

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM **JC/OH**
COVER SHEET PG 1

The JC/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00081836	2 Total pages filed: 28	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Ms.	FIRST Gloria	MI	OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/17/2018
	NICKNAME	LAST Lopez	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 2121 Sage Rd., Ste. 110 Houston, TX 77056		ZIP CODE	Date Hand-delivered or Date Postmarked
				Receipt # Amount
				Date Processed
				Date Imaged
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Ms.	FIRST Heidy	MI	
	NICKNAME	LAST Orellana	SUFFIX	
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 2121 Sage Rd., Ste. 110 Houston, TX 77056		APT / SUITE #;	CITY; STATE; ZIP CODE
7 CAMPAIGN TREASURER PHONE	AREA CODE (832)	PHONE NUMBER 821-5295	EXTENSION	
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)			
	<input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH-FR)			
9 PERIOD COVERED	Month Day Year 07/01/2017	THROUGH	Month Day Year 12/31/2017	
10 ELECTION	ELECTION DATE Month Day Year 11/06/2018		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known) Family District Court Judge District 308th	

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JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH
COVER SHEET PG 2

2 of 28

13 C / OH NAME Lopez, Gloria (Ms.) **14** Filer ID (Ethics Commission Filers)
00081836

15 NOTICE FROM POLITICAL COMMITTEE(S)
 Additional Pages

This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

COMMITTEE TYPE	COMMITTEE NAME
<input type="checkbox"/> GENERAL	
<input type="checkbox"/> SPECIFIC	
	COMMITTEE ADDRESS
	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

16 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 12,513.95
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 7,046.58
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 8,907.31
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 5,000.00

17 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Ms. Gloria Lopez

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

SUBTOTALS - JC/OH

18 FILER NAME Lopez, Gloria (Ms.)	19 Filer ID (Ethics Commission Filers) 00081836
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20 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
NAME OF SCHEDULE		
1.	<input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$ 9,900.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 2,613.95
3.	<input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$ 5,000.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 5,992.69
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 1,053.89
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 1/12 Rpt: 4/28
2 FILER NAME Lopez, Gloria (Ms.)		3 Filer ID (Ethics Commission Filers) 00081836
4 Date 09/26/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aly, Sameh (Mr.)	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Houston, TX 77087	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Owner and Attorney.
10 Contributor's employer/law firm Abogado Aly, PLLC		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/29/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castanon, Cynthia (Ms.)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Houston, TX 77034	
Contributor's Principal Occupation Attorney		Contributor's Job Title Solo Practitioner. Attorney.
Contributor's employer/law firm Cynthia Castanon Attorney at Law		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/19/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charlton, Cecilia (Mrs.)	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Houston, TX 77054	
Contributor's Principal Occupation Attorney		Contributor's Job Title Associate Attorney
Contributor's employer/law firm Law Office of Bryan Fagan		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 2/12 Rpt: 5/28
2 FILER NAME Lopez, Gloria (Ms.)		3 Filer ID (Ethics Commission Filers) 00081836
4 Date 10/19/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chavez, Damaris (Ms.)	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code Pasadena, TX 77503	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Solo Practitioner. Owner and Attorney.
10 Contributor's employer/law firm Law Office of Damaris A. Chavez, PLLC		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/26/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chavez, Damaris (Ms.)	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Pasadena, TX 77503	
Contributor's Principal Occupation Attorney		Contributor's Job Title Solo Practitioner. Owner and Attorney.
Contributor's employer/law firm Law Office of Damaris A. Chavez, PLLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/19/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cothrun, Sherri (Mrs.)	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Houston, TX 77019	
Contributor's Principal Occupation Attorney		Contributor's Job Title Solo Practitioner. Owner and Attorney.
Contributor's employer/law firm Sherri L. Cothrun PC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 3/12 Rpt: 6/28
2 FILER NAME Lopez, Gloria (Ms.)		3 Filer ID (Ethics Commission Filers) 00081836
4 Date 10/19/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cusic, Dessiray (Ms.)	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Houston, TX 77044	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Solo Practitioner. Owner and Attorney.
10 Contributor's employer/law firm The Cusic Law Firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/19/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De Luna, Daniel (Mr.)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Houston, TX 77063	
Contributor's Principal Occupation Attorney		Contributor's Job Title Associate Attorney
Contributor's employer/law firm Gonzalez Law Group, PLLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/29/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delgado, Maria (Ms.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Houston, TX 77011	
Contributor's Principal Occupation Elected Official Staff		Contributor's Job Title Chief of Staff
Contributor's employer/law firm Texas House of Representatives		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 4/12 Rpt: 7/28
2 FILER NAME Lopez, Gloria (Ms.)		3 Filer ID (Ethics Commission Filers) 00081836
4 Date 10/19/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dura, Adaugo (Ms.)	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Houston, TX 77057	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Solo Practitioner. Attorney.
10 Contributor's employer/law firm Law Office of Glenda Dura		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/19/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fernandez, Laura Patricia (Ms.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77479	
Contributor's Principal Occupation Attorney		Contributor's Job Title Owner and Attorney.
Contributor's employer/law firm Fernandez Law Group, PLLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/29/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Marco (Mr.)	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code Houston, TX 77059	
Contributor's Principal Occupation Attorney		Contributor's Job Title Managing Attorney
Contributor's employer/law firm Gonzalez Law Group, PLLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 5/12 Rpt: 8/28
2 FILER NAME Lopez, Gloria (Ms.)		3 Filer ID (Ethics Commission Filers) 00081836
4 Date 09/26/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hatamaleh, Fayez (Mr.)	7 Amount of Contribution (\$) \$150.00
	6 Contributor address; City; State; Zip Code Pearland, TX 77581	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Associate Attorney
10 Contributor's employer/law firm Abogado Aly, PLLC		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/29/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Chung Y. (Mr.)	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Katy, TX 77494	
Contributor's Principal Occupation Attorney		Contributor's Job Title Owner and Attorney.
Contributor's employer/law firm C.Y. Lee Legal Group, LLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/04/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lombrana, Aaron (Mr.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Houston, TX 77087	
Contributor's Principal Occupation Student		Contributor's Job Title N/A
Contributor's employer/law firm N/A		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 6/12 Rpt: 9/28
2 FILER NAME Lopez, Gloria (Ms.)		3 Filer ID (Ethics Commission Filers) 00081836
4 Date 12/04/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lombrana, Victor (Mr.)	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Houston, TX 77003	
8 Contributor's Principal Occupation Analyst		9 Contributor's Job Title Financial Analyst
10 Contributor's employer/law firm MD Anderson Cancer Center		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/19/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Arnold (Mr.)	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code Houston, TX 77007	
Contributor's Principal Occupation Attorney		Contributor's Job Title Owner and Attorney.
Contributor's employer/law firm Law Offices of Arnold R. Lopez & Associates, PLLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/02/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Francisco (Mr.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code McAllen, TX 78501	
Contributor's Principal Occupation Retired		Contributor's Job Title N/A
Contributor's employer/law firm N/A		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 7/12 Rpt: 10/28
2 FILER NAME Lopez, Gloria (Ms.)		3 Filer ID (Ethics Commission Filers) 00081836
4 Date 09/26/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Jorge (Mr.)	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Houston, TX 77088	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Lopez Pinney, PC		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/29/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lozano, Jorge (Mr.)	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Houston, TX 77092	
Contributor's Principal Occupation Attorney		Contributor's Job Title Associate Attorney
Contributor's employer/law firm The JL Salazar Law Firm, PLLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/19/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mack, Natalia (Mrs.)	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Austin, TX 78738	
Contributor's Principal Occupation Manager		Contributor's Job Title Rates and Pricing Manager
Contributor's employer/law firm Pedernales Electric Co-Op Inc.		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 8/12 Rpt: 11/28
2 FILER NAME Lopez, Gloria (Ms.)		3 Filer ID (Ethics Commission Filers) 00081836
4 Date 09/29/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mora, Mayra (Ms.)	7 Amount of Contribution (\$) \$200.00
	6 Contributor address; City; State; Zip Code Houston, TX 77076	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Solo Practitioner. Attorney.
10 Contributor's employer/law firm The Mora Law Firm, PLLC		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 12/20/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moreno, Candace (Mrs.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Houston, TX 77087	
Contributor's Principal Occupation Unemployed		Contributor's Job Title N/A
Contributor's employer/law firm N/A		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/19/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Navarro Jr., Guadalupez (Mr.)	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code Houston, TX 77096	
Contributor's Principal Occupation Attorney		Contributor's Job Title Solo Practitioner. Attorney.
Contributor's employer/law firm Law Office of Guadalupe Navarro Jr.		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 9/12 Rpt: 12/28
2 FILER NAME Lopez, Gloria (Ms.)		3 Filer ID (Ethics Commission Filers) 00081836
4 Date 10/19/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Northcutt, Frances M. (Ms.)	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Houston, TX 77027	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Solo Practitioner. Attorney.
10 Contributor's employer/law firm Frances M. Northcutt Attorney at Law		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 12/02/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olguin, Jennifer (Mrs.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Spring, TX 77379	
Contributor's Principal Occupation Manager		Contributor's Job Title Engineering Program Manager
Contributor's employer/law firm Hewlett Packward Enterprises		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/02/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olguin, Ramon (Mr.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Spring, TX 77379	
Contributor's Principal Occupation Accountant		Contributor's Job Title Accounting Manager
Contributor's employer/law firm National Oilwell Varco		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 10/12 Rpt: 13/28
2 FILER NAME Lopez, Gloria (Ms.)		3 Filer ID (Ethics Commission Filers) 00081836
4 Date 09/29/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramirez, Andrea (Ms.)	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code Houston, TX 77055		
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Associate Attorney
10 Contributor's employer/law firm Callegri Law Firm, PC		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/26/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramirez, Guadalupe (Mrs.)	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Houston, TX 77070		
Contributor's Principal Occupation Attorney		Contributor's Job Title Assistant District Attorney
Contributor's employer/law firm Harris County District Attorney's Office		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/26/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramirez, Karina (Ms.)	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code Houston, TX 77006		
Contributor's Principal Occupation Attorney		Contributor's Job Title Solo Practitioner. Attorney.
Contributor's employer/law firm Law Office of Karina A. Ramirez		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 11/12 Rpt: 14/28
2 FILER NAME Lopez, Gloria (Ms.)		3 Filer ID (Ethics Commission Filers) 00081836
4 Date 09/26/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruiz, Luis (Mr.)	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code Baytown, TX 77520	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Solo Practitioner. Attorney.
10 Contributor's employer/law firm Law Office of Luis Ruiz		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/19/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salfiti, Ryan (Mr.)	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code Katy, TX 77450	
Contributor's Principal Occupation Attorney		Contributor's Job Title Solo Practitioner. Attorney.
Contributor's employer/law firm Law Office of Ryan Salfiti		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/29/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salfiti, Ryan (Mr.)	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Katy, TX 77450	
Contributor's Principal Occupation Attorney		Contributor's Job Title Solo Practitioner. Attorney.
Contributor's employer/law firm Law Office of Ryan Salfiti		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 12/12 Rpt: 15/28
2 FILER NAME Lopez, Gloria (Ms.)		3 Filer ID (Ethics Commission Filers) 00081836
4 Date 12/01/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shah, Rizwan (Mr.)	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Houston, TX 77034		
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Solo Practitioner. Attorney.
10 Contributor's employer/law firm The Shah Law Firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/28/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Tasha (Mrs.)	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Fresno, TX 77545		
Contributor's Principal Occupation Attorney		Contributor's Job Title Associate Attorney
Contributor's employer/law firm Jacqueline Smith & Associates, P.C.		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/01/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zapata, Wilfredo (Mr.)	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Houston, TX 77058		
Contributor's Principal Occupation Loan Originator		Contributor's Job Title Broker
Contributor's employer/law firm Houston Brokers		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 16/28	
2 FILER NAME Lopez, Gloria (Ms.)		3 Filer ID (Ethics Commission Filers) 00081836	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 10/19/2017	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law, Nora (Mrs.)	8 Amount of contribution (\$) \$2,613.95	9 In-kind contribution description
	7 Contributor address; City; State; Zip Code Katy, TX 77450	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL) Attorney		13 Contributor's job title (FOR JUDICIAL) (See instructions) Solo Practitioner	
14 Contributor's employer/law firm (FOR JUDICIAL) Law Office of Nora V. Law		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

LOANS (JUDICIAL)

SCHEDULE E(J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E(J): Sch: 1/1 Rpt: 17/28
2 FILER NAME Lopez, Gloria (Ms.)		3 Filer ID (Ethics Commission Filers) 00081836
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 08/18/2017	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Gloria (Mrs.)	9 Loan Amount (\$) \$5,000.00
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code Houston, TX 77056	10 Interest Rate 0
		11 Maturity Date 01/01/2019
12 Lender's Principal Occupation Attorney		13 Lender's Job Title Attorney
14 Lender's Employer/Law Firm Law Office of Gloria E Lopez		15 Law Firm of lender's spouse (if any)
16 If lender is child, law firm of parent(s) (if any)		
17 Description of Collateral <input checked="" type="checkbox"/> None		18 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
19 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	20 Name of guarantor	22 Amount Guaranteed (\$)
	21 Guarantor address; City; State; Zip Code	
23 Guarantor's Principal Occupation		24 Guarantor's Job Title
25 Guarantor's Employer/Law Firm		26 Law Firm of guarantor's spouse (if any)
27 If guarantor is child, law firm of parent(s) (if any)		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/10 Rpt: 18/28	2 FILER NAME Lopez, Gloria (Ms.)	3 Filer ID (Ethics Commission Filers) 00081836
4 Date 11/01/2017	5 Payee name Bank of America	
6 Amount (\$) \$16.00	7 Payee address; City; State; Zip Code 5171 San Felipe St. Houston, TX 77056	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Banking Service Fees.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/01/2017	Payee name Bank of America	
Amount (\$) \$16.00	Payee address; City; State; Zip Code 5171 San Felipe St. Houston, TX 77056	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Banking Service Fee.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/15/2017	Payee name Go Daddy	
Amount (\$) \$43.32	Payee address; City; State; Zip Code 14455 N. Hayden Rd. Suite 219 Scottsdale, AZ 85260	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Website Domain Fees.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/10 Rpt: 19/28	2 FILER NAME Lopez, Gloria (Ms.)	3 Filer ID (Ethics Commission Filers) 00081836
4 Date 10/20/2017	5 Payee name Harris County Democratic Party	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 1445 North Loop West Suite 110 Houston, TX 77008	
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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Coordinating Campaign.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/21/2017	Payee name Harris County Democratic Party	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 1445 North Loop West Suite 110 Houston, TX 77008	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Coordinating Campaign.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/29/2017	Payee name Harris County Democratic Primary	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 1445 North Loop West Suite 110 Houston, TX 77008	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Judicial Candidate Filing Fee.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 3/10 Rpt: 20/28	2	FILER NAME Lopez, Gloria (Ms.)	3	Filer ID (Ethics Commission Filers) 00081836
4	Date 09/25/2017	5	Payee name Michaels Store		
6	Amount (\$) \$17.03	7	Payee address; City; State; Zip Code 7630 FM 1960 W. Houston, TX 77070		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Supplies	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies for Campaign Kick Off Event. Decorations.		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
	Date 12/20/2017		Payee name Moreno, Candace (Ms.)		
	Amount (\$) \$600.00		Payee address; City; State; Zip Code 2911 Aspen Park Ln. Houston, TX 77084		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Creation of Campaign Website.		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
	Date 09/22/2017		Payee name Office Depot		
	Amount (\$) \$22.71		Payee address; City; State; Zip Code 3931 Fairway Plaza Drive Pasadena, TX 77505		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Pens and Clip Boards for Petitions. Campaign Office Supplies.		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/10 Rpt: 21/28	2 FILER NAME Lopez, Gloria (Ms.)	3 Filer ID (Ethics Commission Filers) 00081836
4 Date 09/29/2017	5 Payee name Paypal	
6 Amount (\$) \$87.65	7 Payee address; City; State; Zip Code 2211 North First Street San Jose, CA 95131	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Contribution Service Fee.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/29/2017	Payee name Paypal	
Amount (\$) \$17.65	Payee address; City; State; Zip Code 2211 North First Street San Jose, CA 95131	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Contribution Service Fee.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/29/2017	Payee name Paypal	
Amount (\$) \$1.90	Payee address; City; State; Zip Code 2211 North First Street San Jose, CA 95131	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Contribution Service Fee.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/10 Rpt: 22/28	2 FILER NAME Lopez, Gloria (Ms.)	3 Filer ID (Ethics Commission Filers) 00081836
4 Date 09/29/2017	5 Payee name Paypal	
6 Amount (\$) \$7.15	7 Payee address; City; State; Zip Code 2211 North First Street San Jose, CA 95131	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Contribution Service Fee.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/29/2017	Payee name Paypal	
Amount (\$) \$8.90	Payee address; City; State; Zip Code 2211 North First Street San Jose, CA 95131	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Contribution Service Fee.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/29/2017	Payee name Paypal	
Amount (\$) \$3.65	Payee address; City; State; Zip Code 2211 North First Street San Jose, CA 95131	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Contribution Service Fee.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/10 Rpt: 23/28	2 FILER NAME Lopez, Gloria (Ms.)	3 Filer ID (Ethics Commission Filers) 00081836
4 Date 10/06/2017	5 Payee name Paypal	
6 Amount (\$) \$8.90	7 Payee address; City; State; Zip Code 2211 North First Street San Jose, CA 95131	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Contribution Service Fee.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/06/2017	Payee name Paypal	
Amount (\$) \$8.90	Payee address; City; State; Zip Code 2211 North First Street San Jose, CA 95131	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Contribution Service Fee.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/19/2017	Payee name Paypal	
Amount (\$) \$4.05	Payee address; City; State; Zip Code 2211 North First Street San Jose, CA 95131	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Contribution Service Fee.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/10 Rpt: 24/28	2 FILER NAME Lopez, Gloria (Ms.)	3 Filer ID (Ethics Commission Filers) 00081836
4 Date 10/19/2017	5 Payee name Paypal	
6 Amount (\$) \$0.68	7 Payee address; City; State; Zip Code 2211 North First Street San Jose, CA 95131	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Contribution Service Fee.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/19/2017	Payee name Paypal	
Amount (\$) \$27.00	Payee address; City; State; Zip Code 2211 North First Street San Jose, CA 95131	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Contribution Service Fee.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/19/2017	Payee name Paypal	
Amount (\$) \$5.40	Payee address; City; State; Zip Code 2211 North First Street San Jose, CA 95131	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Contribution Service Fee.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/10 Rpt: 25/28	2 FILER NAME Lopez, Gloria (Ms.)	3 Filer ID (Ethics Commission Filers) 00081836
4 Date 10/19/2017	5 Payee name Paypal	
6 Amount (\$) \$1.03	7 Payee address; City; State; Zip Code 2211 North First Street San Jose, CA 95131	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Contribution Service Fee.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/19/2017	Payee name Paypal	
Amount (\$) \$35.15	Payee address; City; State; Zip Code 2211 North First Street San Jose, CA 95131	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Contribution Service Fee.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/19/2017	Payee name Paypal	
Amount (\$) \$1.03	Payee address; City; State; Zip Code 2211 North First Street San Jose, CA 95131	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Contribution Service Fee.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/10 Rpt: 26/28	2 FILER NAME Lopez, Gloria (Ms.)	3 Filer ID (Ethics Commission Filers) 00081836
4 Date 09/26/2017	5 Payee name Pizza Hut	
6 Amount (\$) \$154.90	7 Payee address; City; State; Zip Code 906 St. Emanuel Houston, TX 77003	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Pizza Expense for Campaign Kick Off Event.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/24/2017	Payee name Saint Arnold Brewery Company	
Amount (\$) \$1,150.16	Payee address; City; State; Zip Code 2000 Lyons Ave. Houston, TX 77020	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee paid to hold/reserve location at Saint Arnold Brewery Company. Fee for Campaign Kick Off
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/02/2017	Payee name Saint Arnold Brewery Company	
Amount (\$) \$230.03	Payee address; City; State; Zip Code 2000 Lyons Ave. Houston, TX 77020	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Additional Fee for Campaign Kick Off Event held at Saint Arnold Brewery Company.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/10 Rpt: 27/28	2 FILER NAME Lopez, Gloria (Ms.)	3 Filer ID (Ethics Commission Filers) 00081836
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4 Date 09/25/2017	5 Payee name Walmart
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6 Amount (\$) \$15.48	7 Payee address; City; State; Zip Code 22605 State Highway 249 Tomball, TX 77375
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Supplies.	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Balloons, Table Cloths, and decorations for Campaign Kick Off Event.
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/25/2017	Payee name Walmart
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Amount (\$) \$8.02	Payee address; City; State; Zip Code 22605 State Highway 249 Tomball, TX 77375
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Supplies	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Additional Table Cloths for Campaign Kick Off Event.
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 1/1 Rpt: 28/28	2 FILER NAME Lopez, Gloria (Ms.)	3 Filer ID (Ethics Commission Filers) 00081836
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4 Date 07/31/2017	5 Payee name ProV Marketing LLC
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6 Amount (\$) \$458.51	7 Payee address; City; State; Zip Code P.O. Box 34213 Houston, TX 77234
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Reimbursement from political contributions intended

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Logo and Campaign Envelopes.
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/02/2017	Payee name ProV Marketing LLC
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Amount (\$) \$595.38	Payee address; City; State; Zip Code P.O. Box 34213 Houston, TX 77234
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Reimbursement from political contributions intended

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign TShirts.
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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