

Official Public Records of Harris County Diane Trautman County Clerk

## Campaign Finance Report

	A STRATEGY OF WARRAY OF WARRAY OF WARRAY OF WARRAY	COUNTY CLERK HARRIS COUNTY, TEXAS
FileNo:	202089	· · · · · ·
Received By Clerk:	1/15/2020	
File Date:	January 15, 2020	•
Office:	County Judge	
Candidate:	Hidalgo, Lina	
Treasurer:	Pickett, G.Troy	
Category:	Contributions And Expenditures	
Delivered By:	Courier	
Туре: СО	R	

Harris County No Fee

#### CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

# FORM C/OH COVER SHEET PG 1

The C/OH Instruction	Guide explains how	to complete this form.	1. Filer ID (Ethics Commis	sion Filers)	2. Total pages	s filed:
3 CANDIDATE/	MS/MRS/MR	FIRST		MI	OFFICE	JSE ONLY
OFFICEHOLDER		Lina			Date Received	
NAME	NICKNAME	LAST		SUFFIX		
	[	Hidalgo		4		
4 CANDIDATE/	ADDRESS /PO BOX:	APT/SUITE # CITY	STATE:	ZIP CODE		
OFFICEHOLDER ADDRESS	PO Box 88392	Houston	ТХ	77288	Date Hand-delivered	or Date Postmarked
Change of Address						
5 CANDIDATE/	AREA CODE P	HONE NUMBER	EXTENSIO	N	Receipt #	Amount \$
OFFICEHOLDER PHONE	(713) 58	4-5074				
6 CAMPAIGN	MS/MRS/MR	FIRST		MI	Date Processed	-lt
TREASURER		G.Troy			Date Imaged	
NAME	NICKNAME	LAST		SUFFIX	Date maged	
		Pickett				
7 CAMPAIGN	STREET ADDRESS:	APT/SUITE #	CITY	STATE:	ZIP CODE	
TREASURER ADDRESS (Residence or Business)	2222 Bissonnet Street	Ste 203	Houston	ТХ	77005	
8 CAMPAIGN	AREA CODE	PHONE NUMBER	EXTENSIO	N		
TREASURER PHONE	(713) 58	9-8692				
9 REPORT TYPE	January 15	30th day before electi	<u> </u>	noff ceeded \$500 limit		ter campaign tresurer ht (officeholder only) (Attach- COH-FR)
	Month Day	Year		Month	Day Ye	
10 PERIOD COVERED	07/01/2019		ROUGH	World	12/31/2019	a
11 ELECTION	ELECTION DAT Month Day	E ELECTION Year Drima	rv 🔲 I	Runoff 🔽 ( Special	Other	-
12 OFFICE	OFFICE HELD (if any)	<b></b>	1	3 OFFICE SOUGH	ዛፓ (if known)	
	Harris County Ju	dge		Harris Count	y Judge	
		GO TO PA	GE 2			
Forms provided by Texas I	Ethics Commission	www.ethics.state.	tx.us			Revised 9/8/2015

#### 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)	SUPPORT THE CANDIDATE / OF	DLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURE FICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITH NDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS	OUT THE CANDIDATE'S OR OFFICEHOLDER'S
	COMMITTEE TYPE	COMMITTEE NAME	
	GENERAL	Teamsters Local Union #988	
		COMMITTEE ADDRESS 4303 N Sam Houston Pkwy E Houston, TX 77032	
		COMMITTEE CAMPAIGN TREASURER NAME	
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS	Υ
	COMMITTEE TYPE	COMMITTEE NAME	
	GENERAL	Pipefitters Local Union No. 211 PAC	
		COMMITTEE ADDRESS 1301 W 13th St Ste A Deer Park, TX 77536	
	ć	COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
	COMMITTEE TYPE	COMMITTEE NAME	
	GENERAL	Houston Pilots PAC	
	SPECIFIC	COMMITTEE ADDRESS	······································
		203 Deerwood Glen Dr Deer Park, TX 77536	
		COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	

COMMITTEE TYPE	
GENERAL	Boating Trades Association of Metro Houston PAC
	COMMITTEE ADDRESS
	8909 Knight Rd Houston, TX 77054
	COMMITTEE CAMPAIGN TREASURER ADDRESS
COMMITTEE TYPE	COMMITTEE NAME
GENERAL	International Union of Operating Engineers Local U
	COMMITTEE ADDRESS
_	1125 17th St NW Washington, DC 20036
	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS
COMMITTEE TYPE	COMMITTEE NAME
GENERAL	International Longshoremen's Association #1351 PAC
	COMMITTEE ADDRESS
	7524 Avenue N Houston, TX 77012
	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS
COMMITTEE TYPE	COMMITTEE NAME
	West Gulf Maritime Association PAC
SPECIFIC	COMMITTEE ADDRESS
	Turning Basin Drive East Loop N 1717 Eas Houston, TX 77029
	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

`

	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL	Amegy Bank PAC			
	SPECIFIC	COMMITTEE ADDRESS			
		4400 Post Oak Pkwy Houston, TX 77027			
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRESS			
17 CONTRIBUTION TOTALS		CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$1,251.00		
	2 TOTAL POLITICAL (OTHER THAN PLE	CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$152,455.21		
EXPENDITURE TOTALS	3 TOTAL POLITICAL	EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$0.00		
	4 TOTAL POLITICAL EXPENDITURES \$				
CONTRIBUTION BALANCE	5 TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD \$215,542.				
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF THE REPORTING PERIOD	\$1,400.00		
AFFIX NOTARYS Sworn to and subsci	KATHRYN L CALDERON P 131182352 NOTARY PUBLIC, STATE O MY COMMISSION EXPI JUNE 19, 202	ADILLA TEXAS RES 1 Signature of Candida			
Kathron Cala	lun Palith	Kathmh Calder Prdulh	Epecutive Assistant		
Signature (of officer adr			officer administering oath		
Forms provided by Texas E	thics Commission	www.ethics.state.tx.us	Revised 9/8/2015		

٠

.

## SUBTOTALS - COH

#### FORM C/OH COVER SHEET PG 3

19.	FILER NAME Lina Hidalgo20.	FILER ID (Ethics Commission Filers)
21.	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTALS AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$146,267.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$6,188.21
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$0.00
4.	SCHEDULE E: LOANS	\$0.00
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIO	NS \$106,096.20
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$0.00
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUT	10NS \$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 BUSINES	S OF C/OH \$0.00
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUT	FIONS \$0.00
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS AND CONTRIBUTIONS RETU TO FILER	RNED \$1,833.51

0

## SCHEDULE A1

The Ins	struction Guide explains how to complete this	form.	1. Total pages Schedule A1: not available	
2. FILER NAME Lina Hidalgo			3. Filer ID (Ethics Commission F	ilers)
4. Date	5. Full name of contributor		7. Amount of contribution (\$)	
07/07/2019	Harry Garewal			\$100.00
	6. Contributor address; City; State	; ZIP Code		
	2746 W Fillmore St Ste B Phoenix, AZ 85009-4303			
8. Principal occu Executive Co	pation / Job title (See Instructions)		yer (See Instructions) elf Employed	
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)	<u> </u>
07/07/2019	Bashar Kalai			\$5,000.00
	6. Contributor address; City; State	; ZIP Code		\$3,000.00
	11314 Smithdale Rd Houston, TX 77024-6747			
8. Principal occu President/CE	oation / Job title (See Instructions) O		yer (See Instructions) merapex Corporation	
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)	
07/07/2019	William Perkison			\$25.00
	6. Contributor address; City; State	; ZIP Code		•••••
	5235 Lymbar Dr Houston, TX 77096-5215			
8. Principal occu Physician	bation / Job title (See Instructions)		yer (See Instructions) IT Health	
4. Date	5. Full name of contributorout-of-state PAC	·····	7. Amount of contribution (\$)	
07/07/2019	Paula G. Pozmantier			\$100.00
	6. Contributor address; City; State	; ZIP Code		
	1000 Uptown Park Blvd Apt 242 Houston, TX 77056	5-3243		
8. Principal occu Not Employe	pation / Job title (See Instructions) d		yer (See Instructions) ot Employed	
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)	· · · · · · · · · · · · · · · · · · ·
07/07/2019	Paula G. Pozmantier			\$100.00
	6. Contributor address; City; State	; ZIP Code		
	1000 Uptown Park Blvd Apt 242 Houston, TX 77056	5-3243		
	pation / Job title (See Instructions)		yer (See Instructions)	
Not Employe	d	N	ot Employed	

## SCHEDULE A1

The In	struction Guide explains how t	o complete this fo	orm.	1. Total pages Schedule A1: not available	
2. FILER NAME Lina Hidalgo				3. Filer ID (Ethics Commission F	ilers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
07/14/2019	Melissa Noriega				\$25.00
	6. Contributor address;	City; State;	ZIP Code		
	4430 Pease St Houston, TX 77023	3-3024			
8. Principal occu Senior Cons	pation / Job title (See Instruction: ultant	s)		yer (See Instructions) wiftwater Solutions	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
07/14/2019	Melissa Noriega				\$25.00
	6. Contributor address;	City; State;	ZIP Code		
	4430 Pease St Houston, TX 77023	3-3024			
8. Principal occu Senior Cons	pation / Job title (See Instructions	s)		yer (See Instructions) wiftwater Solutions	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
07/14/2019	John Zavitsanos				\$150.00
	6. Contributor address;	City; State;	ZIP Code		
	1221 McKinney St Ste 2500 Hous	ston, TX 77010-2021			
8. Principal occu Partner	pation / Job title (See Instruction:	5)		yer (See Instructions) ZA	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
07/28/2019	Alan Ainsworth				\$100.00
	6. Contributor address;	City; State;	ZIP Code		
	7425 Haywood Dr Houston, TX 7	7061-1505			
8. Principal occu Professor	pation / Job title (See Instruction	s)		yer (See Instructions) Jouston Community College	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	·*
08/04/2019	Amelia Ann Alexande				\$100.00
	6. Contributor address;	City; State;	ZIP Code		
<u> </u>	3114 Fairhope St Houston, TX 77	025-3229			
8. Principal occu Not Employ	pation / Job title (See Instructions	s)		yer (See Instructions) fot Employed	

## SCHEDULE A1

The In:	struction Guide explains how t	o complete this fo	orm.	1. Total pages Schedule A1: not available	
2. FILER NAME Lina Hidalgo				3. Filer ID (Ethics Commission F	ilers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
08/04/2019	Betty Baer				\$15.00
•	6. Contributor address;	City; State;	ZIP Code		
	9023 Ilona Ln Houston, TX 77025	5-3619			
8. Principal occu Not Employe	pation / Job title (See Instructions	5)	· · ·	yer (See Instructions) ot Employed	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	· <u> </u>
08/04/2019	Eduardo Canales				\$50.00
	6. Contributor address;	City; State;	ZIP Code		
	7021 Bevington Dr Corpus Christ	i, TX 78413-5318			
8. Principal occu Director	pation / Job title (See Instructions	5)		yer (See Instructions) THRC	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
08/04/2019	Eduardo Canales				\$15.00
	6. Contributor address;	City; State;	ZIP Code		
	7021 Bevington Dr Corpus Christ	i, TX 78413-5318			
8. Principal occu Director	pation / Job title (See Instruction:	5)		yer (See Instructions) THRC	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
08/04/2019	Eduardo Canales				\$100.00
	6. Contributor address;	City; State;	ZIP Code		
	7021 Bevington Dr Corpus Christ	i, TX 78413-5318			
8. Principal occu Director	pation / Job title (See Instruction:	5)		yer (See Instructions) THRC	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	· · · · · · · · · · · · · · · · · · ·
08/04/2019	David L. Collins Sr.				\$25.00
	6. Contributor address;	City; State;	ZIP Code		
	7719 Chasewood Dr Missouri Cit	y, TX 77489-1837			
	pation / Job title (See Instruction	5)		yer (See Instructions)	
Civil Engine	er		S	elf	

SCHEDULE A1

The	Instruction Guide explains how	to complete this fo	erm.	1. Total pages Schedule A1: not available	
2. FILER NAM Lina Hidalgo				3. Filer ID (Ethics Commission I	-ilers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
08/04/2019	Kathryn Hale				\$500.00
	6. Contributor address;	City; State;	ZIP Code		
	569 N Post Oak Ln Houston, TX	77024-4630			
8. Principal oc Not Emplo	cupation / Job title (See Instruction byed	าร)		yer (See Instructions) lot Employed	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
08/04/2019	Jorge Hidalgo				\$150.00
	6. Contributor address;	City; State;	ZIP Code		
	1701 Hermann Dr Houston, TX	77004-7452			
8. Principal oc Executive	cupation / Job title (See Instruction	าร)	9 Emplo A	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
08/04/2019	Kevin Kulish		201		\$150.00
	6. Contributor address;	City; State;	ZIP Code		
	1809 Driscoll St Houston, TX 77	019-5716			
8. Principal oc Engineer	cupation / Job title (See Instruction	ns)		yer (See Instructions) alos Energy	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	<u> </u>
08/04/2019	Marlane Orth				\$100.00
	6. Contributor address;	City; State;	ZIP Code		
	3835 Grennoch Ln Houston, TX	77025-2407			
8. Principal oc Not Emplo	cupation / Job title (See Instruction byed	ns)		yer (See Instructions) lot Employed	
4. Date	5. Full name of contributor	out-of-state PAC	····	7. Amount of contribution (\$)	<b>_</b>
08/04/2019	William Perkison				\$25.00
	6. Contributor address;	City; State;	ZIP Code		
	5235 Lymbar Dr Houston, TX 7	7096-5215			
	cupation / Job title (See Instruction	ns)		yer (See Instructions)	
Physician				T Health	

## SCHEDULE A1

The Ins	struction Guide explains how to complete this form	n.	1. Total pages Schedule A1: not available	
2. FILER NAME Lina Hidalgo			3. Filer ID (Ethics Commission Filers	5)
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)	
08/04/2019	Ben Reyes			\$25.00
	6. Contributor address; City; State;	ZIP Code		
	2322 Eaglerock Dr Houston, TX 77080-5204			
8. Principal occu Retired	pation / Job title (See Instructions)		ver (See Instructions) etired	
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)	
08/04/2019	Marianne Smith			\$15.00
	6. Contributor address; City; State;	ZIP Code		
	818 Highland St Houston, TX 77009-6511			
8. Principal occu HR Consulta	pation / Job title (See Instructions) nt		ver (See Instructions) layer Smith Consulting	
4. Date	5. Full name of contributor		7. Amount of contribution (\$)	· · · · · · · · · · · · · · · · · · ·
08/04/2019	Paul SoRelle			\$20.00
	6. Contributor address; City; State;	ZIP Code		
	5814 Warm Springs Rd Houston, TX 77035-2428			
8. Principal occu Not Employe	pation / Job title (See Instructions)		ver (See Instructions) ot Employed	
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)	
08/04/2019	Rudy Vasquez			\$250.00
	6. Contributor address; City; State;	ZIP Code		
	5812 Irvington Blvd Houston, TX 77009-1337			
8. Principal occu Attorney	pation / Job title (See Instructions)		yer (See Instructions) he Law Offices of Rudy G Vasquez PC	
4. Date	5. Full name of contributor Out-of-state PAC		7. Amount of contribution (\$)	
08/11/2019	Roselyn Flannigan			\$20.00
	6. Contributor address; City; State;	ZIP Code		<i>\$</i> 20100
	4330 Cedar Ridge Trl Houston, TX 77059-3114			
	pation / Job title (See Instructions)		ver (See Instructions)	
Not Employe	d	N	ot Employed	

SCHEDULE A1

The Ins	truction Guide explains how to complete this fo	orm.	1. Total pages Schedule A1: not available
2. FILER NAME Lina Hidalgo			3. Filer ID (Ethics Commission Filers)
4. Date	5. Full name of contributor		7. Amount of contribution (\$)
08/11/2019	Melissa Noriega		\$25.00
	6. Contributor address; City; State;	ZIP Code	
	4430 Pease St Houston, TX 77023-3024		
8. Principal occur Senior Consu	Dation / Job title (See Instructions)		yer (See Instructions) wiftwater Solutions
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
08/11/2019	Tony Reyes		\$50.00
	6. Contributor address; City; State;	ZIP Code	
	19226 Water Bridge Dr Cypress, TX 77433-3174		
	pation / Job title (See Instructions)		ver (See Instructions)
International		Pe	enco Group. Inc.
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
08/25/2019	Lizza Harrison		\$200.00
	6. Contributor address; City; State;	ZIP Code	
	14707 Fm 2769 Volente, TX 78641-9675		
8. Principal occup Marketing co	pation / Job title (See Instructions)		ver (See Instructions) elf
4. Date	5. Full name of contributor		7. Amount of contribution (\$)
09/01/2019	Betty Baer		\$15.00
	6. Contributor address; City; State;	ZIP Code	
	9023 Ilona Ln Houston, TX 77025-3619		
8. Principal occup Not Employe	pation / Job title (See Instructions) d		ver (See Instructions) ot Employed
4. Date	5. Full name of contributor Out-of-state PAC	H	7. Amount of contribution (\$)
09/01/2019	Eduardo Canales		\$50.00
	6. Contributor address; City; State;	ZIP Code	
	7021 Bevington Dr Corpus Christi, TX 78413-5318		
8. Principal occup Director	pation / Job title (See Instructions)		ver (See Instructions) THRC

:

## SCHEDULE A1

The Ins	truction 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	5. Full name of contributor	e PAC		7. Amount of contribution (\$)	
09/01/2019	Eduardo Canales			\$	100.00
	6. Contributor address; City;	State; ZI	P Code		
	7021 Bevington Dr Corpus Christi, TX 78413-5	318			
8. Principal occu Director	pation / Job title (See Instructions)			ver (See Instructions) FHRC	
4. Date	5. Full name of contributorout-of-stat	e PAC		7. Amount of contribution (\$) *	
09/01/2019	Kathryn Hale			\$	500.00
	6. Contributor address; City;	State; ZII	P Code		
	569 N Post Oak Ln Houston, TX 77024-4630				
8. Principal occu Not Employe	pation / Job title (See Instructions)			ver (See Instructions) ot Employed	
4. Date	5. Full name of contributor	e PAC		7. Amount of contribution (\$)	
09/01/2019	Jorge Hidalgo			\$	3150.00
	6. Contributor address; City;	State; ZII	P Code		
	1701 Hermann Dr Houston, TX 77004-7452				
8. Principal occu Executive	pation / Job title (See Instructions)		9 Employ Al	rer (See Instructions)	
4. Date	5. Full name of contributor	e PAC		7. Amount of contribution (\$)	
09/01/2019	William Perkison	2			\$25.00
	6. Contributor address; City;	State; ZI	P Code		
	5235 Lymbar Dr Houston, TX 77096-5215				
8. Principal occu Physician	pation / Job title (See Instructions)		• •	rer (See Instructions) T Health	
4. Date	5. Full name of contributor	e PAC		7. Amount of contribution (\$)	
09/01/2019	Ben Reyes				\$25.00
	6. Contributor address; City;	State; ZI	P Code		
	2322 Eaglerock Dr Houston, TX 77080-5204				
	pation / Job title (See Instructions)			ver (See Instructions)	
Retired			Re	etired	

## SCHEDULE A1

The Ins	struction Guide explains how to comple	te this form.		1. Total pages Schedule A1: not available	
2. FILER NAME Lina Hidalgo				3. Filer ID (Ethics Commission File	ers)
4. Date	5. Full name of contributor	state PAC		7. Amount of contribution (\$)	
09/01/2019	Marianne Smith				\$15.00
	6. Contributor address; City;	State; Z	IP Code		
	818 Highland St Houston, TX 77009-6511				
8. Principal occu HR Consulta	pation / Job title (See Instructions)			ver (See Instructions) ayer Smith Consulting	
4. Date	5. Full name of contributor	state PAC		7. Amount of contribution (\$)	
09/01/2019	Paul SoRelle				\$20.00
	6. Contributor address; City;	State; Z	IP Code		
	5814 Warm Springs Rd Houston, TX 77035-	2428			
8. Principal occu Not Employe	pation / Job title (See Instructions)			ver (See Instructions) ot Employed	
4. Date	5. Full name of contributor	state PAC		7. Amount of contribution (\$)	
09/01/2019	Rudy Vasquez				\$250.00
	6. Contributor address; City;	State; Z	IP Code		
	5812 Irvington Blvd Houston, TX 77009-133	7			
8. Principal occu Attorney	pation / Job title (See Instructions)		1	er (See Instructions) he Law Offices of Rudy G Vasquez PC	
4. Date	5. Full name of contributor	state PAC		7. Amount of contribution (\$)	
09/08/2019	David L. Collins Sr.				\$25.00
	6. Contributor address; City;	State; Z	IP Code		
	7719 Chasewood Dr Missouri City, TX 7748	9-1837			
8. Principal occu Civil Engined	pation / Job title (See Instructions) er		9 Employ Se	er (See Instructions) If	
4. Date	5. Full name of contributor	state PAC		7. Amount of contribution (\$)	<u> </u>
09/08/2019	Roselyn Flannigan				\$20.00
	6. Contributor address; City;	State; Z	IP Code		
	4330 Cedar Ridge Trl Houston, TX 77059-3	14			
	pation / Job title (See Instructions)	<u> </u>		er (See Instructions)	
Not Employe	d		No No	ot Employed	

## SCHEDULE A1

The Ins	truction 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	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
09/08/2019	Melissa Noriega		\$25.00
	6. Contributor address; City; State; Zi	P Code	
	4430 Pease St Houston, TX 77023-3024		
8. Principal occur Senior Consu	pation / Job title (See Instructions) Itant		ver (See Instructions) wiftwater Solutions
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
09/08/2019	Tony Reyes		\$50.00
	6. Contributor address; City; State; Z	P Code	
	19226 Water Bridge Dr Cypress, TX 77433-3174		
	pation / Job title (See Instructions)		ver (See Instructions)
International		Pe	enco Group. Inc.
4. Date	5. Full name of contributor		7. Amount of contribution (\$)
09/15/2019	Anthony Haley	<b>O</b> M	\$1,000.00
	6. Contributor address; City; State; Zi	P Code	
	1212 Guadalupe St Apt 1003 Austin, TX 78701-1810 ·		
8. Principal occup Consultant	pation / Job title (See Instructions)		/er (See Instructions) MWK LLC
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
09/29/2019	Mike Collier		\$500.00
	6. Contributor address; City; State; Z	P Code	
	2334 Cumberland Oak Ct Kingwood, TX 77345-2150		
8. Principal occup Consultant	pation / Job title (See Instructions)		ver (See Instructions)
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
09/29/2019	Sarah Eckhardt		\$150.00
	6. Contributor address; City; State; Z	P Code	
	700 Lavaca St Austin, TX 78701-3101		
8. Principal occur	pation / Job title (See Instructions)	9 Employ	/er (See Instructions)
Travis Count	y Judge		ravis County

#### SCHEDULE A1

The Ins	truction Guide explains how to complete	e this form.		1. Total pages Schedule A1: not available	
2. FILER NAME Lina Hidalgo				3. Filer ID (Ethics Commission Filers)	)
4. Date	5. Full name of contributor	ate PAC		7. Amount of contribution (\$)	
09/29/2019	Brooke Goodlett			s	500.00
	6. Contributor address; City;	State; ZI	P Code		
	8302 Los Ranchos Dr Austin, TX 78749-3901		l		
8. Principal occur Attorney	pation / Job title (See Instructions)		• •	er (See Instructions) ilson Sonsini Goodrich & Rosati P.C.	
4. Date	5. Full name of contributor	tate PAC		7. Amount of contribution (\$)	
09/29/2019	Laura Hernandez			s	250.00
	6. Contributor address; City;	State; ZI	P Code		
	2401 Manor Rd Apt 108 Austin, TX 78722-20	)12		·	
8. Principal occup Consultant	pation / Job title (See Instructions)		9 Employ Se	rer (See Instructions)	:
4. Date	5. Full name of contributor	tate PAC		7. Amount of contribution (\$)	
09/29/2019	Ben Reyes				\$25.00
	6. Contributor address; City;	State; ZI	P Code		
	2322 Eaglerock Dr Houston, TX 77080-5204				
8. Principal occup Retired	pation / Job title (See Instructions)			er (See Instructions) etired	
4. Date	5. Full name of contributor	tate PAC		7. Amount of contribution (\$)	
09/29/2019	Marc Rodriguez			\$1,	,000.00
	6. Contributor address; City;	State; ZI	P Code		
	1122 Colorado St Austin, TX 78701-2164				
8. Principal occur Lobbyist	pation / Job title (See Instructions)			ver (See Instructions) If-employed	
4. Date	5. Full name of contributor	tate PAC		7. Amount of contribution (\$)	
09/29/2019	Brian Stansbury				\$50.00
	6. Contributor address; City;	State; ZI	P Code		
	1719 N Barton St Arlington, VA 22201-4011				
	pation / Job title (See Instructions)		• •	rer (See Instructions)	
Attorney			KI	ing & Spalding LLP	

SCHEDULE A1

·					
The li	nstruction Guide explains how	to complete this fo	rm.	1. Total pages Schedule A1: not available	
2. FILER NAME Lina Hidalgo	E			3. Filer ID (Ethics Commission I	-ilers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/30/2019	Betty Baer				\$15.00
	6. Contributor address;	City; State;	ZIP Code		
	9023 Ilona Ln Houston, TX 7702	:5-3619			
8. Principal occ Not Emplo	cupation / Job title (See Instruction yed	is)		yer (See Instructions) ot Employed	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/30/2019	Eduardo Canales .				\$50.00
	6. Contributor address;	City; State;	ZIP Code		
	7021 Bevington Dr Corpus Chris	ti, TX 78413-5318			
8. Principal oco Director	cupation / Job title (See Instruction	ıs)		yer (See Instructions) THRC	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/30/2019	Eduardo Canales				\$100.00
	6. Contributor address;	City; State;	ZIP Code		
	7021 Bevington Dr Corpus Chris	sti, TX 78413-5318			
8. Principal oco Director	cupation / Job title (See Instruction	15)		yer (See Instructions) THRC	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/30/2019	Perla Cavazos				\$250.00
	6. Contributor address;	City; State;	ZIP Code		
	1108 Fiesta St Austin, TX 78702	-3011			
8. Principal oco Governme	cupation / Job title (See Instruction nt Affairs	าร)		yer (See Instructions)	```
4. Date	5. Full name of contributor	out-of-state PAC	l,,,	7. Amount of contribution (\$)	<u> </u>
09/30/2019	Kathryn Hale	_	_		\$500.00
	6. Contributor address;	City; State;	ZIP Code		••••••
	569 N Post Oak Ln Houston, TX	77024-4630			
	cupation / Job title (See Instruction	ns)	· · ·	yer (See Instructions)	
Not Emplo	byed		N	lot Employed	

SCHEDULE A1

The In	struction Guide explains how t	o complete this fo	rm.	1. Total pages Schedule A1: not available
2. FILER NAME Lina Hidalgo				3. Filer ID (Ethics Commission Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)
09/30/2019	Paul SoRelle			\$20.00
	6. Contributor address;	City; State;	ZIP Code	
	5814 Warm Springs Rd Houston,	TX 77035-2428		
8. Principal occu Not Employ	upation / Job title (See Instruction	s)		yer (See Instructions) ot Employed
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)
09/30/2019	Rudy Vasquez			\$250.00
	6. Contributor address;	City; State;	ZIP Code	
	5812 Irvington Blvd Houston, TX	77009-1337		
	upation / Job title (See Instruction	s)		yer (See Instructions)
Attorney			T	he Law Offices of Rudy G Vasquez PC
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)
10/06/2019	David L. Collins Sr.			\$25.00
	6. Contributor address;	City; State;	ZIP Code	
	7719 Chasewood Dr Missouri Cit	y, TX 77489-1837		
8. Principal occu Civil Engine	upation / Job title (See Instruction: cer	s)		ver (See Instructions) elf
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)
10/06/2019	Roselyn Flannigan			\$20.00
	6. Contributor address;	City; State;	ZIP Code	
	4330 Cedar Ridge Trl Houston, T.	X 77059-3114		
8. Principal occu Not Employ	upation / Job title (See Instructions	s)	1	yer (See Instructions) ot Employed
4. Date	5. Full name of contributor	out-of-state PAC	······	7. Amount of contribution (\$)
10/06/2019	Melissa Noriega			\$25.00
	6. Contributor address;	City; State;	ZIP Code	
	4430 Pease St Houston, TX 77023	3-3024		
	upation / Job title (See Instruction	s)	9 Employ	yer (See Instructions)
Senior Cons	ultant		S	wiftwater Solutions

## SCHEDULE A1

The I	nstruction Guide explains how to complete this fo	rm.	1. Total pages Schedule A1: not available	
2. FILER NAME Lina Hidalgo	Ξ		3. Filer ID (Ethics Commission Filers)	
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)	
10/06/2019	William Perkison		\$25.00	
	6. Contributor address; City; State;	ZIP Code		
	5235 Lymbar Dr Houston, TX 77096-5215			
8. Principal occ Physician	cupation / Job title (See Instructions)		yer (See Instructions) IT Health	
4. Date	5. Full name of contributorout-of-state PAC _		7. Amount of contribution (\$)	
10/06/2019	Tony Reyes		\$50.00	
	6. Contributor address; City; State;	ZIP Code		
	19226 Water Bridge Dr Cypress, TX 77433-3174			
	cupation / Job title (See Instructions) al Logistics		yer (See Instructions) enco Group. Inc.	
4. Date	5. Full name of contributor		7. Amount of contribution (\$)	
10/06/2019	Marianne Smith		\$15.00	
	6. Contributor address; City; State;	ZIP Code		
	818 Highland St Houston, TX 77009-6511			
8. Principal occ HR Consul	supation / Job title (See Instructions) tant		yer (See Instructions) layer Smith Consulting	
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)	
10/07/2019	Tony Reyes		\$50.00	
	6. Contributor address; City; State;	ZIP Code		
	19226 Water Bridge Dr Cypress, TX 77433-3174			
8. Principal occ Internation	supation / Job title (See Instructions) al Logistics		yer (See Instructions) enco Group. Inc.	
4. Date	5. Full name of contributorout-of-state PAC	•	7. Amount of contribution (\$)	
10/08/2019	Melissa Noriega		\$25.00	
	6. Contributor address; City; State;	ZIP Code		
	4430 Pease St Houston, TX 77023-3024			
	upation / Job title (See Instructions)		yer (See Instructions)	
Senior Con	sultant	S	wiftwater Solutions	

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

.

٢

#### SCHEDULE A1

The Ins	truction Guide explains how to complete this for	m.	1. Total pages Schedule A1: not available
2. FILER NAME Lina Hidalgo			3. Filer ID (Ethics Commission Filers)
4. Date	5. Full name of contributor		7. Amount of contribution (\$)
10/11/2019	Barbara Bergin-Nader		\$2,500.00
	6. Contributor address; City; State;	ZIP Code	
	104 Laura Ln Rollingwood, TX 78746-4666		
8. Principal occu Physician	pation / Job title (See Instructions)		yer (See Instructions) exas Orthopedics Sports & Rehabilitation
4. Date	5. Full name of contributor		7. Amount of contribution (\$)
10/11/2019	Mike Collier		\$500.00
	6. Contributor address; City; State;	ZIP Code	
	2334 Cumberland Oak Ct Kingwood, TX 77345-2150		
8. Principal occu Consultant	pation / Job title (See Instructions)		ver (See Instructions) elf
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
10/11/2019	Julian Kerker		\$250.00
	6. Contributor address; City; State;	ZIP Code	
	504 W 14th St Austin, TX 78701-1724		
8. Principal occup Attorney	pation / Job title (See Instructions)	· · ·	yer (See Instructions) CA Healthcare
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
10/11/2019	Elliot Kralj		\$1,000.00
	6. Contributor address; City; State;	ZIP Code	
	3809 Gaines Ct Austin, TX 78735-6489		
1	pation / Job title (See Instructions)		yer (See Instructions)
CEO		K	ralj Consulting
4. Date	5. Full name of contributorout-of-state PAC	<u> </u>	7. Amount of contribution (\$)
10/11/2019	Vilma Luna		\$100.00
	6. Contributor address; City; State;	ZIP Code	
	823 Congress Ave Ste 900 Austin, TX 78701-2458		
8. Principal occup Attorney	pation / Job title (See Instructions)		yer (See Instructions) illCo Partners

## SCHEDULE A1

The Ins	truction Guide explains how to	o complete this f	orm.	1. Total pages Schedule A1: not available	
2. FILER NAME Lina Hidalgo				3. Filer ID (Ethics Commission F	ilers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	•
10/11/2019	Phillips & Meachum				\$250.00
	6. Contributor address;	City; State;	ZIP Code		
	1122 Colorado St Ste 110 Austin,	TX 78701-2101			
8. Principal occu	pation / Job title (See Instructions	s)	9 Employ	yer (See Instructions)	· · · · · · · · · · · · · · · · · · ·
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
10/11/2019	John Pitts				\$1,500.00
	6. Contributor address;	City; State;	ZIP Code		
	PO Box 27130 Houston, TX 7722	7-7130			
8. Principal occu Attorney	pation / Job title (See Instructions	\$)		yer (See Instructions) elf	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
10/11/2019	Michael Singley				\$250.00
	6. Contributor address;	City; State;	ZIP Code		
	7726 Lakewood Dr Austin, TX 78	750-8104			
8. Principal occu Attorney	pation / Job title (See Instructions	(;)		yer (See Instructions) dwards Law	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
10/27/2019	David Lee				\$10,000.00
	6. Contributor address;	City; State;	ZIP Code		
	3630 Willowick Rd Houston, TX	77019-1114			
8. Principal occu Not employe	pation / Job title (See Instructions d	5)		yer (See Instructions) fot employed	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
10/27/2019	John Martinez				\$50.00
	6. Contributor address;	City; State;	ZIP Code		
	15206 Via Verde Dr Houston, TX	77083-4334			
	pation / Job title (See Instructions	\$)		ver (See Instructions)	
Engineer	1		P1	roduction Associates	

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

÷

.

SCHEDULE A1

The Ins	struction Guide explains how to complete this form	•	1. Total pages Schedule A1: not available	
2. FILER NAME Lina Hidalgo			3. Filer ID (Ethics Commission File	rs)
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)	
10/27/2019	Hamid Razavi			\$100.00
	6. Contributor address; City; State; 2	ZIP Code		
	4910 Cambridge St Sugar Land, TX 77479-3968			
8. Principal occu CEO	pation / Job title (See Instructions)		ver (See Instructions) illcroft Physicians	
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)	
10/27/2019	Karen Twitchell			\$100.00
	6. Contributor address; City; State; 2	ZIP Code		
	9 Courtlandt Pl Houston, TX 77006-4013			
8. Principal occu Vice Presider	pation / Job title (See Instructions)		yer (See Instructions) elf employed	
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)	
10/29/2019	Ben Reyes			\$25.00
	6. Contributor address; City; State; 2	ZIP Code		
	2322 Eaglerock Dr Houston, TX 77080-5204			
8. Principal occu Retired	pation / Job title (See Instructions)		ver (See Instructions) etired	
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)	
10/30/2019	Betty Baer			, \$15.00
	6. Contributor address; City; State; Z	ZIP Code		
	9023 Ilona Ln Houston, TX 77025-3619			
8. Principal occu Not Employe	pation / Job title (See Instructions)		yer (See Instructions) ot Employed	
4. Date	5. Full name of contributor Out-of-state PAC	<b>-</b>	7. Amount of contribution (\$)	
10/30/2019	Eduardo Canales			\$100.00
	6. Contributor address; City; State; 2	ZIP Code		-
	7021 Bevington Dr Corpus Christi, TX 78413-5318			
	pation / Job title (See Instructions)		yer (See Instructions)	·
Director		S	THRC	

SCHEDULE A1

The Ins	struction Guide explains how to	o complete	e this for	m.	1. Total pages Schedule A1: not available	
2. FILER NAME Lina Hidalgo					3. Filer ID (Ethics Commission File	rs)
4. Date	5. Full name of contributor	out-of-st	ate PAC		7. Amount of contribution (\$)	
10/30/2019	Rudy Vasquez					\$250.00
1	6. Contributor address;	City;	State;	ZIP Code		
	5812 Irvington Blvd Houston, TX	77009-1337	,			
8. Principal occu Attorney	pation / Job title (See Instructions	3)		· · ·	yer (See Instructions) he Law Offices of Rudy G Vasquez PC	
4. Date	5. Full name of contributor	out-of-st	ate PAC		7. Amount of contribution (\$)	· · · · · · · · · · · · · · · · · · ·
10/31/2019	Eduardo Canales					\$50.00
	6. Contributor address;	City;	State;	ZIP Code		
	7021 Bevington Dr Corpus Christi	, TX 78413	-5318			
8. Principal occu Director	pation / Job title (See Instructions	;)			yer (See Instructions) THRC	
4. Date	5. Full name of contributor	out-of-st	ate PAC		7. Amount of contribution (\$)	
10/31/2019	Paul SoRelle			701		\$20.00
	6. Contributor address;	City;	State;	ZIP Code		
	5814 Warm Springs Rd Houston, 7	TX 77035-2	428			
8. Principal occur Not Employe	pation / Job title (See Instructions d	;)		· · ·	ver (See Instructions) lot Employed	
4. Date	5. Full name of contributor	out-of-st	ate PAC		7. Amount of contribution (\$)	
11/01/2019	William Perkison					\$25.00
	6. Contributor address;	City;	State;	ZIP Code		
	5235 Lymbar Dr Houston, TX 770	96-5215				
8. Principal occu Physician	pation / Job title (See Instructions	;)			yer (See Instructions) T Health	
4. Date	5. Full name of contributor	out-of-st	ate PAC		7. Amount of contribution (\$)	
11/01/2019	Marianne Smith					\$15.00
	6. Contributor address;	City;	State;	ZIP Code		
	818 Highland St Houston, TX 770	09-6511				
	pation / Job title (See Instructions	;)			yer (See Instructions)	
HR Consulta	nt			N	layer Smith Consulting	

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

i

SCHEDULE A1

The in	struction Guide explains how	to complete thi	s form.	1	. Total pages Schedule A1: not available	
2. FILER NAME Lina Hidalgo				3	<ol> <li>Filer ID (Ethics Commission Fi</li> </ol>	lers)
4. Date	5. Full name of contributor	out-of-state P/	۹C	7	7. Amount of contribution (\$)	
11/01/2019	Donald Walker					\$100.00
	6. Contributor address;	City; Sta	ite; ZIP C	ode		
	9722 S Kensington Dr Houston,	FX 77031-2912				
8. Principal occu Not Employ	upation / Job title (See Instruction	s)	9 E		er (See Instructions) Employed	
4. Date	5. Full name of contributor	out-of-state P	AC	. 7	. Amount of contribution (\$)	
11/10/2019	Rita Bergers					\$500.00
	6. Contributor address;	City; Sta	ite; ZIP C	ode		
	1123 Berthea St Houston, TX 776	006-6469				
8. Principal occu Retired	upation / Job title (See Instruction	is)	9 E		er (See Instructions) ired	
4. Date	5. Full name of contributor	out-of-state P	AC	7	. Amount of contribution (\$)	
11/10/2019	David L. Collins Sr.					\$25.00
	6. Contributor address;	City; Sta	ite; ZIP C	ode		
	7719 Chasewood Dr Missouri Ci	ty, TX 77489-183	7			
8. Principal occu Civil Engine	upation / Job title (See Instruction	is)	9 E	Employe Seli	er (See Instructions) f	· · · · · · · · · · · · · · · · · · ·
4. Date	5. Full name of contributor	out-of-state P.	AC	7	7. Amount of contribution (\$)	
11/10/2019	Roselyn Flannigan					\$20.00
	6. Contributor address;	City; Sta	ite; ZIP C	ode		
	4330 Cedar Ridge Trl Houston, T	X 77059-3114				
8. Principal occu Not Employ	upation / Job title (See Instruction ed	is)	9 E		er (See Instructions) t Employed	
4. Date	5. Full name of contributor	out-of-state P	AC	7	7. Amount of contribution (\$)	····
11/10/2019	Melissa Noriega					\$25.00
	6. Contributor address;	City; Sta	ate; ZIP C	ode		
	4430 Pease St Houston, TX 7702	3-3024				
	upation / Job title (See Instruction	is)	9 E	• •	er (See Instructions)	
Senior Cons	ultant			Sw	iftwater Solutions	

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

.

## SCHEDULE A1

The Ins	struction 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	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
11/10/2019	Tony Reyes		\$50.00
	6. Contributor address; City; State; Zi	IP Code	
	19226 Water Bridge Dr Cypress, TX 77433-3174		
8. Principal occur International	pation / Job title (See Instructions) Logistics		yer (See Instructions) enco Group. Inc.
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
11/10/2019	Luis Sanchez		\$100.00
	6. Contributor address; City; State; Z	IP Code	
	1710 S Jefferson St Midland, TX 79701-8258		
	pation / Job title (See Instructions)		yer (See Instructions)
County Com	······································	M	Iidland County Texas
4. Date	5. Full name of contributor		7. Amount of contribution (\$)
11/17/2019	Nory Angel		\$100.00
	6. Contributor address; City; State; Zi	IP Code	
	15935 Pinyon Creek Dr Houston, TX 77095-3695		
8. Principal occur Executive Di	pation / Job title (See Instructions) rector		yer (See Instructions) EACH
4. Date	5. Full name of contributor		7. Amount of contribution (\$)
11/17/2019	David Fink		\$250.00
	6. Contributor address; City; State; Z	IP Code	
	396 Uptown Park Blvd #153 Houston, TX 77018		
8. Principal occur Not Employe	pation / Job title (See Instructions)		ver (See Instructions) ot Employed
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
11/17/2019	Domingo Garcia		\$2,500.00
	6. Contributor address; City; State; Zi	IP Code	
	400 S Zang Blvd Ste 600 Dallas, TX 75208-6641		
8. Principal occu	pation / Job title (See Instructions)	9 Employ	yer (See Instructions)
Attorney		La	aw offices of Domingo Garcia

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

1

SCHEDULE A1

The In	struction Guide explains how t	o complete tl	his for	m.	1. Total pages Schedule A1: not available	
2. FILER NAME Lina Hidalgo					3. Filer ID (Ethics Commission Fil	ers)
4. Date	5. Full name of contributor	out-of-state	PAC _		7. Amount of contribution (\$)	
11/17/2019	Nancy George					\$250.00
	6. Contributor address;	City; S	tate;	ZIP Code		
	4413 Coyle St Houston, TX 7702	3-3503				
8. Principal occu Retired	pation / Job title (See Instruction	s)			yer (See Instructions) etired	
4. Date	5. Full name of contributor	out-of-state	PAC _		7. Amount of contribution (\$)	
11/17/2019	Lance Gilliam					\$1,000.00
	6. Contributor address;	City; S	tate;	ZIP Code		
	1177 West Loop S Houston, TX 1	7027-9006				
8. Principal occu Real Estate	pation / Job title (See Instruction	s)			yer (See Instructions) Vaterman Steele Real Estate Advisors	······································
4. Date	5. Full name of contributor	out-of-state	PAC		7. Amount of contribution (\$)	
11/17/2019	Vishal Goradia					\$1,000.00
	6. Contributor address;	City; S	tate;	ZIP Code		
	3400 Montrose Blvd Apt 2201 He	ouston, TX 770	06-436	3		
8. Principal occu Business	pation / Job title (See Instruction	s)			yer (See Instructions) 'inmar International	
4. Date	5. Full name of contributor	out-of-state	PAC _		7. Amount of contribution (\$)	
11/17/2019	James Kelly					\$250.00
	6. Contributor address;	City; S	tate;	ZIP Code		
	3702 Mount Vernon St Houston,	TX 77006-4210	)			
8. Principal occu Lawyer	pation / Job title (See Instruction	s)			yer (See Instructions) /ilsonKelly.LLC	
4. Date	5. Full name of contributor	out-of-state	PAC _		7. Amount of contribution (\$)	
11/17/2019	Luke Legate					\$250.00
, · · ·	6. Contributor address;	City; S	tate;	ZIP Code		
	5025 McDade Dr Austin, TX 787	35-6396				
8. Principal occu Director	pation / Job title (See Instruction	s)		· · ·	yer (See Instructions) F. Fox Consulting	

SCHEDULE A1

The In	struction Guide explains how t	to complete this fo	orm.	1. Total pages Schedule A1: not available	
2. FILER NAME Lina Hidalgo				3. Filer ID (Ethics Commission	Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
11/17/2019	Josie Long				\$250.00
	6. Contributor address;	City; State;	ZIP Code		
	3405 Kirkfield Ct The Colony, T	X 75056-6440			
8. Principal occu Consultant	pation / Job title (See Instruction	s)		yer (See Instructions) elf	· ·····
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	······································
11/17/2019	Marc A. Rodriguez				\$1,500.00
	6. Contributor address;	City; State;	ZIP Code		
	1122 Colorado St Ste 2399 Austin	n, TX 78701-2132			
8. Principal occu Lobbyist	pation / Job title (See Instruction	s)		yer (See Instructions) Iffices of Marc A. Rodriguez	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
11/17/2019	George Santos				\$500.00
	6. Contributor address;	City; State;	ZIP Code		
	4825 Linden St Bellaire, TX 7740	01-4432			
8. Principal occu Physician	pation / Job title (See Instruction	s)		yer (See Instructions) elf	
4. Date .	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
11/17/2019	Brian Stansbury				\$1,000.00
	6. Contributor address;	City; State;	ZIP Code		
	1719 N Barton St Arlington, VA	22201-4011		,	
	pation / Job title (See Instruction	s)		yer (See Instructions)	
Attorney	E. Full nome of contributor		K	ing & Spalding LLP	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
11/17/2019	Massey Villarreal				\$1,000.00
	6. Contributor address;	City; State;	ZIP Code		
	4515 Riley Way Ln Sugar Land,				
8. Principal occl Business ow	pation / Job title (See Instruction ner	is)		yer (See Instructions) TG	
L					

## SCHEDULE A1

The Ins	truction 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	5. Full name of contributor	7. Amount of contribution (\$)
11/18/2019	Jim Blackburn	\$500.00
	6. Contributor address; City; State; ZIP Co	ode
	6100 Main St Houston, TX 77005-1827	
8. Principal occu Rice Univers		mployer (See Instructions) Faculty Scholar
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
11/20/2019	Allen Boone Humphries Robinson LLP	\$1,500.00
	6. Contributor address; City; State; ZIP Co	ode
	3200 Southwest Fwy Ste 2600 Houston, TX 77027-7537	
8. Principal occu	pation / Job title (See Instructions) 9 E	mployer (See Instructions)
4. Date	5. Full name of contributor	7. Amount of contribution (\$)
11/20/2019	Amegy Bank PAC	\$2,500.00
	6. Contributor address; City; State; ZIP Co	ode
	4400 Post Oak Pkwy Houston, TX 77027-3421	
8. Principal occu	pation / Job title (See Instructions) 9 Er	mployer (See Instructions)
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
11/20/2019	International Longshoremen's Association #1351 PAC	\$5,000.00
	6. Contributor address; City; State; ZIP Co	ode
	7524 Avenue N Houston, TX 77012-1046	
8. Principal occu	pation / Job title (See Instructions) 9 Er	mployer (See Instructions)
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
11/20/2019	Ty Kelly	\$250.00
· ·	6. Contributor address; City; State; ZIP Co	ode
	67 Tiel Way Houston, TX 77019-1509	
8. Principal occup Attorney	pation / Job title (See Instructions) 9 Er	mployer (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.

.

#### SCHEDULE A1

The In	struction 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	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
11/20/2019	Philip John Kuhl		\$250.00
	6. Contributor address; City; State; ZI	P Code	
	1180 Galleria Financial Ctr Houston, TX 77056		
8. Principal occu Attorney	ipation / Job title (See Instructions)		ver (See Instructions) anford & Kuhl
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
11/20/2019	Maria Salinas Parker	•	\$750.00
	6. Contributor address; City; State; Z	P Code	
	1980 Post Oak Blvd Ste 1380 Houston, TX 77056-3970	•	
8. Principal occu Private Prac	upation / Job title (See Instructions) tice		ver (See Instructions) elf
4. Date	5. Full name of contributor		7. Amount of contribution (\$)
11/20/2019	Teamsters Local Union #988		\$5,000.00
	6. Contributor address; City; State; Zi	P Code	
	4303 N Sam Houston Pkwy E Houston, TX 77032-3821		
8. Principal occu	ipation / Job title (See Instructions)	9 Employ	/er (See Instructions)
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
11/20/2019	West Gulf Maritime Association PAC		\$2,500.00
	6. Contributor address; City; State; Z	P Code	
	Turning Basin Drive East Loop N 1717 East Loop Suite 20 Houston, TX 77029	0	· ·
8. Principal occu	upation / Job title (See Instructions)	9 Employ	ver (See Instructions)
4. Date	5. Full name of contributorout-of-state PAC	· · · · · · · · · · · · · · · · · · ·	7. Amount of contribution (\$)
11/24/2019	Collin Cox		\$250.00
	6. Contributor address; City; State; Z	P Code	
A	6412 Wakeforest Ave Houston, TX 77005-3428		
	pation / Job title (See Instructions)		yer (See Instructions)
Attorney		Y	etter Coleman LLP

SCHEDULE A1

The In	struction Guide explains how to complete this for	m.	1. Total pages Schedule A1: not available
2. FILER NAME Lina Hidalgo			3. Filer ID (Ethics Commission Filers)
4. Date	5. Full name of contributor ,out-of-state PAC		7. Amount of contribution (\$)
11/24/2019	Elvin Franklin		\$50.00
	6. Contributor address; City; State;	ZIP Code	
	6711 Moss Oaks Dr Houston, TX 77050-3819		
8. Principal occu Not Employ	pation / Job title (See Instructions) ed		yer (See Instructions) lot Employed
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
11/24/2019	Robert Scott		\$500.00
	6. Contributor address; City; State;	ZIP Code	
	717 Texas St Ste 1400 Houston, TX 77002-2776		
8. Principal occu Attorney	pation / Job title (See Instructions)		yer (See Instructions) lank Rome LLP
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
11/24/2019	Michael Zilkha	101	\$10,000.00
	6. Contributor address; City; State;	ZIP Code	
ļ	3808 Inverness Dr Houston, TX 77019-1106		
8. Principal occu Executive	upation / Job title (See Instructions)		yer (See Instructions) lightingale Code Foundation
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
11/25/2019	John Pitts		\$1,000.00
	6. Contributor address; City; State;	ZIP Code	
	PO Box 27130 Houston, TX 77227-7130		
8. Principal occu Attorney	pation / Job title (See Instructions)		yer (See Instructions) elf
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
12/01/2019	Betty Baer		\$15.00
	6. Contributor address; City; State;	ZIP Code	
	9023 Ilona Ln Houston, TX 77025-3619		
	pation / Job title (See Instructions)		yer (See Instructions)
Not Employ	ed		lot Employed

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

,

1

## SCHEDULE A1

The Ins	truction Guide explains how to complete this	s form.	1. Total pages Schedule A1: not available	
2. FILER NAME Lina Hidalgo			3. Filer ID (Ethics Commission Fil	lers)
4. Date	5. Full name of contributor	۰C	7. Amount of contribution (\$)	
12/01/2019	Eduardo Canales			\$50.00
	6. Contributor address; City; Sta	te; ZIP Code		
	7021 Bevington Dr Corpus Christi, TX 78413-5318	3		
8. Principal occur Director	pation / Job title (See Instructions)	· ·	over (See Instructions)	
4. Date	5. Full name of contributorout-of-state PA	.c	7. Amount of contribution (\$)	
12/01/2019	Eduardo Canales			\$100.00
	6. Contributor address; City; Sta	te; ZIP Code		
	7021 Bevington Dr Corpus Christi, TX 78413-5318	3		
8. Principal occu Director	pation / Job title (See Instructions)		oyer (See Instructions) STHRC	
4. Date	5. Full name of contributor		7. Amount of contribution (\$)	
12/01/2019	Nicolas Medina			\$1,000.00
	6. Contributor address; City; Sta	te; ZIP Code		
	10926 Long Shadow Ln Houston, TX 77024-6832			
	pation / Job title (See Instructions) vernment Affairs	· · ·	oyer (See Instructions) ExxonMobil Pipeline Company	
4. Date	5. Full name of contributor	IC	7. Amount of contribution (\$)	
12/01/2019	William Perkison		ĸ	\$25.00
	6. Contributor address; City; Sta	te; ZIP Code		
	5235 Lymbar Dr Houston, TX 77096-5215			
8. Principal occup Physician	pation / Job title (See Instructions)		byer (See Instructions) UT Health	
4. Date	5. Full name of contributorout-of-state PA	NC	7. Amount of contribution (\$)	·····
12/01/2019	Ben Reyes			\$25.00
	6. Contributor address; City; Sta	te; ZIP Code		
	2322 Eaglerock Dr Houston, TX 77080-5204			
8. Principal occup Retired	pation / Job title (See Instructions)		over (See Instructions) Retired	
Itellieu				·

#### 1. Total pages Schedule A1: The Instruction Guide explains how to complete this form. not available 2. FILER NAME 3. Filer ID (Ethics Commission Filers) Lina Hidalgo 4. Date 5. Full name of contributor 7. Amount of contribution (\$) out-of-state PAC 12/01/2019 Marianne Smith \$15.00 ZIP Code 6. Contributor address; City; State; 818 Highland St Houston, TX 77009-6511 9 Employer (See Instructions) 8. Principal occupation / Job title (See Instructions) Mayer Smith Consulting HR Consultant 5. Full name of contributor Amount of contribution (\$) 4. Date out-of-state PAC 12/01/2019 Paul SoRelle \$20.00 6. Contributor address; City; **ZIP** Code State: 5814 Warm Springs Rd Houston, TX 77035-2428 9 Employer (See Instructions) 8. Principal occupation / Job title (See Instructions) Not Employed Not Employed 4. Date 5. Full name of contributor Amount of contribution (\$) out-of-state PAC 12/01/2019 Rudy Vasquez \$250.00 **ZIP Code** 6. Contributor address; City; State: 5812 Irvington Blvd Houston, TX 77009-1337 8. Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Attorney The Law Offices of Rudy G Vasquez PC 5. Full name of contributor 4. Date 7. Amount of contribution (\$) out-of-state PAC 12/01/2019 Donald Walker \$100.00 6. Contributor address: City: State: ZIP Code 9722 S Kensington Dr Houston, TX 77031-2912 8. Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Not Employed Not Employed 5. Full name of contributor 4. Date Amount of contribution (\$) out-of-state PAC 12/08/2019 Boating Trades Association of Metro Houston PAC \$250.00 6. Contributor address; **ZIP** Code Citv: State: 8909 Knight Rd Houston, TX 77054-4303 · 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.

SCHEDULE A1

## SCHEDULE A1

The In	struction 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	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
12/08/2019	David L. Collins Sr.		\$25.00
	6. Contributor address; City; State; Z	IP Code	
	7719 Chasewood Dr Missouri City, TX 77489-1837		
8. Principal occu Civil Engine	upation / Job title (See Instructions)		yer (See Instructions) elf
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
12/08/2019	Roselyn Flannigan		\$20.00
	6. <sup>-</sup> Contributor address; City; State; Z	IP Code	
	4330 Cedar Ridge Trl Houston, TX 77059-3114		
8. Principal occu Not Employ	upation / Job title (See Instructions) ed		yer (See Instructions) ot Employed
4. Date	5. Full name of contributor		7. Amount of contribution (\$)
12/08/2019	Elena Marks		\$2,500.00
	6. Contributor address; City; State; Z	IP Code	
	2326 Tangley St Houston, TX 77005-2654		
8. Principal occu Executive	upation / Job title (See Instructions)		yer (See Instructions) piscopal Health Foundation
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
12/08/2019	John Martinez		\$100.00
	6. Contributor address; City; State; Z	IP Code	
	15206 Via Verde Dr Houston, TX 77083-4334		
8. Principal occu Engineer	upation / Job title (See Instructions)		yer (See Instructions) roduction Associates
4. Date	5. Full name of contributorout-of-state PAC	· · · · · · · · · · · · · · · · · · ·	7. Amount of contribution (\$)
12/08/2019	Veronica Mendoza		\$100.00
	6. Contributor address; City; State; Z	IP Code	
	24654 Kingsland Blvd Katy, TX 77494-3386		
	ipation / Job title (See Instructions)		yer (See Instructions)
Realtors			eronica Mendoza Realty LLC

#### SCHEDULE A1

The Ir	nstruction Guide explains how	to complete this fo	rm.	1. Total pages Schedule A1: not available
2. FILER NAME Lina Hidalgo				3. Filer ID (Ethics Commission Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)
12/08/2019	Melissa Noriega			\$25.00
	6. Contributor address;	City; State;	ZIP Code	
	4430 Pease St Houston, TX 7702	3-3024		
8. Principal occu Senior Cons	upation / Job title (See Instruction sultant	is)		yer (See Instructions) wiftwater Solutions
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)
12/08/2019	Tony Reyes	_		\$50.00
	6. Contributor address;	City; State;	ZIP Code	
	19226 Water Bridge Dr Cypress,	TX 77433-3174		
	upation / Job title (See Instruction	is)		yer (See Instructions)
Internationa			P	enco Group. Inc.
4. Date	5. Full name of contributor	out-of-state PAC		<ol> <li>Amount of contribution (\$)</li> </ol>
12/11/2019	Lan Bentsen		20 Y	\$5,000.00
	6. Contributor address;	City; State;	ZIP Code	
	3040 Post Oak Blvd Houston, TX	77056-6500		
8. Principal occ Manager	upation / Job title (See Instruction	is)		yer (See Instructions) rontera Resources
4. Date	5. Full name of contributor	out-of-state PAC	·····	7. Amount of contribution (\$)
12/15/2019	Elma Barrera			\$500.00
	6. Contributor address;	City; State;	ZIP Code	
	5517 Lincrest Ln Houston, TX 7	7056-6807		
8. Principal occu Retired	upation / Job title (See Instruction	is)	· · ·	ver (See Instructions) etired
4. Date	5. Full name of contributor	out-of-state PAC	· · · · ·	7. Amount of contribution (\$)
12/15/2019	Cindy Clifford			\$500.00
	6. Contributor address;	City; State;	ZIP Code	
	1939 W Gray St Ste 201 Houstor	n, TX 77019-4815		
	upation / Job title (See Instruction	is)		yer (See Instructions)
President			T	he Clifford Group

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

t -

# SCHEDULE A1

The In	struction Guide explains how t	to complete this fc	orm.	1. Total pages Schedule A1: not available	
2. FILER NAME Lina Hidalgo				3. Filer ID (Ethics Commission	Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
12/15/2019	Garnet Coleman				\$5,000.00
	6. Contributor address;	City; State;	ZIP Code		
	PO Box 88140 Houston, TX 7728	38-0140			
8. Principal occu Consultant	pation / Job title (See Instruction	s)		ver (See Instructions) elf	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
12/15/2019	Terrence Fontaine				\$1,000.00
	6. Contributor address;	City; State;	ZIP Code		
	3903 Southmore Cir Houston, TX	377004-6535			
8. Principal occu Director of A	pation / Job title (See Instruction	.s)		yer (See Instructions)	
	5. Full name of contributor			exas Southern University	<u></u>
4. Date		out-of-state PAC		7. Amount of contribution (\$)	
12/15/2019	David Frederick				\$500.00
	6. Contributor address;	City; State;	ZIP Code		
	414 Ridgewood Rd West Lake H				
8. Principal occu Attorney	pation / Job title (See Instruction	s)		yer (See Instructions) rederick Perales Allmon & Rockwel	1 PC
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
12/15/2019	Kenny Friedman		1		\$1,000.00
	6. Contributor address;	City; State;	ZIP Code		
	8707 Pasture View Ln Houston,	FX 77024-7040			
8. Principal occu	pation / Job title (See Instruction	is)		yer (See Instructions)	
Attorney		<u> </u>	M	Iorae Global Corporation	·
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
12/15/2019	Michael Harris				\$1,000.00
	6. Contributor address;	City; State;	ZIP Code		
	1200 Smith St Ste 1550 Houston,	TX 77002-4319			
	pation / Job title (See Instruction	.s)		yer (See Instructions)	
Lawyer			. T	he 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.

.

SCHEDULE A1

The Ins	struction Guide explains how t	o complete this fo	rm.	1. Total pages Schedule A1: not available	
2. FILER NAME Lina Hidalgo				3. Filer ID (Ethics Commission	Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
12/15/2019	Dan Hinkle				\$500.00
	6. Contributor address;	City; State;	ZIP Code		
	PO Box 18828 Sugar Land, TX 7	7496-8828			
8. Principal occu Not Employe	pation / Job title (See Instruction	s)		ver (See Instructions) ot Employed	,
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
12/15/2019	Dave Matthiesen				\$1,500.00
	6. Contributor address;	City; State;	ZIP Code		
	511 Lovett Blvd Houston, TX 770	006-4020			
	pation / Job title (See Instruction	s)		yer (See Instructions)	
Lawyer			N	latthiesen Law	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
12/15/2019	Gordon Quan				\$2,500.00
	6. Contributor address;	City; State;	ZIP Code		
	5177 Richmond Ave Ste 800 Hou	ston, TX 77056-6710			
8. Principal occu Attorney/Par	pation / Job title (See Instruction tner	s)		yer (See Instructions) uan, Burdette and Perez	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
12/15/2019	Carolyn Truesdell				\$250.00
	6. Contributor address;	City; State;	ZIP Code		
	139 Sage Rd Houston, TX 77056	-1417		u c	
1	pation / Job title (See Instruction	s)		ver (See Instructions)	
Retired			R	etired	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
12/15/2019	Raymond Valdez				\$500.00
1	6. Contributor address;	City; State;	ZIP Code		
	502 Avondale St Houston, TX 77	006-2914		<u> </u>	
	pation / Job title (See Instruction	s)		yer (See Instructions)	
Not Employe	ed		N	ot Employed	
### SCHEDULE A1

The Ins	truction 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	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
12/15/2019	Gerald Wilson		\$1,000.00
	6. Contributor address; City; State; ZIF	⊃ Code	
	15915 Katy Fwy Ste 500 Houston, TX 77094-1711		
8. Principal occu President	pation / Job title (See Instructions)	• •	yer (See Instructions) ardinal Memorial Acquisition Company
4. Date	5. Full name of contributor		7. Amount of contribution (\$)
12/19/2019	Houston Pilots PAC		\$2,500.00
	6. Contributor address; City; State; ZI	P Code	
	203 Deerwood Glen Dr Deer Park, TX 77536-3270		
8. Principal occu	pation / Job title (See Instructions)	9 Employ	ver (See Instructions)
4. Date	5. Full name of contributor		7. Amount of contribution (\$)
12/19/2019	Pipefitters Local Union No. 211 PAC		\$5,000.00
	6. Contributor address; City; State; ZI	P Code	
	1301 W 13th St Ste A Deer Park, TX 77536-2527		
8. Principal occu	pation / Job title (See Instructions)	9 Employ	ver (See Instructions)
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
12/22/2019	Nancy C. Allen		\$1,000.00
	6. Contributor address; City; State; ZIF	⊃ Code	
	5130 Green Tree Rd Houston, TX 77056-1406		
8. Principal occu Not Employe			ver (See Instructions) ot Employed
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
12/22/2019	Jerry Baker		\$1,000.00
	6. Contributor address; City; State; ZIF	Code	
	615 E 19th St Houston, TX 77008-4422		
	pation / Job title (See Instructions)	•	ver (See Instructions)
Auto dealer		Li	iberty Auto Sales

SCHEDULE A1

The Ins	struction 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	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)	
12/22/2019	Laranne Breagy	1	\$2,000.00	
	6. Contributor address; City; State; Z	IP Code		
	600 Travis St Ste 5600 Houston, TX 77002-2909			
8. Principal occu Attorney	pation / Job title (See Instructions)		ver (See Instructions) 5 Midstream LLC	
4. Date	5. Full name of contributorout-of-state PAC	_	7. Amount of contribution (\$)	
12/22/2019	Aaron Day		\$250.00	
	6. Contributor address; City; State; Z	IP Code		
	5107 McDade Dr Austin, TX 78735-6397			
8. Principal occu Lawyer	pation / Job title (See Instructions)		ver (See Instructions) LTA	
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)	
12/22/2019	Frank Estrada		\$100.00	
	6. Contributor address; City; State; Z	IP Code		
	407 W China St Lockhart, TX 78644-1722			
8. Principal occu Sales	pation / Job title (See Instructions)	1	/er (See Instructions) DS of Houston	
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)	
12/22/2019	Thomas Faschingbauer		\$100.00	
	6. Contributor address; City; State; Z	IP Code		
	2033 Albans Rd Houston, TX 77005-1642			
8. Principal occu Retired Psycl	pation / Job title (See Instructions) hologist	9 Employ N	/er (See Instructions) A	
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)	
12/22/2019	Elvin Franklin		\$50.00	
	6. Contributor address; City; State; Z	IP Code		
· ·	6711 Moss Oaks Dr Houston, TX 77050-3819			
	pation / Job title (See Instructions)	1	/er (See Instructions)	
Not Employe	b	N N	ot Employed	

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

.

#### SCHEDULE A1

The Ins	truction 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	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
12/22/2019	Israel J. Galvan	\$3,000.00
	6. Contributor address; City; State; ZIP Code	
	2106 Walnut Creek Dr League City, TX 77573-6408	
8. Principal occup Engineer/Bus		over (See Instructions) GHG Corporation
4. Date	5. Full name of contributor	7. Amount of contribution (\$)
12/22/2019	Dax Garza	\$1,000.00
	6. Contributor address; City; State; ZIP Code	
	1021 Main St Ste 1400 Houston, TX 77002-6602	
8. Principal occup Attorney		over (See Instructions) Self
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
12/22/2019	Karen Ostrum George	\$500.00
	6. Contributor address; City; State; ZIP Code	
	2328 Rice Blvd Houston, TX 77005-2622	
8. Principal occup Financial Con		over (See Instructions) Ralph S. O'Connor & Associates
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
12/22/2019	Juan Guerra	\$500.00
	6. Contributor address; City; State; ZIP Code	
	4101 Washington Ave Houston, TX 77007-5635	
8. Principal occu Attorney		Dyer (See Instructions) Juan L. Guerra Jr.
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
12/22/2019	Garland Kerr	\$100.00
	6. Contributor address; City; State; ZIP Code	
	2116 Albans Rd Houston, TX 77005-1518	
8. Principal occur CPA		oyer (See Instructions) Werlein & Harris

#### SCHEDULE A1

The Ins	truction Guide explains how to complete this form.		1. Total pages Schedule A1: not available	
2. FILER NAME Lina Hidalgo			3. Filer ID (Ethics Commission File	ers)
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)	
12/22/2019	Charles Ludlam			\$1,000.00
	6. Contributor address; City; State; ZI	P Code		
	4020 Reno Rd NW Washington, DC 20008-3012			
8. Principal occup Not Employe			ver (See Instructions) ot Employed	
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)	
12/22/2019	Michael Maloney			\$1,000.00
	6. Contributor address; City; State; ZI	P Code		
	9 Lacewood Ln Houston, TX 77024-7412			
8. Principal occur Attorney	pation / Job title (See Instructions)		ver (See Instructions) aloney Law	
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)	
12/22/2019	John Martinez			\$50.00
	6. Contributor address; City; State; ZI	P Code		
	15206 Via Verde Dr Houston, TX 77083-4334			
8. Principal occur Engineer	bation / Job title (See Instructions)		ver (See Instructions) roduction Associates	
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)	
12/22/2019	Vidal Martinez			\$1,000.00
	6. Contributor address; City; State; ZI	P Code		
	1345 Sue Barnett Dr Houston, TX 77018-4423			
· · ·	pation / Job title (See Instructions)		ver (See Instructions) lartinez Partners LLP	
Lawyer 4. Date	5. Full name of contributor Out-of-state PAC	141	7. Amount of contribution (\$)	
12/22/2019	Don Middleton			<b>\$2</b> ,000,00
-		P Code		\$2,000.00
	7118 Pinehook Ln Houston, TX 77016-2344			
8. Principal occu	pation / Job title (See Instructions)	9 Employ	/ /er (See Instructions)	
Civil Enginee	ering		liddleton Brown LLC	

SCHEDULE A1

The Ins	struction Guide explains how to	o complete thi	s form.	1. Total pages Schedule A1: not available	
2. FILER NAME Lina Hidalgo				3. Filer ID (Ethics Commission	Filers)
4. Date	5. Full name of contributor	out-of-state P/	AC	7. Amount of contribution (\$)	
12/22/2019	Kevin Murray				\$500.00
	6. Contributor address;	City; Sta	te; ZIP Code		
	5075 Westheimer Rd Houston, TX	77056-5643			
8. Principal occu Attorney	pation / Job title (See Instructions	3)		yer (See Instructions) Levin A. Murray LLC	
4. Date	5. Full name of contributor	out-of-state P/	AC	7. Amount of contribution (\$)	
12/22/2019	William Perkison				\$25.00
	6. Contributor address;	City; Sta	ite; ZIP Code		
	5235 Lymbar Dr Houston, TX 770	96-5215			
8. Principal occu Physician	pation / Job title (See Instructions	\$)		yer (See Instructions) IT Health	
4. Date	5. Full name of contributor	out-of-state P/	AC	7. Amount of contribution (\$)	
12/22/2019	Hamid Razavi			·	\$100.00
	6. Contributor address;	City; Sta	ite; ZIP Code		
	4910 Cambridge St Sugar Land, T	X 77479-3968			
8. Principal occu CEO	pation / Job title (See Instructions	;)		yer (See Instructions) Iillcroft Physicians	
4. Date	5. Full name of contributor	out-of-state P/	AC	7. Amount of contribution (\$)	
12/22/2019	George C Yang				\$500.00
	6. Contributor address;	City; Sta	ite; ZIP Code		
	1111 Hermann Dr Unit 29B Houst	ion, TX 77004-6	932		
8. Principal occu CEO	pation / Job title (See Instructions	\$)		yer (See Instructions) Asia Chemical Corp Inc	
4. Date	5. Full name of contributor	out-of-state P/	AC	7. Amount of contribution (\$)	
12/23/2019	Alonzo Cantu				\$5,000.00
	6. Contributor address;	City; Sta	te; ZIP Code		
	PO Box 2673 McAllen, TX 78502	-2673			
	pation / Job title (See Instructions	;)		yer (See Instructions)	
Owner				Cantu Construction	

### SCHEDULE A1

The Ins	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	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)		
12/23/2019	Arturo Eureste		\$500.00		
	6. Contributor address; City; State; Z	IP Code			
	3336 Richmond Ave Houston, TX 77098-3017				
8. Principal occu Attorney	pation / Job title (See Instructions)		ver (See Instructions) elf		
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)		
12/26/2019	International Union of Operating Engineers Local Union 4	50	\$2,500.00		
	OPEATE PAC 6. Contributor address; City; State; Z	IP Code			
	1125 17th St NW Washington, DC 20036-4709				
8. Principal occu	pation / Job title (See Instructions)	9 Employ	ver (See Instructions)		
4. Date	5. Full name of contributor		7. Amount of contribution (\$)		
12/27/2019	William Fred Hagans		\$1,500.00		
	6. Contributor address; City; State; Z	IP Code			
	3200 Travis St Fl 4 Houston, TX 77006-3651				
8. Principal occu Attorney	pation / Job title (See Instructions)		ver (See Instructions) AGANS MONTGOMERY & RUSTAY, P.C.		
4. Date	5. Full name of contributor		7. Amount of contribution (\$)		
12/29/2019	James Calaway		\$1,000.00		
	6. Contributor address; City; State; Z	IP Code			
	2302 Persa St Houston, TX 77019-6422				
8. Principal occu Executive	pation / Job title (See Instructions)		ver (See Instructions)		
4. Date	5. Full name of contributor Out-of-state PAC		7. Amount of contribution (\$)		
12/29/2019	Ben Reyes		\$25.00		
	6. Contributor address; City; State; Z	IP Code			
4	2322 Eaglerock Dr Houston, TX 77080-5204				
	pation / Job title (See Instructions)		ver (See Instructions)		
Retired		Re	etired		

### SCHEDULE A1

The Ins	truction 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	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
12/31/2019	Betty Baer		\$15.00
	6. Contributor address; City; State; Z	IP Code	
	9023 Ilona Ln Houston, TX 77025-3619		
8. Principal occup Not Employed	pation / Job title (See Instructions) d		yer (See Instructions) ot Employed
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
12/31/2019	Eduardo Canales		\$50.00
	6. Contributor address; City; State; Z	IP Code	
	7021 Bevington Dr Corpus Christi, TX 78413-5318		
8. Principal occup Director	pation / Job title (See Instructions)		ver (See Instructions) THRC
4. Date	5. Full name of contributor		7. Amount of contribution (\$)
12/31/2019	Eduardo Canales		\$100.00
	6. Contributor address; City; State; Z	IP Code	
	7021 Bevington Dr Corpus Christi, TX 78413-5318		
8. Principal occup Director	pation / Job title (See Instructions)	-	ver (See Instructions) THRC
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
12/31/2019	David Hawes		\$500.00
	6. Contributor address; City; State; Z	IP Code	
	PO Box 1076 Mineral Wells, TX 76068-1076		
8. Principal occup Private Consu	pation / Job title (See Instructions) Iltant		yer (See Instructions) awes Hill & Associate LLP
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
12/31/2019	Jorge Hidalgo		\$1,000.00
	6. Contributor address; City; State; Z	IP Code	
	1701 Hermann Dr Houston, TX 77004-7452		
8. Principal occup Executive	pation / Job title (See Instructions)	9 Employ	ver (See Instructions) I

#### SCHEDULE A1

The In:	struction 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	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
12/31/2019	David James		\$1,116.00
	6. Contributor address; City; State; ZI	P Code	
	1301 Richmond Ave Houston, TX 77006-5451		
8. Principal occu Attorney	pation / Job title (See Instructions)		yer (See Instructions) dwards Law
4. Date	5. Full name of contributor		7. Amount of contribution (\$)
12/31/2019	Kevin Kulish		\$100.00
	6. Contributor address; City; State; ZI	P Code	
	1809 Driscoll St Houston, TX 77019-5716		
8. Principal occu Engineer	pation / Job title (See Instructions)		yer (See Instructions) alos Energy
4. Date	5. Full name of contributor		7. Amount of contribution (\$)
12/31/2019	Jim Marston		\$200.00
	6. Contributor address; City; State; ZI	P Code	
	2801 Townes Ln Austin, TX 78703-1644		
8. Principal occu Regional Ma	pation / Job title (See Instructions)		yer (See Instructions) DF
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
12/31/2019	Debra McLeod		\$10,000.00
	6. Contributor address; City; State; Zi	P Code	
	14529 Memorial Dr Houston, TX 77079-5428		
8. Principal occu Executive D	pation / Job title (See Instructions) irector		yer (See Instructions) Frant Me The Wisdom Foundation
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
12/31/2019	Arturo G. Michel		\$500.00
	6. Contributor address; City; State; Zi	P Code	
	3200 Southwest Fwy Ste 2000 Houston, TX 77027-7554		
	pation / Job title (See Instructions)		yer (See Instructions)
Private Pract	tice	T	hompson & Horton LLP

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

.

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	5. Full name of contributor	out-of-	state PAC		7. Amount of contribution (\$)
12/31/2019	Neal Sarkar				\$500.00
	6. Contributor address;	City;	State;	ZIP Code	
	1412 Marshall St Houston, TX 7	7006-4265			
8. Principal occu	pation / Job title (See Instruction	is)			yer (See Instructions)
Lawyer				A	ZA Law
4. Date	5. Full name of contributor	out-of-	state PAC		7. Amount of contribution (\$)
12/31/2019	Paul SoRelle				\$20.00
	6. Contributor address;	City;	State;	ZIP Code	
	5814 Warm Springs Rd Houston	TX 77035-	2428		
8. Principal occu	pation / Job title (See Instruction	is)		9 Emplo	yer (See Instructions)
Not Employe	ed			N	lot Employed
4. Date	5. Full name of contributor	out-of-	state PAC		7. Amount of contribution (\$)
12/31/2019	Rudy Vasquez				\$250.00
	6. Contributor address;	City;	State;	ZIP Code	
	5812 Irvington Blvd Houston, TX	K 77009-133	37		
8. Principal occu	pation / Job title (See Instruction	is)		9 Emplo	yer (See Instructions)
Attorney				T	he Law Offices of Rudy G Vasquez PC

ATTACH ADDITIONAL	L COPIES OF THIS SO	HEDULE AS NEEDED
contributor is out-of-state PAC, ple	ease see instruction guide f	or additional reporting requirements.

lf

#### NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

#### SCHEDULE A2

The	Instruction Guide explains how to complete this	s form.	1. Total pages Schedule A2: not available		
	2. FILER NAME Lina Hidalgo		3. Filer ID (Ethics Commission Filers)		
4. TOTAL OF I	UNITEMIZED IN-KIND POLITICAL CONTRIBUTIO	NS	\$0.00		
5 Date 6 Full name of contributor Out-of-state PAG Mike Collier			8 Amount of 9 In-Kind contribution contribution (\$) 9 description fundraising list		
	7 Contributor address; City; State; Zip Code 2334 Cumberland Oak Ct Kingwood, TX 77345-2150		\$2,200.00 Check if travel outside of Texas, complete Schedule T		
10 Principal occu	pation / Job Title (FOR NON-JUDICIAL) (See Instructions)	11 Employer (FOR	NON-JUDICIAL) (See Instructions)		
Consultant		Self			
12 Contributor's p	12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)		
14 Contributor's e	employer/law firm (FOR JUDICIAL)	15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)			
16 If contributor is	s a child, law firm of parents (if any) (FOR JUDICIAL)				
5 Date	6 Full name of contributorout-of-st	tate PAC	8 Amount of 9 In-Kind contribution		
	Laura Hernandez		contribution (\$) description		
09/30/2019	7 Contributor address; City; State; Zip Code		Fundraising event food, \$2,053.22 refreshments,		
	2401 Manor Rd Apt 108 Austin, TX 78722-2012		professional photography,		
10 Bringing angu	pation / Job Title (FOR NON-JUDICIAL) (See Instructions)		Check if travel outside & Schedule T NON-JUDICIAL) (See Instructions)		
			NON-JODICIAL) (See instructions)		
Consultant 12 Contributor's principal occupation (FOR JUDICIAL)		Self			
		13 Contributor's job title (FOR JUDICIAL) (See Instructions)			
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of con	ributor's spouse (if any) (FOR JUDICIAL)		
16 If contributor is	s 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.

5

### NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

#### SCHEDULE A2

The	The Instruction Guide explains how to complete this form.		1. Total pages Schedule A2:         not available         3. Filer ID (Ethics Commission Filers)		
2. FILER NAME Lina Hidalgo					
4. TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIBUTI	ONS '			\$0.00
5 Date	Date       6 Full name of contributor       out-of-state PAC         1/20/2019       Larry Veselka         7 Contributor address; City; State; Zip Code         3305 Robinhood St Houston, TX 77005-2225			8 Amount of contribution (\$)	9 In-Kind contribution description
11/20/2019				\$1,934.99	food & beverages for campaign event de of Texas, complete Schedule T
10 Principal occ	cupation / Job Title (FOR NON-JUDICIAL) (See Instructions)	11 Employer (FOF	R NON-J	UDICIAL) (See Instruct	ions)
Attorney		Smyser Kaplan	& Vese	lka, L.L.P.	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)			structions)
14 Contributor's	s employer/law firm (FOR JUDICIAL)	15 Law firm of con	tributor	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
f contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense       Office Overhead/Rental         Fees       Polling Expense         Food/Beverage Expense       Printing Expense         y Gift/Awards/Memorials Expense       Salaries/Wages/Contract         Legal Services       The Instruction Guide explains how to con	Travel Out of District Other (enter a category not listed above) nplete this form.	
1. Total pages Schedule F1:	2. FILER NAME Lina Hidalgo	3. Filer ID (Ethics Commission Filers)	
4 Date 07/02/2019	5 Payee name Google		
6 Amount \$127.92	<ul> <li>7 Payee address; City;</li> <li>1600 Amphitheatre Pkwy Mountain View, CA 94043-</li> </ul>	State: Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Campaign Email	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	
4 Date 07/02/2019	5 Payee name NGP VAN		
6 Amount \$410.00	7 Payee address; City; 1445 New York Ave NW Ste 200 Washington, DC 200	State: Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Check if travel outside of Texas, complete Schedule T 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 07/03/2019	5 Payee name Arne's Warehouse		
6 Amount \$54.92	7 Payee address; City; 2830 Hicks St Houston, TX 77007-3812	State: Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Event Expense	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Parade decorations	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	
	ATTACH ADDITIONAL COPIES OF THIS SCH	EDULE AS NEEDED	

202089.sta48tx.us

·

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Office Overhead/R Fees Polling Expense Food/Beverage Expense Printing Expense Gift/Awards/Memorials Expense Salaries/Wages/C Legal Services The Instruction Guide explains how t	ontract Labor	Solicitation/Fundraisi Transportation Equip Expense Travel In District Travel Out of District Other (enter a categor form.	oment & Related
1. Total pages Schedule F1:	2. FILER NAME		iler ID (Ethics Comm	nission Filers)
	Lina Hidalgo			
4 Date	5 Payee name			
07/05/2019	Verizon Wireless			
6 Amount \$214.44	7 Payee address; City;	State:	Zip	Code
	PO Box 15023 Worcester, MA 01615-0023			
8	(a) Category (See categories listed at the top of this sched	lule) (b) Descri	iption Check if travel outside of Te	vas completa Schedule T
PURPOSE	Office Overhead/Rental Expense		Check if Austin, TX, officeh	
EXPENDITURE		Campaign	Phone	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sough	ht	Office held
			······································	
4 Date	5 Payee name			
07/07/2019	ActBlue Technical Services, Inc.			
6 Amount	7 Payee address; City;	State:	Zip	Code
\$212.76	14 Arrow St Ste 11 Cambridge, MA 02138-5106			
8	(a) Category (See categories listed at the top of this sched	<sub>lule)</sub> (b) Descr	iption Check if travel outside of Te	was complete Schodule T
PURPOSE	Fees		Check if Austin, TX, officeh	
EXPENDITURE			d Processing Fee	<b>.</b> .
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office soug	nt	Office held
4 Date	5 Payee name			
07/08/2019	Nationbuilder			
6 Amount \$59.00	7 Payee address; City;	State:	Zip	Code
	520 S Grand Ave Los Angeles, CA 90071-2600			
8	(a) Catagony		intion	· · · · · · · · · · · · · · · · · · ·
OF	(a) Category (See categories listed at the top of this sched		IPtION Check if travel outside of Te Check if Austin, TX, officeh	
EXPENDITURE	Advertising Expense	Website		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office soug	ht	Office held
	ATTACH ADDITIONAL COPIES OF THIS S	CHEDULE AS	S NEEDED	

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense       Office Overhead/Rental         Fees       Polling Expense         Food/Beverage Expense       Printing Expense         g Gift/Awards/Memorials Expense       Salaries/Wages/Contract         Legal Services       The Instruction Guide explains how to contract	Transportation Equipment & Related Expense ct Labor Travel In District Travel Out of District Other (enter a category not listed above)	
1. Total pages Schedule F1:	2. FILER NAME Lina Hidalgo	3. Filer ID (Ethics Commission Filers)	
4 Date 07/08/2019	5 Payee name Verizon Wireless		
6 Amount \$214.44	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) Fees	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Wireless internet	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	
4 Date 07/09/2019	5 Payee name Xochi		
6 Amount \$152.86	7 Payee address; City; 1777 Walker St Houston, TX 77010-5023	State: Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Check if travel outside of Texas, complete Schedule T 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	
4 Date 07/10/2019	5 Payee name Administrative Business Services, LLC		
6 Amount \$1,065.00	7 Payee address; City; 10205 Atkins Ridge Dr Charlotte, NC 28213-4290	State: Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting/Banking	(b) Description Check if travel outside of Texas, complete Schedule T 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			

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense       Office Overhead/Renta         Fees       Polling Expense         Food/Beverage Expense       Printing Expense         y Gift/Awards/Memorials Expense       Salaries/Wages/Contra         Legal Services       The Instruction Guide explains how to co	Transportation Equipment & Related Expense act Labor Travel In District Travel Out of District Other (enter a category not listed above)	
1. Total pages Schedule F1:	2. FILER NAME Lina Hidalgo	3. Filer ID (Ethics Commission Filers)	
4 Date 07/10/2019	5 Payee name Administrative Business Services, LLC		
6 Amount \$1,065.00	7 Payee address; City; 10205 Atkins Ridge Dr Charlotte, NC 28213-4290	State: Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting/Banking	(b) Description Check if travel outside of Texas, complete Schedule T 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 07/10/2019	5 Payee name ADP, Inc.		
6 Amount \$72.90	7 Payee address; City; 504 Clinton Center Dr Ste 4400 Clinton, MS 39056-56	State: Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description Check if travel outside of Texas, complete Schedule T 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 07/10/2019	5 Payee name ADP, Inc.		
6 Amount \$170.10	7 Payee address; City; 504 Clinton Center Dr Ste 4400 Clinton, MS 39056-56	State: Zip Code	
8 OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description Check if travel outside of Texas, complete Schedule T 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	
	ATTACH ADDITIONAL COPIES OF THIS SCH	EDULE AS NEEDED	

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense       Office Overhead/Renta         Fees       Polling Expense         Food/Beverage Expense       Printing Expense         y Gift/Awards/Memorials Expense       Salaries/Wages/Contra         Legal Services       The Instruction Guide explains how to contract	Tr Ex act Labor Tr Tr Ot	blicitation/Fundraising Expense ansportation Equipment & Related xpense avel In District avel Out of District ther (enter a category not listed above) <b>m.</b>
1. Total pages Schedule F1:	2. FILER NAME	3. Filer	ID (Ethics Commission Filers)
	Lina Hidalgo		
4 Date	5 Payee name		
07/12/2019	Bayou City Strategies		
6 Amount \$2,000.00	7 Payee address; City;	State:	Zip Code
	l Greenway Plz Ste 740 Houston, TX 77046-0102		
8 PURPOSE	(a) Category (See categories listed at the top of this schedule)		k if travel outside of Texas, complete Schedule T
OF EXPENDITURE	Salaries/Wages/Contract Labor	Fundraising Co	k if Austin, TX, officeholder living expense onsultant
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4 Date	5 Payee name		
07/14/2019	ActBlue Technical Services, Inc.		
6 Amount \$6.92	7 Payee address; City; 14 Arrow St Ste 11 Cambridge, MA 02138-5106	State:	Zip Code
8 PURPOSE	(a) Category (See categories listed at the top of this schedule)		k if travel outside of Texas, complete Schedule T
OF EXPENDITURE	Fees	Credit Card Pr	k if Austin, TX, officeholder living expense ocessing Fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4 Date	5 Payee name		
07/15/2019	Houston Chronicle		
6 Amount \$24.00	7 Payee address; City;	State:	Zip Code
	4747 Southwest Fwy Houston, TX 77027-6901		
8 PURPOSE	(a) Category (See categories listed at the top of this schedule)	(b) Descriptio	DN k if travel outside of Texas, complete Schedute T
OF EXPENDITURE	Office Overhead/Rental Expense	Chec news subscript	k if Austin, TX, officeholder living expense tion
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS SCH	EDULE AS N	EEDED

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense       Office Overhead/Rental         Fees       Polling Expense         Food/Beverage Expense       Printing Expense         / Gift/Awards/Memorials Expense       Salaries/Wages/Contract         Legal Services       The Instruction Guide explains how to contract	t Labor	Solicitation/Fundraising Expen Transportation Equipment & R Expense Travel In District Travel Out of District Other (enter a category not lis form.	elated
1. Total pages Schedule F1:	2. FILER NAME	3. File	er ID (Ethics Commission F	ilers)
,,,,,,,, .	Lina Hidalgo			,
4 Date	5 Payee name		The second s	
07/16/2019	Virginia Goldman	(		
6 Amount	7 Payee address; City;	State:	Zip Code	
\$10,000.00	1510 Pearson St Houston, TX 77023-3627			
8	(a) Category (See categories listed at the top of this schedule)	(b) Descrip	otion heck if travel outside of Texas, comple	ito Schodulo T
PURPOSE OF	Consulting Expense		heck if Austin, TX, officeholder living	
EXPENDITURE	Consuming Expense	Campaign c		
_				
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sough	t Office he	ld
4 Date	5 Payee name			
07/18/2019	Name-Cheap.com			
6 Amount \$26.32	7 Payee address; City;	State:	Zip Code	
	11400 W Olympic Blvd Ste 200 Los Angeles, CA 9006	54-1584		
8	(a) Category (See categories listed at the top of this schedule)	(b) Descrip	otion	de Ceberdule T
PURPOSE	Advertising Expense		heck if travel outside of Texas, comple heck if Austin, TX, officeholder living	
EXPENDITURE	Adventsing Expense	Campaign E	-	experies
		Cumpungin L		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sough	t Office he	ld
4 Date	5 Payee name			
07/21/2019	ActBlue Technical Services, Inc.			
6 Amount \$3.37	7 Payee address; City;	State:	Zip Code	
	14 Arrow St Ste 11 Cambridge, MA 02138-5106			
8		(b) Descrip	ation	
PURPOSE	(a) Category (See categories listed at the top of this schedule) Fccs	`´ <u></u> ∐di	heck if travel outside of Texas, comple heck if Austin, TX, officeholder living	
EXPENDITURE			Processing Fee	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	U Office sough	t Office he	ld
	ATTACH ADDITIONAL COPIES OF THIS SCHE	DULF AS		

	EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense       Office Overhead/Rental         Fees       Polling Expense         Food/Beverage Expense       Printing Expense         / Gift/Awards/Memorials Expense       Salaries/Wages/Contract         Legal Services       The Instruction Guide explains how to cor	Transportation Equipment & Related Expense at Labor Travel In District Travel Out of District Other (enter a category not listed above)		
1. Total pages Schedule F1:	2. FILER NAME Lina Hidalgo	3. Filer ID (Ethics Commission Filers)		
4 Date	5 Payee name			
07/22/2019	First Tuesday PAC			
6 Amount	7 Payee address; City;	State: Zip Code		
\$25,000.00	PO Box 5707 Riverside, CA 92517-5707			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Donation		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		
4 Date	5 Payee name			
07/23/2019	Christina Morales			
6 Amount \$150.00	7 Payee address; City; 2901 Canal St Houston, TX 77003-1624	State: Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense check return		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		
4 Date 07/26/2019	5 Payee name Mike Garver			
6 Amount \$5,000.00	7 Payee address; City; 1901 Lexington St Houston, TX 77098-4219	State: Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense return check		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		
	ATTACH ADDITIONAL COPIES OF THIS SCH	EDULE AS NEEDED		

SCHEDULE F1

.

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense       Office Overhead/Rental         Fees       Polling Expense         Food/Beverage Expense       Printing Expense         g Gift/Awards/Memorials Expense       Salaries/Wages/Contract         Legal Services       The Instruction Guide explains how to com	Transp Expen Labor Travel Travel Other	ation/Fundraising Expense portation Equipment & Related se In District Out of District (enter a category not listed above)
1. Total pages Schedule F1:	2. FILER NAME		Ethics Commission Filers)
	Lina Hidalgo		
4 Date	5 Payee name		
07/28/2019	ActBlue Technical Services, Inc.		
6 Amount	7 Payee address; City;	State:	Zip Code
\$9.50	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		avel outside of Texas, complete Schedule T ustin, TX, officeholder living expense sing Fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	ffice sought	Office held
4 Date	5 Payee name		
07/29/2019	Subway Houston		
6 Amount \$118.26	7 Payee address; City; 8224 Kirby Dr Ste 180 Houston, TX 77054-1602	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage Expense		avel outside of Texas, complete Schedule T ustin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name C	ffice sought	Office held
4 Date	5 Payee name	18	
07/29/2019	UberConference		
6 Amount \$15.00	7 Payee address; City; 275 Sacramento St San Francisco, CA 94111-3810	State:	Zip Code
8	(a) Category (See categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Fees	Check if tra	avel outside of Texas, complete Schedule T ustin, TX, officeholder living expense e
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	ffice sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS SCHE		

	EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense       Office Overhead/Rental         Fees       Polling Expense         Food/Beverage Expense       Printing Expense         Gift/Awards/Memorials Expense       Salaries/Wages/Contrac         Legal Services       The Instruction Guide explains how to contract	Transportation Equipment & Related Expense In District Travel In District Travel Out of District Other (enter a category not listed above)		
1. Total pages Schedule F1:		3. Filer ID (Ethics Commission Filers)		
	Lina Hidalgo			
4 Date	5 Payee name			
07/30/2019	Lindale Park Civic Club			
6 Amount	7 Payee address; City;	State: Zip Code		
\$200.00	218 Joyce St Houston, TX 77009-2632			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Entry fee for Lindale Park 4th of July Parade		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		
4 Date	5 Payee name			
08/02/2019	Google			
6 Amount \$127.92	<ul> <li>7 Payee address; City;</li> <li>1600 Amphitheatre Pkwy Mountain View, CA 94043-</li> </ul>	State: Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Campaign email		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		
4 Date	5 Payee name			
08/02/2019	Green Bank			
6 Amount \$2.50	7 Payee address; City; 4000 Greenbriar Dr Houston, TX 77098-5204	State: Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Check if travel outside of Texas, complete Schedule T 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 SCH			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense       Office Overhead/Rent         Fees       Polling Expense         Food/Beverage Expense       Printing Expense         g Gift/Awards/Memorials Expense       Salaries/Wages/Contr         Legal Services       The Instruction Guide explains how to control	Transportation Equipment & Related Expense ract Labor Travel In District Travel Out of District Other (enter a category not listed above)	
1. Total pages Schedule F1:	2. FILER NAME Lina Hidalgo	3. Filer ID (Ethics Commission Filers)	
4 Date 08/02/2019	5 Payee name NGP VAN		
6 Amount \$410.00	7 Payee address; City; 1445 New York Ave NW Ste 200 Washington, DC 2	State: Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule Office Overhead/Rental Expense	) (b) Description Check if travel outside of Texas, complete Schedule T 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 08/04/2019	5 Payee name ActBlue Technical Services, Inc.		
6 Amount \$74.44	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	<ul> <li>(b) Description         Check if travel outside of Texas, complete Schedule T         Check if Austin, TX, officeholder living expense     </li> <li>Credit Card Processing Fee</li> </ul>	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	
4 Date 08/05/2019	5 Payee name NOE ALMAGUER		
6 Amount \$100.00	7 Payee address; City; 17711 Landing Pines Trl Houston, TX 77084-2565	State: Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule OTHER (enter a category not listed above)	) (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense return check	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	
	ATTACH ADDITIONAL COPIES OF THIS SCI	HEDULE AS NEEDED	

\_

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense       Office Overhead/Rental         Fees       Polling Expense         Food/Beverage Expense       Printing Expense         g Gift/Awards/Memorials Expense       Salaries/Wages/Contract         Legal Services       The Instruction Guide explains how to contract	Transportation Equipment & Related Expense ct Labor Travel In District Travel Out of District Other (enter a category not listed above)	
1. Total pages Schedule F1:	2. FILER NAME Lina Hidalgo	3. Filer ID (Ethics Commission Filers)	
4 Date 08/05/2019	5 Payee name Bayou City Strategies		
6 Amount \$2,000.00	7 Payee address; City; 1 Greenway Plz Ste 740 Houston, TX 77046-0102	State: Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Check if travel outside of Texas, complete Schedule T 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 08/05/2019	5 Payee name Do Big Things LLC		
6 Amount \$3,000.00	7 Payee address; City; PO Box 128 Mill Valley, CA 94942-0128	State: Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description . Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Digital consultants	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	
4 Date 08/05/2019	5 Payee name Verizon Wireless		
6 Amount \$214.44	7 Payee address; City; PO Box 15023 Worcester, MA 01615-0023	State: Zip Code	
8 OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fccs	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Wireless internet	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	
	ATTACH ADDITIONAL COPIES OF THIS SCHI	EDULE AS NEEDED	

EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contrac	ct Labor	Expense Travel In District Travel Out of Dis Other (enter a ca	quipment & Related
1. Total pages Schedule F1:	2. FILER NAME Lina Hidalgo		3. Fil	er ID (Etnics Co	mmission Filers)
4 Date	5 Payee name		•		
08/06/2019	Amazon				
6 Amount	7 Payee address;	City;	State:		Zip Code
\$207.87	10550 Ella Blvd Houston, TX 7	77038-2324			
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descri	ption	of Toyoo, complete Cabadula T
PURPOSE OF EXPENDITURE	Advertising Expense			heck if Austin, TX, of	of Texas, complete Schedule T ficeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	it	Office held
4 Date	5 Payee name				
08/06/2019	Nationbuilder				
6 Amount \$59.00	<ul><li>7 Payee address;</li><li>520 S Grand Ave Los Angeles,</li></ul>	City; CA 90071-2600	State:		Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Advertising Expense	at the top of this schedule)		heck if travel outside	of Texas, complete Schedule T ficeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	ot	Office held
4 Date	5 Payee name	· · · · · · · · · · · · · · · · · · ·	<u>.</u>		
08/07/2019	B&H Photo				
6 Amount \$59.00	<ul> <li>7 Payee address;</li> <li>12126 Westheimer Rd Houston</li> </ul>	City; , TX 77077-6683	State:		Zip Code
8 OF EXPENDITURE	(a) Category (See categories listed Advertising Expense		Camera equ	heck if travel outside ( heck if Austin, TX, of upment	of Texas, complete Schedule T ficeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	ht	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense       Office Overhead/Rental         Fees       Polling Expense         Food/Beverage Expense       Printing Expense         g Gift/Awards/Memorials Expense       Salaries/Wages/Contract         Legal Services       The Instruction Guide explains how to cor	ct Labor	Transportation Expense Travel In Distr Travel Out of I Other (enter a	
1. Total pages Schedule F1:	2. FILER NAME	3. F	iler ID (Ethics	Commission Filers)
	Lina Hidalgo			
4 Date	5 Payee name			
08/07/2019	United Airlines			
6 Amount \$23.00	7 Payee address; City; 233 S Wacker Dr Chicago, IL 60606-7147	State:		Zip Code
8	(-) Osterare			
° PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Travel Out Of District		Check if travel outsi Check if Austin, TX	de of Texas, complete Schedule T , officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office soug	iht	Office held
4 Date	5 Payee name			
08/07/2019	United Airlines			······
6 Amount \$23.00	7 Payee address; City; 233 S Wacker Dr Chicago, IL 60606-7147	State:		Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Travel Out Of District		Check if travel outsi Check if Austin, TX	de of Texas, complete Schedule T , officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office soug	pht	Office held
4 Date	5 Payee name			
08/07/2019	United Airlines			
6 Amount \$670.60	7 Payee address; City; 233 S Wacker Dr Chicago, IL 60606-7147	State:		Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Travel Out Of District		Check if travel outsi	de of Texas, complete Schedule T , officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office soug	iht	Office held

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense       Office Overhead/Rental         Fees       Polling Expense         Food/Beverage Expense       Printing Expense         Ø Gift/Awards/Memorials Expense       Salaries/Wages/Contract         Legal Services       The Instruction Guide explains how to communication	ct Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.	
1. Total pages Schedule F1:	2. FILER NAME Lina Hidalgo	3. Fil	er ID (Ethics Commission Filers)	
4 Date	5 Payee name			
08/08/2019	Facebook			
6 Amount \$23.08	7 Payee address; City;	State:	Zip Code	
	1 Hacker Way Menlo Park, CA 94025-1456			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense		heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sough	t Office held	
4 Date 08/09/2019	5 Payee name Administrative Business Services, LLC			
6 Amount \$3,640.00	7 Payee address; City; 10205 Atkins Ridge Dr Charlotte, NC 28213-4290	State:	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting/Banking		heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sough	nt Office held	
4 Date 08/09/2019	5 Payee name Amazon			
6 Amount \$10.87	7 Payee address; City; 10550 Ella Blvd Houston, TX 77038-2324	State:	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense		ption heck if travel outside of Texas, complete Schedule T check if Austin, TX, officeholder living expense equipment	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sough	nt Office held	
	ATTACH ADDITIONAL COPIES OF THIS SCH			

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense       Office Overhead/Rental         Fees       Polling Expense         Food/Beverage Expense       Printing Expense         g Gift/Awards/Memorials Expense       Salaries/Wages/Contrac         Legal Services       The Instruction Guide explains how to com		Transportation Expense Travel In Distric Travel Out of D Other (enter a c	
1. Total pages Schedule F1:		3. Fil	er ID (Ethics C	Commission Filers)
	Lina Hidalgo			
4 Date	5 Payee name			
08/11/2019	ActBlue Technical Services, Inc.			
6 Amount \$3.76	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		heck if travel outsid	e of Texas, complete Schedule T officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sough	nt	Office held
4 Date	5 Payee name			
08/13/2019	Boomtown Coffee			
6 Amount \$64.87	7 Payee address; City; 242 W 19th St Houston, TX 77008-4010	State:		Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage Expense		theck if travel outsid theck if Austin, TX,	e of Texas, complete Schedule T officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name C	Office sough	nt	Office held
4 Date	5 Payee name			
08/19/2019	Houston Chronicle			
6 Amount \$24.00	7 Payee address; City; 4747 Southwest Fwy Houston, TX 77027-6901	State:		Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense		Sheck if travel outsid Check if Austin, TX,	e of Texas, complete Schedule T officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sough	nt	Office held

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense       Office Overhead/Rental         Fees       Polling Expense         Food/Beverage Expense       Printing Expense         / Gift/Awards/Memorials Expense       Salaries/Wages/Contract         Legal Services       The Instruction Guide explains how to compare	Travel Out of District Other (enter a category not listed above)		
1. Total pages Schedule F1:	2. FILER NAME Lina Hidalgo	3. Filer ID (Ethics Commission Filers)		
4 Date	5 Payee name			
08/19/2019	Subway Houston			
6 Amount	7 Payee address; City;	State: Zip Code		
\$92.99	8224 Kirby Dr Ste 180 Houston, TX 77054-1602			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) ( Food/Beverage Expense	b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Team lunch		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	fice sought Office held		
4 Date	5 Payee name			
08/21/2019	Pamela Medina			
6 Amount \$250.00	<ul> <li>7 Payee address; City;</li> <li>2352 Camden Drive Ally C Houston, TX 77021</li> </ul>	State: Zip Code		
8 PURPOSE OF EXPENDITURE	Loan Repayment/Reimbursement	b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense return check		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Of	fice sought Office held		
4 Date	5 Payee name			
08/25/2019	ActBlue Technical Services, Inc.			
6 Amount \$8.69	<ul> <li>7 Payee address; City;</li> <li>14 Arrow St Ste 11 Cambridge, MA 02138-5106</li> </ul>	State: Zip Code		
8 PURPOSE OF EXPENDITURE	Fees	b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Of	fice sought Office held		
	ATTACH ADDITIONAL COPIES OF THIS SCHE			

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense       Office Overhead/Rental         Fees       Polling Expense         Food/Beverage Expense       Printing Expense         y Gift/Awards/Memorials Expense       Salaries/Wages/Contract         Legal Services       The Instruction Guide explains how to corr	Travel Out of District Other (enter a category not listed above)		
1. Total pages Schedule F1:	2. FILER NAME Lina Hidalgo	3. Filer ID (Ethics Commission Filers)		
4 Date	5 Payee name			
09/01/2019	ActBlue Technical Services, Inc.			
6 Amount \$46.06	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 Check if travel outside of Texas, complete Schedule T 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	5 Payee name			
09/02/2019	Google			
6 Amount \$127.92	<ul> <li>7 Payee address; City;</li> <li>1600 Amphitheatre Pkwy Mountain View, CA 94043-1</li> </ul>	State: Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Campaign email		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		
4 Date 09/03/2019	5 Payee name Veritex Bank			
6 Amount \$2.50	7 Payee address; City; 5111 San Felipe St Houston, TX 77056-3603	State: Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fccs	(b) Description Check if travel outside of Texas, complete Schedule T 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		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense       Office Overhead/Rental         Fees       Polling Expense         Food/Beverage Expense       Printing Expense         Gift/Awards/Memorials Expense       Salaries/Wages/Contract         Legal Services       The Instruction Guide explains how to complete the second secon	Travel Out of District Other (enter a category not listed above)		
1. Total pages Schedule F1:	2. FILER NAME	3. Filer ID (Ethics Commission Filers)		
	Lina Hidalgo			
4 Date	5 Payee name			
09/05/2019	UberConference			
6 Amount \$15.00	<ul> <li>7 Payee address; City;</li> <li>275 Sacramento St San Francisco, CA 94111-3810</li> </ul>	State: Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Conference Call line		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		
4 Date	5 Payee name			
09/05/2019	Verizon Wireless			
6 Amount \$214.44	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) Fees	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Wireless internet		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		
4 Date	5 Payee name			
09/08/2019	ActBlue Technical Services, Inc.			
6 Amount \$5.74	<ul> <li>7 Payee address; City;</li> <li>14 Arrow St Ste 11 Cambridge, MA 02138-5106</li> </ul>	State: Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fccs	(b) Description Check if travel outside of Texas, complete Schedule T 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 SCH			

1

	EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense       Office Overhead/Rental         Fees       Polling Expense         Food/Beverage Expense       Printing Expense         y Gift/Awards/Memorials Expense       Salaries/Wages/Contract         Legal Services       The Instruction Guide explains how to contract	Travel Out of District Other (enter a category	nt & Related		
1. Total pages Schedule F1:	2. FILER NAME	3. Filer ID (Ethics Commiss	ion Filers)		
	Lina Hidalgo		·		
4 Date	5 Payee name				
09/09/2019	Bayou City Strategies				
6 Amount	7 Payee address; City;	State: Zip Co	de		
\$3,000.00					
	1 Greenway Plz Ste 740 Houston, TX 77046-0102				
8 PURPOSE OF	(a) Category (See categories listed at the top of this schedule)	b) Description			
EXPENDITURE	Salaries/Wages/Contract Labor	Fundraising consultant			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	ffice sought Off	ice held		
4 Date	5 Payee name				
09/09/2019	Houston Chronicle				
6 Amount	7 Payee address; City;	State: Zip Co	de		
\$24.00	4747 Southwest Fwy Houston, TX 77027-6901				
8	(a) Category (See categories listed at the top of this schedule)	(b) Description	complete Schedule T		
PURPOSE	Office Overhead/Rental Expense	Check if Austin, TX, officeholde			
EXPENDITURE	onice overhead tenta Expense	news subscription	5 1		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	ffice sought Off	ice held		
4 Date	5 Payee name				
09/10/2019	NGP VAN				
6 Amount \$410.00	7 Payee address; City;	State: Zip Co	de		
\$410.00	1445 New York Ave NW Ste 200 Washington, DC 200	5 2159			
	1445 New Tork Ave Nw Ste 200 washington, DC 200				
8 PURPOSE	(a) Category (See categories listed at the top of this schedule)	(b) Description	complete Schedule T		
OF	Office Overhead/Rental Expense	Check if Austin, TX, officeholde			
EXPENDITURE		compliance software			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	ffice sought Off	ice held		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense       Office Overhead/Rental         Fees       Polling Expense         Food/Beverage Expense       Printing Expense         g Gift/Awards/Memorials Expense       Salaries/Wages/Contract         Legal Services       The Instruction Guide explains how to contract	Transportation Equipment & Related Expense ct Labor Travel In District Travel Out of District Other (enter a category not listed above)		
1. Total pages Schedule F1:	2. FILER NAME Lina Hidalgo	3. Filer ID (Ethics Commission Filers)		
4. Date 09/11/2019	5 Payee name Nationbuilder			
6 Amount \$59.00	<ul> <li>7 Payee address; City;</li> <li>520 S Grand Ave Los Angeles, CA 90071-2600</li> </ul>	State: Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense website		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		
4 Date 09/15/2019	5 Payee name ActBlue Technical Services, Inc.			
6 Amount \$39.50	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 Check if travel outside of Texas, complete Schedule T 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 09/16/2019	5 Payee name Arne's Warehouse			
6 Amount \$40.98	7 Payee address; City; 2830 Hicks St Houston, TX 77007-3812	State: Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Event Expense	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Decorations for Fiestas Patrias		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		
	ATTACH ADDITIONAL COPIES OF THIS SCH	EDULE AS NEEDED		

EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contra de explains how to con	ct Labor	Transportation Expense Travel In Distri Travel Out of D Other (enter a	
1. Total pages Schedule F1:	2. FILER NAME	······································	3. Fi	iler ID (Ethics C	Commission Filers)
	Lina Hidalgo				
4 Date	5 Payee name				
09/16/2019	Jason's Deli	Citra	State:		Zip Code
6 Amount \$333.32	7 Payee address; 19755 US-59 Humble, TX 773	City;	State.		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories lister Food/Beverage Expense	d at the top of this schedule)		Check if travel outsid	le of Texas, complete Schedule T officeholder living expense Candidates Staff
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office soug	ht	Office held
4 Date	5 Payee name				
09/16/2019	Target				
6 Amount \$3.24	<ul><li>7 Payee address;</li><li>8605 Westheimer Rd Houston</li></ul>	City; , TX 77063-4201	State:		Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Event Expense	at the top of this schedule)		Check if travel outsic	le of Texas, complete Schedule T officeholder living expense I Celebration Fiest
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office soug	ht	Office held
4 Date	5 Payee name				
09/17/2019	Human Agency				
6 Amount \$1,525.00	<ul><li>7 Payee address;</li><li>31 N Newstead Ave Saint Lou</li></ul>	City; is, MO 63108-2207	State:		Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Consulting Expense	at the top of this schedule)		Check if travel outsic Check if Austin, TX,	de of Texas, complete Schedule T officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office soug	ht	Office held
	ATTACH ADDITIONAL CO	PIES OF THIS SCH	EDULE A	S NEEDED	· · · · ·

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense       Office Overhead/Renta         Fees       Polling Expense         Food/Beverage Expense       Printing Expense         g Gift/Awards/Memorials Expense       Salaries/Wages/Contra         Legal Services       The Instruction Guide explains how to co	ct Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.	
1. Total pages Schedule F1:			er ID (Ethics Commission Filers)	
	Lina Hidalgo			
4 Date	5 Payee name			
09/24/2019	Administrative Business Services, LLC			
6 Amount \$440.00	7 Payee address; City;	State:	Zip Code	
	10205 Atkins Ridge Dr Charlotte, NC 28213-4290			
8 PURPOSE	(a) Category (See categories listed at the top of this schedule)	(b) Descri	ption heck if travel outside of Texas, complete Schedule T	
OF	Accounting/Banking		Check if Austin, TX, officeholder living expense	
EXPENDITURE		Accounting	g services	
9 Complete ONLY if direct	Candidate/Officeholder name	Office sough	nt Office held	
expenditure to benefit C/OH				
4 Date	5 Payee name			
09/29/2019	ActBlue Technical Services, Inc.			
6 Amount	7 Payee address; City;	State:	Zip Code	
\$100.95				
	14 Arrow St Ste 11 Cambridge, MA 02138-5106			
		<b></b>		
8 PURPOSE	(a) Category (See categories listed at the top of this schedule)	(b) Descri	ption heck if travel outside of Texas, complete Schedule T	
OF	Fees		Check if Austin, TX, officeholder living expense	
EXPENDITURE	·	Credit Card	1 Processing Fee	
9 Complete ONLY if direct	Candidate/Officeholder name	_I Office sough	nt Office held	
expenditure to benefit C/OH				
4 Date	5 Payee name			
09/30/2019	ActBlue Technical Services, Inc.			
6 Amount	7 Payee address; City;	State:	Zip Code	
\$47.03				
	14 Arrow St Ste 11 Cambridge, MA 02138-5106			
8 PURPOSE	(a) Category (See categories listed at the top of this schedule)	(b) Descri	ption heck if travel outside of Texas, complete Schedule T	
OF	Fees		Check if Austin, TX, officeholder living expense	
EXPENDITURE		Credit Card	d Processing Fee	
9 Complete ONLY if direct	Candidate/Officeholder name	Office sough	nt Office held	
expenditure to benefit C/OH				
L	1			
	ATTACH ADDITIONAL COPIES OF THIS SCH	EDULE AS	NEEDED	

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense       Office Overhead/Renta         Fees       Polling Expense         Food/Beverage Expense       Printing Expense         g Gift/Awards/Memorials Expense       Salaries/Wages/Contra         Legal Services       The Instruction Guide explains how to co	Transportation Equipment & Related Expense ct Labor Travel In District Travel Out of District Other (enter a category not listed above)		
1. Total pages Schedule F1:	2. FILER NAME	3. Filer ID (Ethics Commission Filers)		
	Lina Hidalgo			
4 Date	5 Payee name			
09/30/2019	Facebook			
6 Amount \$975.00	<ul> <li>7 Payee address; City;</li> <li>1 Hacker Way Menlo Park, CA 94025-1456</li> </ul>	State: Zip Code		
	· · · · · · · · · · · · · · · · · · ·			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Online Ads		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		
4 Date	5 Payee name			
09/30/2019	UberConference			
6 Amount \$15.00	7 Payee address; City; 275 Sacramento St San Francisco, CA 94111-3810	State: Zip Code		
8 PURPOSE OF	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense		
EXPENDITURE		Conference Call line		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		
4 Date	5 Payee name	· · · · · · · · · · · · · · · · · · ·		
10/01/2019	Fiestas Patrias			
6 Amount \$200.00	7 Payee address; City; PO Box 262871 Houston, TX 77207-2871	State: Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Event Expense	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Entry fee for parade		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		
	ATTACH ADDITIONAL COPIES OF THIS SCH	EDULE AS NEEDED		

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense       Office Over         Fees       Polling Exp         Food/Beverage Expense       Printing Exp         Gift/Awards/Memorials Expense       Salaries/W         Legal Services       The Instruction Guide explains	pense ages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) Form.	
1. Total pages Schedule F1:	2. FILER NAME Lina Hidalgo	3. Fil	er ID (Ethics Commission Filers)	
4 Date 10/02/2019	5 Payee name Google	•		
6 Amount \$127.92	<ul> <li>7 Payee address; City;</li> <li>1600 Amphitheatre Pkwy Mountain View,</li> </ul>	State: CA 94043-1351	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of t Advertising Expense		heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sough	t Office held	
4 Date 10/02/2019	5 Payee name NGP VAN			
6 Amount \$410.00	<ul> <li>7 Payee address; City;</li> <li>1445 New York Ave NW Ste 200 Washing</li> </ul>	State: gton, DC 20005-2158	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of t Office Overhead/Rental Expense		heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sough	t Office held	
4 Date 10/02/2019	5 Payee name Veritex Bank		· · · · · · · · · · · · · · · · · · ·	
6 Amount \$97.25	7 Payee address; City; 5111 San Felipe St Houston, TX 77056-36	State:	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of t Fccs	check order	heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sough	t Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense       Office Overhead/Rental         Fees       Polling Expense         Food/Beverage Expense       Printing Expense         y Gift/Awards/Memorials Expense       Salaries/Wages/Contract         Legal Services       The Instruction Guide explains how to contract	Transportation Equipment & Related Expense ct Labor Travel In District Travel Out of District Other (enter a category not listed above)		
1. Total pages Schedule F1:	2. FILER NAME Lina Hidalgo	3. Filer ID (Ethics Commission Filers)		
4 Date 10/07/2019	5 Payee name Verizon Wireless			
6 Amount \$214.44	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) Fees	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Wireless internet		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		
4 Date 10/13/2019	5 Payee name ActBlue Technical Services, Inc.			
6 Amount \$2.97	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 Check if travel outside of Texas, complete Schedule T 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 10/15/2019	5 Payee name Human Agency			
6 Amount \$2,500.00	<ul> <li>7 Payee address; City;</li> <li>31 N Newstead Ave Saint Louis, MO 63108-2207</li> </ul>	State: Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Consulting Expense	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Digital consultants		
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				
EXPENDITURE CATEGORIES FOR BOX 8(a)				
--	---	--		
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense       Office Overhead/Renta         Fees       Polling Expense         Food/Beverage Expense       Printing Expense         g Gift/Awards/Memorials Expense       Salaries/Wages/Contra         Legal Services       The Instruction Guide explains how to co	Transportation Equipment & Related Expense act Labor Travel In District Travel Out of District Other (enter a category not listed above)		
1. Total pages Schedule F1:	2. FILER NAME Lina Hidalgo	3. Filer ID (Ethics Commission Filers)		
4 Date	5 Payee name			
10/06/2019	ActBlue Technical Services, Inc.			
6 Amount	7 Payee address; City;	State: Zip Code		
\$3.77	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 Check if travel outside of Texas, complete Schedule T 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 10/07/2019	5 Payee name Houston Chronicle			
6 Amount \$24.00	<ul> <li>7 Payee address; City;</li> <li>4747 Southwest Fwy Houston, TX 77027-6901</li> </ul>	State: Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense news subscription		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		
4 Date	5 Payee name			
10/07/2019	Nationbuilder			
6 Amount \$59.00	<ul> <li>7 Payee address; City;</li> <li>520 S Grand Ave Los Angeles, CA 90071-2600</li> </ul>	State: Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense website		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		
	ATTACH ADDITIONAL COPIES OF THIS SCH	IEDULE AS NEEDED		

EXPENDITURE CATEGORIES FOR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense       Office Overhead/Rental         Fees       Polling Expense         Food/Beverage Expense       Printing Expense         g Gift/Awards/Memorials Expense       Salaries/Wages/Contract         Legal Services       The Instruction Guide explains how to contract	Travel Out of District Other (enter a category not listed above)
1. Total pages Schedule F1:	2. FILER NAME	3. Filer ID (Ethics Commission Filers)
	Lina Hidalgo	
4 Date	5 Payee name	
10/21/2019	The Union Kitchen	
6 Amount \$422.58	7 Payee address; City;	State: Zip Code
	4057 Bellaire Blvd Houston, TX 77025-1121	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense team dinner
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date	5 Payee name	
10/23/2019	Univision Communications, Inc	
6 Amount \$4,500.00	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) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Radio ads for Mayo
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date	5 Payee name	
10/24/2019	Astros Retail Store	
6 Amount \$110.50	7 Payee address; City; 1661 Texas Ave Houston, TX 77003	State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Jersey for Bronx Borough president
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS SCHE	EDULE AS NEEDED

EXPENDITURE CATEGORIES FOR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense       Office Overhead/Renta         Fees       Polling Expense         Food/Beverage Expense       Printing Expense         y Gift/Awards/Memorials Expense       Salaries/Wages/Contra         Legal Services       The Instruction Guide explains how to compare the salaries of the salaries in the salar	Transportation Equipment & Related Expense ract Labor Travel In District Travel Out of District Other (enter a category not listed above)
1. Total pages Schedule F1:	2. FILER NAME Lina Hidalgo	3. Filer ID (Ethics Commission Filers)
4 Date 10/24/2019	5 Payee name Fedex Office - Houston	
6 Amount \$25.35	7 Payee address; City;	State: Zip Code
	5616 Westheimer Rd Houston, TX 77056-4002	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Jersey shipping costs
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 10/27/2019	5 Payee name ActBlue Technical Services, Inc.	
6 Amount \$407.26	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 Check if travel outside of Texas, complete Schedule T 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 10/29/2019	5 Payee name UberConference	
6 Amount \$15.00	<ul> <li>7 Payee address; City;</li> <li>275 Sacramento St San Francisco, CA 94111-3810</li> </ul>	State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fccs	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Conference Call line
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS SCH	HEDULE AS NEEDED

EXPENDITURE CATEGORIES FOR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense       Office Overhead/Renta         Fees       Polling Expense         Food/Beverage Expense       Printing Expense         y Gift/Awards/Memorials Expense       Salaries/Wages/Contra         Legal Services       The Instruction Guide explains how to contract	Solicitation/Fundraising Expense Transportation Equipment & Related Expense act Labor Travel In District Travel Out of District Other (enter a category not listed above)
1. Total pages Schedule F1:	2. FILER NAME Lina Hidalgo	3. Filer ID (Ethics Commission Filers)
4 Date 10/30/2019	5 Payee name American Airlines	
6 Amount \$234.30	7 Payee address; City; 4255 Amon Center Blvd Ft Worth, TX 76155	State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Travel Out Of District	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Flight from Miami to Houston to attend fundra
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 10/31/2019	5 Payee name Facebook	
6 Amount \$975.00	<ul> <li>7 Payee address; City;</li> <li>1 Hacker Way Menlo Park, CA 94025-1456</li> </ul>	State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Online Ads
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 11/03/2019	5 Payee name ActBlue Technical Services, Inc.	
6 Amount \$25.57	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) Fccs	(b) Description Check if travel outside of Texas, complete Schedule T 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 SCH	EDULE AS NEEDED

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense       Office Overh         Fees       Polling Expense         Food/Beverage Expense       Printing Exp         Ø Gift/Awards/Memorials Expense       Salaries/Wa         Legal Services       The Instruction Guide explains	nse Trai ense Exp ges/Contract Labor Trav Trav Oth	citation/Fundraising Expense nsportation Equipment & Related ense vel In District vel Out of District er (enter a category not listed above)
1. Total pages Schedule F1:	2. FILER NAME Lina Hidalgo	3. Filer ID	0 (Ethics Commission Filers)
4 Date 11/04/2019	5 Payee name Google		
6 Amount	7 Payee address; City;	State:	Zip Code
\$99.84	1600 Amphitheatre Pkwy Mountain View, (	CA 94043-1351	
8 PURPOSE	(a) Category (See categories listed at the top of thi	s schedule) (b) Description	) If travel outside of Texas, complete Schedule T
OF	Advertising Expense		if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4 Date	5 Payee name		
11/04/2019	Houston Chronicle		
6 Amount \$24.00	<ul> <li>7 Payee address; City;</li> <li>4747 Southwest Fwy Houston, TX 77027-6</li> </ul>	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of thi Office Overhead/Rental Expense	Check	if travel outside of Texas, complete Schedule T if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4 Date 11/04/2019	5 Payee name NGP VAN		
6 Amount \$410.00	7 Payee address; City; 1445 New York Ave NW Ste 200 Washing	State: on, DC 20005-2158	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of thi Office Overhead/Rental Expense		if travel outside of Texas, complete Schedule T if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF T	HIS SCHEDULE AS NE	EDED

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense       Office Overhead/Rental         Fees       Polling Expense         Food/Beverage Expense       Printing Expense         / Gift/Awards/Memorials Expense       Salaries/Wages/Contract         Legal Services       The Instruction Guide explains how to contract	ct Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
1. Total pages Schedule F1:	2. FILER NAME Lina Hidalgo	3. Fi	er ID (Ethics Commission Filers)
4 Date 11/04/2019	5 Payee name Veritex Bank		
6 Amount \$2.50	7 Payee address; City; 5111 San Felipe St Houston, TX 77056-3603	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees		ption heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sough	office held
4 Date 11/05/2019	5 Payee name Bayou City Strategies		
6 Amount \$3,000.00	<ul> <li>7 Payee address; City;</li> <li>1 Greenway Plz Ste 740 Houston, TX 77046-0102</li> </ul>	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor		ption heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense g consultant
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sough	t Office held
4 Date 11/06/2019	5 Payee name Nationbuilder		
6 Amount \$59.00	<ul> <li>7 Payee address; City;</li> <li>520 S Grand Ave Los Angeles, CA 90071-2600</li> </ul>	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	website	heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sough	nt Office held
	ATTACH ADDITIONAL COPIES OF THIS SCHI	EDULE AS	S NEEDED

EXPENDITURE CATEGORIES FOR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense       Office Overhead/Rental         Fees       Polling Expense         Food/Beverage Expense       Printing Expense         y Gift/Awards/Memorials Expense       Salaries/Wages/Contral         Legal Services       The Instruction Guide explains how to compare to the second se	Transportation Equipment & Related Expense ct Labor Travel In District Travel Out of District Other (enter a category not listed above)
1. Total pages Schedule F1:	2. FILER NAME Lina Hidalgo	3. Filer ID (Ethics Commission Filers)
4 Date 11/06/2019	5 Payee name Verizon Wireless	
6 Amount \$214.44	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) Fees	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Wireless internet
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 11/08/2019	5 Payee name American Airlines	
6 Amount \$18.48	<ul> <li>7 Payee address; City;</li> <li>4255 Amon Center Blvd Ft Worth, TX 76155</li> </ul>	State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Travel Out Of District	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Fee for seat for flight to Miami
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 11/08/2019	5 Payee name American Airlines	
6 Amount \$75.00	<ul> <li>7 Payee address; City;</li> <li>4255 Amon Center Blvd Ft Worth, TX 76155</li> </ul>	State: Zip Code
8 OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Travel Out Of District	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense SAME-DAY FLIGHT CHANGE/IAH-MIA on November 7t
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS SCH	EDULE AS NEEDED

EXPENDITURE CATEGORIES FOR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense       Office Overhead/Rental         Fees       Polling Expense         Food/Beverage Expense       Printing Expense         g Gift/Awards/Memorials Expense       Salaries/Wages/Contract         Legal Services       The Instruction Guide explains how to cor	Transportation Equipment & Related Expense ct Labor Travel In District Travel Out of District Other (enter a category not listed above)
1. Total pages Schedule F1:	2. FILER NAME Lina Hidalgo	3. Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	
11/10/2019	ActBlue Technical Services, Inc.	
6 Amount	7 Payee address; City;	State: Zip Code
\$29.44	14 Arrow St Ste 11 Cambridge, MA 02138-5106	
8 PURPOSE	(a) Category (See categories listed at the top of this schedule)	(b) Description Check if travel outside of Texas, complete Schedule T
OF EXPENDITURE	Fees	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	5 Payee name	
11/12/2019	Human Agency	
6 Amount \$2,500.00	<ul> <li>7 Payee address; City;</li> <li>31 N Newstead Ave Saint Louis, MO 63108-2207</li> </ul>	State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Consulting Expense	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Digital consultants
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 11/12/2019	5 Payee name InterContinental Miami	
6 Amount \$282.50	7 Payee address; City; 100 Chopin Plz Miami, FL 33131-4342	State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Travel Out Of District	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Hotel for Miami fundraiser
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS SCH	EDULE AS NEEDED

EXPENDITURE CATEGORIES FOR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense       Office Overhead/Renta         Fees       Polling Expense         Food/Beverage Expense       Printing Expense         g Gift/Awards/Memorials Expense       Salaries/Wages/Contra         Legal Services       The Instruction Guide explains how to compare to the second seco	Transportation Equipment & Related Expense act Labor Travel In District Travel Out of District Other (enter a category not listed above)
1. Total pages Schedule F1:	2. FILER NAME Lina Hidalgo	3. Filer ID (Ethics Commission Filers)
4 Date 11/12/2019	5 Payee name Zest Restaurant	
6 Amount \$367.90	7 Payee address; City; 200 S Biscayne Blvd Miami, FL 33131-2310	State: Zip Code
8 OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Food & beverages for fundraiser
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 11/15/2019	5 Payee name Hilton Hotels	
6 Amount \$2,496.52	7 Payee address; City; 10 E Grand Ave Chicago, IL 60611-3506	State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Food & beverages for fundraiser
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 11/17/2019	5 Payee name ActBlue Technical Services, Inc.	
6 Amount \$448.35	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) Fccs	(b) Description Check if travel outside of Texas, complete Schedule T 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 SCH	EDULE AS NEEDED

EXPENDITURE CATEGORIES FOR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense       Office Overhead/Rental         Fees       Polling Expense         Food/Beverage Expense       Printing Expense         y Gift/Awards/Memorials Expense       Salaries/Wages/Contract         Legal Services       The Instruction Guide explains how to cor	Transportation Equipment & Related Expense at Labor Travel In District Travel Out of District Other (enter a category not listed above)
1. Total pages Schedule F1:	2. FILER NAME Lina Hidalgo	3. Filer ID (Ethics Commission Filers)
4 Date 11/19/2019 6 Amount	5 Payee name Greater Houston Partnership 7 Payee address; City;	State: Zip Code
\$1,500.00	701 Avenida De Las Americas # 900 Houston, TX 770	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense State of the County Table
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 11/24/2019	5 Payee name ActBlue Technical Services, Inc.	
6 Amount \$426.61	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 Check if travel outside of Texas, complete Schedule T 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 11/29/2019	5 Payee name UberConference	
6 Amount \$15.00	<ul> <li>7 Payee address; City;</li> <li>275 Sacramento St San Francisco, CA 94111-3810</li> </ul>	State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fccs	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Conference Call line
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS SCH	EDULE AS NEEDED

EXPENDITURE CATEGORIES FOR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense       Office Overhead/Rental         Fees       Polling Expense         Food/Beverage Expense       Printing Expense         g Gift/Awards/Memorials Expense       Salaries/Wages/Contra         Legal Services       The Instruction Guide explains how to contract	Transportation Equipment & Related Expense ct Labor Travel In District Travel Out of District Other (enter a category not listed above)
1. Total pages Schedule F1:	2. FILER NAME Lina Hidalgo	3. Filer ID (Ethics Commission Filers)
4 Date 12/01/2019	5 Payee name ActBlue Technical Services, Inc.	
6 Amount \$64.67	<ul> <li>7 Payee address; City;</li> <li>14 Arrow St Ste 11 Cambridge, MA 02138-5106</li> </ul>	State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description Check if travel outside of Texas, complete Schedule T 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 12/02/2019	5 Payee name Google	
6 Amount \$102.34	7 Payee address; City; 1600 Amphitheatre Pkwy Mountain View, CA 94043-	State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Campaign email
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/02/2019	5 Payee name Houston Chronicle	
6 Amount \$24.00	<ul> <li>7 Payee address; City;</li> <li>4747 Southwest Fwy Houston, TX 77027-6901</li> </ul>	State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhcad/Rental Expense	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense news subscription
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS SCH	EDULE AS NEEDED

EXPENDITURE CATEGORIES FOR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense       Office Overhead/Renta         Fees       Polling Expense         Food/Beverage Expense       Printing Expense         y Gift/Awards/Memorials Expense       Salaries/Wages/Contra         Legal Services       The Instruction Guide explains how to compare to the second seco	Transportation Equipment & Related Expense In District Travel Out of District Other (enter a category not listed above)
1. Total pages Schedule F1:	2. FILER NAME Lina Hidalgo	3. Filer ID (Ethics Commission Filers)
4 Date 12/02/2019	5 Payee name NGP VAN	
6 Amount \$410.00	7 Payee address; City; 1445 New York Ave NW Ste 200 Washington, DC 20	State: Zip Code 005-2158
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Check if travel outside of Texas, complete Schedule T 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 12/02/2019	5 Payee name Veritex Bank	
6 Amount \$2.50	7 Payee address; City; 5111 San Felipe St Houston, TX 77056-3603	State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description Check if travel outside of Texas, complete Schedule T 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 12/04/2019	5 Payee name Democrats.com	
6 Amount \$988.00	7 Payee address; City; PO Box 1452 New York, NY 10276-1452	State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Online ads
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS SCH	EDULE AS NEEDED

EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense       Office Overhead/Rental         Fees       Polling Expense         Food/Beverage Expense       Printing Expense         g Gift/Awards/Memorials Expense       Salaries/Wages/Contract         Legal Services       The Instruction Guide explains how to contract	Tran Expe t Labor Trav Trav Othe	citation/Fundraising Expense isportation Equipment & Related ense el In District rel Out of District er (enter a category not listed above)		
1. Total pages Schedule F1:	2. FILER NAME	3. Filer ID	(Ethics Commission Filers)		
	Lina Hidalgo				
4 Date	5 Payee name				
12/04/2019	Southwest Airlines				
6 Amount \$255.98	7 Payee address; City;	State:	Zip Code		
	2702 Love Field Dr Dallas, TX 75235-1908				
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Travel Out Of District		f travel outside of Texas, complete Schedule T f Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Dffice sought	Office held		
4 Date	5 Payee name				
12/04/2019	United Airlines				
6 Amount \$252.30	7 Payee address; City; 233 S Wacker Dr Chicago, IL 60606-7147	State:	Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Travel Out Of District		f travel outside of Texas, complete Schedule T f Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
4 Date	5 Payee name				
12/05/2019	Bayou City Strategies				
6 Amount \$3,000.00	7 Payee address; City; 1 Greenway Plz Ste 740 Houston, TX 77046-0102	State:	Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salarics/Wages/Contract Labor		f travel outside of Texas, complete Schedule T f Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
	ATTACH ADDITIONAL COPIES OF THIS SCH	DULE AS NE	EDED		

EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense       Office Overhead/Rental         Fees       Polling Expense         Food/Beverage Expense       Printing Expense         g Gift/Awards/Memorials Expense       Salaries/Wages/Contract         Legal Services       The Instruction Guide explains how to contract	ct Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.		
1. Total pages Schedule F1:	2. FILER NAME Lina Hidalgo	3. Fil	ler ID (Ethics Commission Filers)		
4 Date 12/06/2019	5 Payee name Nationbuilder		0		
6 Amount \$59.00	<ul> <li>7 Payee address; City;</li> <li>520 S Grand Ave Los Angeles, CA 90071-2600</li> </ul>	State:	Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	C website	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sough	ht Office held		
4 Date 12/06/2019	5 Payee name Verizon Wireless				
6 Amount \$214.44	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) Fees		Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sough	ht Office held		
4 Date 12/08/2019	5 Payee name ActBlue Technical Services, Inc.				
6 Amount \$112.79	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) Fccs	Credit Card	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense d Processing Fee		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sough	ht Office held		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense       Office Overhead/Rental         Fees       Polling Expense         Food/Beverage Expense       Printing Expense         y Gift/Awards/Memorials Expense       Salaries/Wages/Contract         Legal Services       The Instruction Guide explains how to corr	Travel Out of District Other (enter a category not listed above) nplete this form.			
1. Total pages Schedule F1:	2. FILER NAME Lina Hidalgo	3. Filer ID (Ethics Commission Filers)			
4 Date 12/09/2019	5 Payee name Human Agency				
6 Amount \$692.00	<ul> <li>7 Payee address; City;</li> <li>31 N Newstead Ave Saint Louis, MO 63108-2207</li> </ul>	State: Zip Code			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Consulting Expense	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Digital consultants			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			
4 Date 12/10/2019	5 Payee name Univision Communications, Inc				
6 Amount \$5,000.00	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) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Ads for Mayor Turner			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			
4 Date 12/12/2019	5 Payee name Human Agency				
6 Amount \$2,500.00	<ul> <li>7 Payee address; City;</li> <li>31 N Newstead Ave Saint Louis, MO 63108-2207</li> </ul>	State: Zip Code			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Consulting Expense	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Digital consultants			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name C	Office sought Office held			
	ATTACH ADDITIONAL COPIES OF THIS SCHE	DULE AS NEEDED			

EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense       Office Overhead/Renta         Fees       Polling Expense         Food/Beverage Expense       Printing Expense         y Gift/Awards/Memorials Expense       Salaries/Wages/Contra         Legal Services       The Instruction Guide explains how to co	Transportation Equipment & Related Expense ct Labor Travel In District Travel Out of District Other (enter a category not listed above)			
1. Total pages Schedule F1:	2. FILER NAME Lina Hidalgo	3. Filer ID (Ethics Commission Filers)			
4 Date 12/15/2019	5 Payee name ActBlue Technical Services, Inc.				
6 Amount \$622.13	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 Check if travel outside of Texas, complete Schedule T 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 12/20/2019	5 Payee name J&N Enterprises				
6 Amount \$72.03	7 Payee address; City; 2015 W 34th St Houston, TX 77018-6139	State: Zip Code			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Printing Expense	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense campaign postcards			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			
4 Date 12/22/2019	5 Payee name ActBlue Technical Services, Inc.				
6 Amount \$625.16	<ul> <li>7 Payee address; City;</li> <li>14 Arrow St Ste 11 Cambridge, MA 02138-5106</li> </ul>	State: Zip Code			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fecs	(b) Description Check if travel outside of Texas, complete Schedule T 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 SCH	EDULE AS NEEDED			

EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense       Office Overhead/Rental         Fees       Polling Expense         Food/Beverage Expense       Printing Expense         g Gift/Awards/Memorials Expense       Salaries/Wages/Contral         Legal Services       The Instruction Guide explains how to compare to the second se	ict Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.		
1. Total pages Schedule F1:	2. FILER NAME	3. File	er ID (Ethics Commission Filers)		
	Lina Hidalgo				
4 Date	5 Payee name				
12/23/2019	Derek Darnell				
6 Amount \$1,750.00	7 Payee address; City; 6507 Kernel St Houston, TX 77087-1513	State:	Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor		heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	t Office held		
4 Date	5 Payee name				
12/23/2019	Ashley San Miguel				
6 Amount \$1,500.00	<ul> <li>7 Payee address; City;</li> <li>7814 Candlegreen Ln Houston, TX 77071-2709</li> </ul>	State:	Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor		heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	t Office held		
4 Date	5 Payee name				
12/29/2019	ActBlue Technical Services, Inc.				
6 Amount \$43.47	7 Payee address; City; 14 Arrow St Ste 11 Cambridge, MA 02138-5106	State:	Zip Code		
8 OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fccs		otion heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense Processing Fee		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	t Office held		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense       Office Overhead/Rental         Fees       Polling Expense         Food/Beverage Expense       Printing Expense         y Gift/Awards/Memorials Expense       Salaries/Wages/Contract         Legal Services       The Instruction Guide explains how to cor	Transportation Equipment & Related Expense ct Labor Travel In District Travel Out of District Other (enter a category not listed above)		
1. Total pages Schedule F1:	2. FILER NAME Lina Hidalgo	3. Filer ID (Ethics Commission Filers)		
4 Date 12/30/2019	5 Payee name Houston Chronicle			
6 Amount \$24.00	<ul> <li>7 Payee address; City;</li> <li>4747 Southwest Fwy Houston, TX 77027-6901</li> </ul>	State: Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense news subscription		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		
4 Date 12/30/2019	5 Payee name UberConference			
6 Amount \$15.00	7 Payee address; City; 275 Sacramento St San Francisco, CA 94111-3810	State: Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Conference Call line		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		
4 Date 12/31/2019	5 Payee name ActBlue Technical Services, Inc.			
6 Amount \$554.48	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) Fccs	(b) Description Check if travel outside of Texas, complete Schedule T 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 SCHE	EDULE AS NEEDED		

#### INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

#### SCHEDULE K

The	e Instruction Guide explains how to complete this form.	1. Total pag not ava	ges Schedule K: silable
2. FILER NAME Lina Hidalgo		3. Filer ID (	(Ethics Commission Filers)
4. Date 09/17/2019	<ul> <li>5 Name of person from whom amount is received United Airlines</li> <li>6 Address of person from whom amount is received; City; State; Zip Cod 233 S Wacker Dr Chicago, IL 60606-7147</li> </ul>	e	8 Amount \$1,224.60
	7 Purpose for which amount is received Round trip Houston to DC	Check if	political contribution returned to filer
4. Date 11/29/2019	<ul> <li>5 Name of person from whom amount is received Hilton Hotels</li> <li>6 Address of person from whom amount is received; City; State; Zip Coc 10 E Grand Ave Chicago, IL 60611-3506</li> </ul>	le	8 Amount \$608.91
	7 Purpose for which amount is received Reimbursement of room for fundraiser	Check if	political contribution returned to filer

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

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

SCHEDULE T

The Instruction 0	Guide explains how	to complete this fo	orm.	1. Total pages Schedule	e T:
2. FILER NAME Lina Hidalgo				3. Filer ID (Ethics Comn	nission Filers)
4 Name of Contributor / Corport	ation or Labor Organi	ization / Pledgor / Pa	avee		
United Airlines	•	0			
5 Contribution / Expenditure rep	ported on:	····			
Schedule A2	Schedule B	Schedule B(J)	Schedule C2	Schedule D	Schedule F1
Schedule F2	Schedule F4		Schedule H	Schedule COH-UC	Schedule B-SS
Lin	e of person(s) travelin na Hidalgo	g			
	rture city or name of ouston	departure location			
	nation city or name of w York	f destination location	1		
10 Means of transportation COMMAIR	11 Purpose of Meeting wit	travel (including nan h Casey Foundation	ne of conference, s	seminar, or other event)	
4 Name of Contributor / Corpor	ation or Labor Organ	ization / Pledgor / Pa	ayee		
United Airlines					
5 Contribution / Expenditure rep	oorted on:				
Schedule A2	Schedule B	Schedule B(J)	Schedule C2	Schedule D	Schedule F1
Schedule F2	Schedule F4	Schedule G	Schedule H	Schedule COH-UC	Schedule B-SS
Liu	e of person(s) travelin na Hidalgo	g			
	rture city or name of ow York	departure location			
9 Destination city or name of destination location Houston					
10 Means of transportation COMMAIR       11 Purpose of travel (including name of conference, seminar, or other event) Return flight from meeting with Casey Foundation					
4 Name of Contributor / Corpor	ation or Labor Organ	ization / Pledgor / Pa	ayee		
American Airlines		-			
5 Contribution / Expenditure rep	ported on:				
Schedule A2	Schedule B	Schedule B(J)	Schedule C2	Schedule D	Schedule F1
Schedule F2	Schedule F4	Schedule G	Schedule H	Schedule COH-UC	
Lin	e of person(s) travelin na Hidalgo	g			
11/07/2019 8 Departure city or name of departure location Houston					
9 Destination city or name of destination location Miami					
10 Means of transportation COMMAIR	11 Purpose of Flight for fu	travel (including nan	ne of conference, s	seminar, or other event)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

SCHEDULE T

		· · · · ·				
The Inst	ruction Guid	le explains how	to complete this fo	orm.	1. Total pages Schedule	э Т:
2. FILER NAME Lina Hidalgo				3. Filer ID (Ethics Comn	nission Filers)	
4 Name of Contributor	/ Corporation	n or Labor Organi	zation / Pledgor / Pa	ayee		
American Airlines						
5 Contribution / Expen	diture reporte	ed on:				
Sche	dule A2	Schedule B	Schedule B(J)	Schedule C2	Schedule D	Schedule F1
Sche	dule F2	Schedule F4	Schedule G	Schedule H	Schedule COH-UC	Schedule B-SS
6 Dates of travel	Lina Hidalgo					
11/10/2019	8 Departure Miami	e city or name of c	departure location			
	9 Destinatio Housto		destination location	1		
10 Means of transporta COMMAIR	ation	11 Purpose of t Return flight	travel (including nar t from fundraiser	ne of conference, s	seminar, or other event)	
4 Name of Contributor	/ Corporation	n or Labor Organi	zation / Pledgor / Pa	ayee		
5 Contribution / Expen	diture reporte	ed on:				
Sche	dule A2	Schedule B	Schedule B(J)	Schedule C2	Schedule D	Schedule F1
Sche	dule F2	Schedule F4	Schedule G	Schedule H	Schedule COH-UC	Schedule B-SS
6 Dates of travel	6 Dates of travel 7 Name of person(s) traveling					
	8 Departure city or name of departure location					
	9 Destinatio	on city or name of	destination location	1		
10 Means of transporta	10 Means of transportation 11 Purpose of travel (including name of conference, seminar, or other event)					
4 Name of Contributor	/ Corporation	n or Labor Organi	zation / Pledgor / Pa	ауее		
5 Contribution / Expen	diture reporte	ed on:		······		
Sche	dule A2	Schedule B	Schedule B(J)	Schedule C2	Schedule D	Schedule F1
Sche	dule F2	Schedule F4	Schedule G	Schedule H	Schedule COH-UC	Schedule B-SS
6 Dates of travel	7 Name of (	person(s) travelin	g	·		
8 Departure city or name of departure location						
	9 Destinatio	on city or name of	destination location	]		· · ·
10 Means of transporta	ation	11 Purpose of I	travel (including nan		seminar, or other event)	
L	RECORDER'S MEMORANDUM:					
RECORDER'S MEMORATIVE Memorative was 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