
6 Amount \$24.00	7 Payee address; City; State: Zip Code 4747 Southwest Fwy Houston, TX 77027-6901	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental 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 Dues and Subscription
	9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
4 Date 11/07/2018	5 Payee name Hyatt	
6 Amount \$1,122.18	7 Payee address; City; State: Zip Code 3400 Sage Rd Houston, TX 77056-7010	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging
	9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
4 Date 11/08/2018	5 Payee name Hyatt	
6 Amount \$27.06	7 Payee address; City; State: Zip Code 3400 Sage Rd Houston, TX 77056-7010	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging
	9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

201996

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Lina Hidalgo	3. Filer ID (Ethics Commission Filers)
4 Date 11/19/2018	5 Payee name Instigator LLC	
6 Amount \$3,000.00	7 Payee address; City; State; Zip Code 100 W 55th Street Austin, TX 78751	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Field Consultant
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 11/19/2018	5 Payee name Instigator LLC	
6 Amount \$4,000.00	7 Payee address; City; State; Zip Code 100 W 55th Street Austin, TX 78751	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Field Consultant
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/03/2018	5 Payee name Instigator LLC	
6 Amount \$3,000.00	7 Payee address; City; State; Zip Code 100 W 55th Street Austin, TX 78751	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Field Consultant
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

201996

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Lina Hidalgo	3. Filer ID (Ethics Commission Filers)
4 Date 12/03/2018	5 Payee name Instigator LLC	
6 Amount \$4,000.00	7 Payee address; 100 W 55th Street Austin, TX 78751	City; State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Field Consultant
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 11/05/2018	5 Payee name J&N Enterprises	
6 Amount \$357.23	7 Payee address; 2015 W 34th St Houston, TX 77018-6139	City; State: Zip Code
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 Printing & Production
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 11/05/2018	5 Payee name J&N Enterprises	
6 Amount \$606.20	7 Payee address; 2015 W 34th St Houston, TX 77018-6139	City; State: Zip Code
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 Printing & Production
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

201996

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Lina Hidalgo	3. Filer ID (Ethics Commission Filers)
4 Date 11/13/2018	5 Payee name KHOU	
6 Amount \$5,270.00	7 Payee address; City; State; Zip Code 4343 Elgin Houston, TX 77204-0008	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising 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 Advertising & Marketing
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 11/05/2018	5 Payee name KPRC-TV	
6 Amount \$6,885.00	7 Payee address; City; State; Zip Code 8181 Southwest Fwy Houston, TX 77074-1705	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising 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 Advertising & Marketing
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 11/13/2018	5 Payee name KTRK	
6 Amount \$3,149.25	7 Payee address; City; State; Zip Code 3310 Bissonnet St Houston, TX 77005-2114	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising 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 Advertising & Marketing
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:		2. FILER NAME Lina Hidalgo		3. Filer ID (Ethics Commission Filers)	
4 Date 12/14/2018		5 Payee name Alexa Moores			
6 Amount \$119.25		7 Payee address; City: State: Zip Code 9606 Cimarroncito Ln Humble, TX 77396-5004			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Support	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
4 Date 11/05/2018		5 Payee name Nationbuilder			
6 Amount \$29.00		7 Payee address; City: State: Zip Code 520 S Grand Ave Los Angeles, CA 90071-2600			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Advertising 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 Website	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
4 Date 12/06/2018		5 Payee name Nationbuilder			
6 Amount \$59.00		7 Payee address; City: State: Zip Code 520 S Grand Ave Los Angeles, CA 90071-2600			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Advertising 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 Website	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

201996

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Lina Hidalgo	3. Filer ID (Ethics Commission Filers)
4 Date 11/02/2018	5 Payee name NGP VAN	
6 Amount \$410.00	7 Payee address; City; State: Zip Code 1445 New York Ave NW Ste 200 Washington, DC 20005-2158	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental 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 Compliance Software
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/03/2018	5 Payee name NGP VAN	
6 Amount \$410.00	7 Payee address; City; State: Zip Code 1445 New York Ave NW Ste 200 Washington, DC 20005-2158	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental 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 Compliance Software
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/31/2018	5 Payee name Office Max	
6 Amount \$350.00	7 Payee address; City; State: Zip Code 1576 W Gray St Houston, TX 77019-4929	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising 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 Advertising & Marketing
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

201996

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Office Overhead/Rental	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Polling Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Printing Expense	Expense
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Travel In District
Credit Card Payment	Legal Services		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:	2. FILER NAME Lina Hidalgo	3. Filer ID (Ethics Commission Filers)
4 Date 12/10/2018	5 Payee name Platinum Parking	
6 Amount \$585.00	7 Payee address; City; State: Zip Code 1709 Sierra Meadow Ln Justin, TX 76247-6796	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Transportation Equipment & Related 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 Parking
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 11/02/2018	5 Payee name REVUP Software	
6 Amount \$500.00	7 Payee address; City; State: Zip Code 101 Redwood Shores Pkwy Ste 125 Redwood City, CA 94065-1177	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental 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 Compliance Software
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/03/2018	5 Payee name REVUP Software	
6 Amount \$500.00	7 Payee address; City; State: Zip Code 101 Redwood Shores Pkwy Ste 125 Redwood City, CA 94065-1177	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental 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 Compliance Software
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

Page - 56

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

201996

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Lina Hidalgo	3. Filer ID (Ethics Commission Filers)
4 Date 11/23/2018	5 Payee name Carroll Robinson	
6 Amount \$8,600.00	7 Payee address; City; State; Zip Code 3401 Prospect St Houston, TX 77004-7811	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contractor Labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/17/2018	5 Payee name The Charles Hotel	
6 Amount \$729.25	7 Payee address; City; State; Zip Code 1 Bennett St Cambridge, MA 02138-5707	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Travel Out Of District	(b) Description <input checked="" type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 11/21/2018	5 Payee name Miguel Torres	
6 Amount \$500.00	7 Payee address; City; State; Zip Code 1223 Gentle Bend Dr Missouri City, TX 77489-4115	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Events Contractor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:		2. FILER NAME Lina Hidalgo		3. Filer ID (Ethics Commission Filers)	
4 Date 11/15/2018		5 Payee name United Airlines			
6 Amount \$99.00		7 Payee address; 233 S Wacker Dr Chicago, IL 60606-7147		City; State: Zip Code	
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Travel In District		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Airfare	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
4 Date 11/15/2018		5 Payee name United Airlines			
6 Amount \$810.40		7 Payee address; 233 S Wacker Dr Chicago, IL 60606-7147		City; State: Zip Code	
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Travel Out Of District		(b) Description <input checked="" type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Airfare	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
4 Date 11/19/2018		5 Payee name United Airlines			
6 Amount \$237.80		7 Payee address; 233 S Wacker Dr Chicago, IL 60606-7147		City; State: Zip Code	
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Travel Out Of District		(b) Description <input checked="" type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Airfare	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

201996

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Lina Hidalgo	3. Filer ID (Ethics Commission Filers)
4 Date 12/10/2018	5 Payee name United Airlines	
6 Amount \$142.80	7 Payee address; City; State; Zip Code 233 S Wacker Dr Chicago, IL 60606-7147	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Travel Out Of District	(b) Description <input checked="" type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Airfare
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/10/2018	5 Payee name United Airlines	
6 Amount \$307.20	7 Payee address; City; State; Zip Code 233 S Wacker Dr Chicago, IL 60606-7147	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Travel Out Of District	(b) Description <input checked="" type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Airfare
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/17/2018	5 Payee name United Airlines	
6 Amount \$30.00	7 Payee address; City; State; Zip Code 233 S Wacker Dr Chicago, IL 60606-7147	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Travel Out Of District	(b) Description <input checked="" type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Baggage Fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

201996

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Lina Hidalgo	3. Filer ID (Ethics Commission Filers)
4 Date 11/06/2018	5 Payee name Univision Communications, Inc	
6 Amount \$31,325.00	7 Payee address; City; 3200 Express Dr S Central Islip, NY 11749-5014	State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising 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 Ad Buy
	9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
4 Date 11/14/2018	5 Payee name Univision Communications, Inc	
6 Amount \$2,964.00	7 Payee address; City; 3200 Express Dr S Central Islip, NY 11749-5014	State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising 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 Ad Buy
	9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
4 Date 12/20/2018	5 Payee name Verizon Wireless	
6 Amount \$293.66	7 Payee address; City; PO Box 15023 Worcester, MA 01615-0023	State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental 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 Campaign Phone
	9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

201996

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Lina Hidalgo	3. Filer ID (Ethics Commission Filers)
4 Date 12/18/2018	5 Payee name Wal-Mart	
6 Amount \$237.07	7 Payee address; City; State: Zip Code 111 Yale St Houston, TX 77007-3730	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising 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 Advertising & Marketing
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/26/2018	5 Payee name Webscribble.com	
6 Amount \$99.00	7 Payee address; City; State: Zip Code 216 River St Ste 200 Troy, NY 12180-3848	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental 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 Website
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/27/2018	5 Payee name Webscribble.com	
6 Amount \$399.00	7 Payee address; City; State: Zip Code 216 River St Ste 200 Troy, NY 12180-3848	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental 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 Website
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

201996

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Lina Hidalgo	3. Filer ID (Ethics Commission Filers)
4 Date 12/04/2018	5 Payee name Cody Wheeler	
6 Amount \$3,000.00	7 Payee address; City; State; Zip Code 2007 S Rayburn Ct Pasadena, TX 77502-5556	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contractor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/04/2018	5 Payee name Xochi	
6 Amount \$240.53	7 Payee address; City; State; Zip Code 1777 Walker St Houston, TX 77010-5023	
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 Meals
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

Page - 62

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

IN-KIND CONTRIBUTION OR POLITICAL EXPENDITURE FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

The Instruction Guide explains how to complete this form.		1. Total pages Schedule T:
2. FILER NAME Lina Hidalgo		3. Filer ID (Ethics Commission Filers)
4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee United Airlines		
5 Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input checked="" type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC <input type="checkbox"/> Schedule B-SS		
6 Dates of travel 11/17/2018	7 Name of person(s) traveling Lina Hidalgo	
	8 Departure city or name of departure location Houston, TX	
	9 Destination city or name of destination location Washington, DC	
10 Means of transportation COMMAIR	11 Purpose of travel (including name of conference, seminar, or other event) Fundraising Meeting	
4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee United Airlines		
5 Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input checked="" type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC <input type="checkbox"/> Schedule B-SS		
6 Dates of travel 12/12/2018	7 Name of person(s) traveling Lina Hidalgo	
	8 Departure city or name of departure location Houston, TX	
	9 Destination city or name of destination location Boston, MA	
10 Means of transportation COMMAIR	11 Purpose of travel (including name of conference, seminar, or other event) County Executives Meeting	
4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee Hilton Hotels		
5 Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input checked="" type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC <input type="checkbox"/> Schedule B-SS		
6 Dates of travel 11/17/2018 And 11/20/2018	7 Name of person(s) traveling Lina Hidalgo	
	8 Departure city or name of departure location Houston, TX	
	9 Destination city or name of destination location Washington, DC	
10 Means of transportation Lodging	11 Purpose of travel (including name of conference, seminar, or other event) Fundraising Meeting	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

IN-KIND CONTRIBUTION OR POLITICAL EXPENDITURE FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

The Instruction Guide explains how to complete this form.		1. Total pages Schedule T:
2. FILER NAME Lina Hidalgo		3. Filer ID (Ethics Commission Filers)
4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee Hilton Hotels		
5 Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input checked="" type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC <input type="checkbox"/> Schedule B-SS		
6 Dates of travel 12/4/2018	7 Name of person(s) traveling Lina Hidalgo	
	8 Departure city or name of departure location Houston, TX	
	9 Destination city or name of destination location New York, NY	
10 Means of transportation Lodging	11 Purpose of travel (including name of conference, seminar, or other event) Fundraising trip	
4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee United Airlines		
5 Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input checked="" type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC <input type="checkbox"/> Schedule B-SS		
6 Dates of travel 12/12/2018	7 Name of person(s) traveling Lina Hidalgo	
	8 Departure city or name of departure location Houston, TX	
	9 Destination city or name of destination location Boston, MA	
10 Means of transportation COMMAIR	11 Purpose of travel (including name of conference, seminar, or other event) County Executives Meeting	
4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee United Airlines		
5 Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input checked="" type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC <input type="checkbox"/> Schedule B-SS		
6 Dates of travel 12/14/2018	7 Name of person(s) traveling Lina Hidalgo	
	8 Departure city or name of departure location Boston, MA	
	9 Destination city or name of destination location Houston, TX	
10 Means of transportation COMMAIR	11 Purpose of travel (including name of conference, seminar, or other event) County Executives Meeting	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

IN-KIND CONTRIBUTION OR POLITICAL EXPENDITURE FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

The Instruction Guide explains how to complete this form.		1. Total pages Schedule T:
2. FILER NAME Lina Hidalgo		3. Filer ID (Ethics Commission Filers)
4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee United Airlines		
5 Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input checked="" type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC <input type="checkbox"/> Schedule B-SS		
6 Dates of travel 12/12/2018	7 Name of person(s) traveling Lina Hidalgo	
	8 Departure city or name of departure location Houston, TX	
	9 Destination city or name of destination location Boston, MA	
10 Means of transportation BAGFEES	11 Purpose of travel (including name of conference, seminar, or other event) County Executives Meeting	
4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee The Charles Hotel		
5 Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input checked="" type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC <input type="checkbox"/> Schedule B-SS		
6 Dates of travel 12/12/2018	7 Name of person(s) traveling Lina Hidalgo	
	8 Departure city or name of departure location Houston, TX	
	9 Destination city or name of destination location Cambridge, MA	
10 Means of transportation Lodging	11 Purpose of travel (including name of conference, seminar, or other event) County Executives Conferrece	

RECORDER'S MEMORANDUM:

At the time of recordation, this instrument was found to be inadequate for the best photographic reproduction because of illegibility, carbon or photo copy, discolored paper, etc. All blockouts, additions and changes were present at the time the instrument was filed and recorded.

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED