JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 1

The JC/OH Instruction	n Guide explains how to comp	plete this form.	1 Filer ID (Ethics Commis 00081836	,	2 Total pages fi	led: 28
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	r	
OFFICEHOLDER	Ms.	Gloria				
NAME	1110.	Clona			Date Received	
					ELECTRONIC	ALLY FILED
	NICKNAME	LAST		SUFFIX	01/17/2018	
		Lopez				
4 CANDIDATE /	ADDRESS / PO BOX; APT	/ SUITE #; CIT	-Y·	ZIP CODE	Date Hand-delivered o	r Date Postmarked
OFFICEHOLDER	2121 Sage Rd., Ste. 110	,	- ,			
MAILING ADDRESS					Receipt #	Amount
Change of Address	Houston, TX 77056				Date Processed	•
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST			MI	
TREASURER NAME	Ms.	Heidy				
	NICKNAME	LAST			SUFFIX	
		Orellana				
6 CAMPAIGN	STREET ADDRESS (NO PO	BOX PLEASE):	AP	r / SUITE #; CITY;	STA	ATE; ZIP CODE
TREASURER	2121 Sage Rd., Ste. 110	,		,		,
ADDRESS						
(Residence or Business)	Lieusten TV 77050					
	Houston, TX 77056					
7 CAMPAIGN	AREA CODE PHON	NE NUMBER	EXTENSION			
TREASURER	(832) 821-5295					
PHONE						
8 REPORT						
TYPE	X January 15	30th day before	e election	Runoff		mpaign treasurer
	July 15	8th day before		Exceeded \$500 limit	 appointment (offi Final Report (Atta 	
		our day before				ach C/On-FR)
	Month Dov Yoor			Month Day	Voor	
9 PERIOD COVERED	Month Day Year 07/01/2017	т	HROUGH	Month Day 12/31/201	Year	
	07/01/2017	11	INCOGIT	12/31/201	.1	
10 ELECTION	ELECTION DATE Month Day Year)rimon (ELECTION TYPE		
	11/06/2018		Primary	Runoff	Other	
	11/00/2010	X	Seneral	Special		
11 OFFICE	OFFICE HELD (if any)	•		12 OFFICE SOUGHT	(if known)	
				Family District C	ourt Judge Distri	ct 308th
	1			1		
		~~~				
		GO	FO PAGE 2			
Forms provided by Te	exas Ethics Commission	www.et	hics.state.tx.u	S		Version V1.0.5389

### JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2 2 of 28

I

<b>13</b> C / OH NAME	Lopez, Gloria (Ms.)		14 Filer ID 00081836	(Ethics Con	mission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditur These expenditures may have been made without th d officeholders are required to report this information	ne candidate's or offi	iceholder's kn	owledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL				
		COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRES	S		
16 CONTIBUTION TOTALS		I AL CONTRIBUTIONS OF \$50 OR LESS (OTHER TI ARANTEES OF LOANS), UNLESS ITEMIZED	HAN PLEDGES,	\$	0.00
		ICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	)	\$	12,513.95
EXPENDITURE TOTALS	3. TOTAL POLITIC	AL EXPENDITURES OF \$100 OR LESS, UNLESS I	TEMIZED	\$	0.00
	4. TOTAL POLIT	ICAL EXPENDITURES		\$	7,046.58
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LA RIOD	ST DAY OF THE	\$	8,907.31
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIE OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS ( TING PERIOD	OF THE LAST DAY	\$	5,000.00
17 AFFADAVIT					
		I swear, or affirm, under penalty true and correct and includes all under Title 15, Election Code. Ms			
			Candidate or Officeh	older	
		-			
AFFIX NO	TARY STAMP / SEAL AB	UVE			
	-	aid	, this the		day
of	, 20, to c	ertify which, witness my hand and seal of office.			
Signature of offi	cer administering oath	Printed name of officer administering oath	Title of offic	er administer	ing oath
Forms provided by Te	xas Ethics Commission	www.ethics.state.tx.us		Ver	sion V1.0.5389

### FORM JC/OH COVER SHEET PG 3

\$

				-	3 of 28
FILER NAME19 Filer ID(Lopez, Gloria (Ms.)00081836					Commission Filers)
SC	HEDULI	E SUBTOTALS	•		
NAI	ME OF	SCHEDULE		SU	BTOTAL AMOUNT
1.	Х	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	9,900.00
2.	Х	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	2,613.95
3.	SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)			\$	
4.	Х	SCHEDULE E(J): LOANS (JUDICIAL)			5,000.00
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	5,992.69
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.	Х	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	1,053.89
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	

SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED

SUBTOTALS - JC/OH

18

20

12.

TO FILER

The Instru	ction Guide explains how to complete this t	form.	1 Total pages Schedule A(J)1: Sch: 1/12 Rpt: 4/28
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
Lopez, Gloria	a (Ms.)		00081836
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
09/26/2017	Aly, Sameh (Mr.)		\$500.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77087		
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	
Attorney		Owner and Attorney.	
10 Contributor's e		<b>11</b> Law firm of contributor's sp	bouse (if any)
Abogado Aly			
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
09/29/2017	Castanon, Cynthia (Ms.)		\$50.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77034		
	Principal Occupation	Contributor's Job Title	
Attorney		Solo Practitioner. Attor	
	employer/law firm	Law firm of contributor's sp	bouse (if any)
	tanon Attorney at Law		
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
10/19/2017	Charlton, Cecilia (Mrs.)		\$75.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77054		
	Principal Occupation	Contributor's Job Title	
Attorney	and the set from	Associate Attorney	
	employer/law firm f Bryan Fagan	Law firm of contributor's sp	bouse (ii any)
	s a child, law firm of parent(s) (if any)		
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The Instrue	ction Guide explains how to complete this	form.	1 Total pages Schedule A(J)1: Sch: 2/12 Rpt: 5/28
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Lopez, Gloria	a (Ms.)		00081836
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
10/19/2017	Chavez, Damaris (Ms.)		\$250.00
	6 Contributor address; City; State; Zip Code		
	Decedera TV 77502		
<b>0</b> Contributor's [	Pasadena, TX 77503	9 Contributor's Job Title	
Attorney	Principal Occupation	Solo Practitioner. Owne	er and Attorney
10 Contributor's e	amplover/law firm	11 Law firm of contributor's sp	
	f Damaris A. Chavez, PLLC		
	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
09/26/2017	Chavez, Damaris (Ms.)	/	\$250.00
	Contributor address; City; State; Zip Code		
	Pasadena, TX 77503		
Contributor's F	Principal Occupation	Contributor's Job Title	I
Attorney		Solo Practitioner. Own	er and Attorney.
	employer/law firm	Law firm of contributor's sp	pouse (if any)
Law Office o	f Damaris A. Chavez, PLLC		
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
10/19/2017	Cothrun, Sherri (Mrs.)		\$500.00
	Contributor address; City; State; Zip Code		
	Houston TX 77010		
Contributor's [	Houston, TX 77019 Principal Occupation	Contributor's Job Title	
Attorney		Solo Practitioner. Owne	er and Attorney
Contributor's employer/law firm Law firm of contributor's sp		-	
Sherri L. Cot			
	s a child, law firm of parent(s) (if any)		
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The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A(J)1: Sch: 3/12 Rpt: 6/28
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
Lopez, Gloria	a (Ms.)		00081836
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
10/19/2017	Cusic, Dessiray (Ms.)		\$100.00
	6 Contributor address; City; State; Zip Code		1
	Houston, TX 77044		
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	
Attorney		Solo Practitioner. Owne	er and Attorney.
10 Contributor's e		<b>11</b> Law firm of contributor's sp	oouse (if any)
The Cusic La	aw Firm		
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
10/19/2017	De Luna, Daniel (Mr.)		\$50.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77063		
Contributor's F	Principal Occupation	Contributor's Job Title	•
Attorney		Associate Attorney	
Contributor's e	employer/law firm	Law firm of contributor's sp	bouse (if any)
Gonzalez La	w Group, PLLC		
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
09/29/2017	Delgado, Maria (Ms.)		\$100.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77011		
Contributor's F	Principal Occupation	Contributor's Job Title	1
Elected Official Staff Chief of Staff			
Contributor's employer/law firm Law firm of contributor's sp		bouse (if any)	
Texas House of Representatives			
If contributor is	s a child, law firm of parent(s) (if any)	1	
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The Instrue	ction Guide explains how to complete this f	form.	1 Total pages Schedule A(J)1: Sch: 4/12 Rpt: 7/28
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Lopez, Gloria	a (Ms.)		00081836
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)
10/19/2017	Dura, Adaugo (Ms.)		\$25.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77057		
	Principal Occupation	9 Contributor's Job Title	
Attorney		Solo Practitioner. Attorn	-
10 Contributor's e	f Glenda Dura	<b>11</b> Law firm of contributor's sp	oouse (if any)
	s a child, law firm of parent(s) (if any)		
Date 10/19/2017	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$) \$100.00
10/19/2017	Fernandez, Laura Patricia (Ms.)		\$100.00
	Contributor address; City; State; Zip Code		
	Sugar Land, TX 77479		
Contributor's F	Principal Occupation	Contributor's Job Title	
Attorney		Owner and Attorney.	
_	employer/law firm	Law firm of contributor's sp	pouse (if any)
	aw Group, PLLC		
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
09/29/2017	Gonzalez, Marco (Mr.)		\$2,500.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77059		
Contributor's F	Principal Occupation	Contributor's Job Title	
Attorney		Managing Attorney	
	employer/law firm	Law firm of contributor's sp	oouse (if any)
Gonzalez La	w Group, PLLC		
If contributor is	s a child, law firm of parent(s) (if any)		
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The Instrue	ction Guide explains how to complete this f	1 Total pages Schedule A(J)1: Sch: 5/12 Rpt: 8/28	
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
Lopez, Gloria	a (Ms.)		00081836
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
09/26/2017	Hatamaleh, Fayez (Mr.)		\$150.00
	6 Contributor address; City; State; Zip Code		
	Pearland, TX 77581		
	Principal Occupation	9 Contributor's Job Title	
Attorney		Associate Attorney	
10 Contributor's e		<b>11</b> Law firm of contributor's sp	bouse (if any)
Abogado Aly			
<b>12</b> If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
09/29/2017	Lee, Chung Y. (Mr.)		\$500.00
	Contributor address; City; State; Zip Code		
	Kat. TX 77404		
O antributaria I	Katy, TX 77494	O suteile de la la Title	
Attorney	Principal Occupation	Contributor's Job Title Owner and Attorney.	
	employer/law firm	Law firm of contributor's sp	
	gal Group, LLC	Law IIII of Contributor 3 Sp	
	s a child, law firm of parent(s) (if any)		
in contributor is			
Date	Full name of contributor out-of-state PAC (ID#:	<b>`</b>	Amount of Contribution (\$)
12/04/2017	Lombrana, Aaron (Mr.)	)	\$100.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77087		
Contributor's F	Principal Occupation	Contributor's Job Title	1
Student		N/A	
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)
N/A			
If contributor is	s a child, law firm of parent(s) (if any)	•	
Forme provided	hy Texas Ethics Commission www.ethic	s state ty us	Version V1 0 5389

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			<b>3</b> Filer ID (Ethics Commission Filers)
Lopez, Gloria (Ms.)			00081836
4 Date 5 Full name of contributor	out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
12/04/2017 Lombrana, Victor (Mr.)			\$100.00
6 Contributor address; City; St			
Houston, TX 77003			
8 Contributor's Principal Occupation	9	Contributor's Job Title	
Analyst		Financial Analyst	
<b>10</b> Contributor's employer/law firm	1	<b>1</b> Law firm of contributor's sp	ouse (if any)
MD Anderson Cancer Center			
<b>12</b> If contributor is a child, law firm of parent(s) (if a	ny)		
Date Full name of contributor	out-of-state PAC (ID#:	)	Amount of Contribution (\$)
10/19/2017 Lopez, Arnold (Mr.)			\$150.00
Contributor address; City; St	ate; Zip Code		
Houston, TX 77007			
Contributor's Principal Occupation		Contributor's Job Title	
Attorney		Owner and Attorney.	
Contributor's employer/law firm		Law firm of contributor's sp	ouse (if any)
Law Offices of Arnold R. Lopez & Associat	tes, PLLC		
If contributor is a child, law firm of parent(s) (if a	ny)		
Date Full name of contributor	out-of-state PAC (ID#:	)	Amount of Contribution (\$)
12/02/2017 Lopez, Francisco (Mr.)			\$100.00
Contributor address; City; St	ate; Zip Code		
McAllen, TX 78501			
Contributor's Principal Occupation		Contributor's Job Title	
Retired		N/A	
Contributor's employer/law firm		Law firm of contributor's sp	ouse (if any)
N/A			
If contributor is a child, law firm of parent(s) (if a	ny)		
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The Instrue	ction Guide explains how to complete this f	form.	1 Total pages Schedule A(J)1: Sch: 7/12 Rpt: 10/28
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Lopez, Gloria	a (Ms.)		00081836
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)
09/26/2017	Lopez, Jorge (Mr.)		\$100.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77088	T	
	Principal Occupation	9 Contributor's Job Title	
Attorney		Attorney	
10 Contributor's e Lopez Pinne		<b>11</b> Law firm of contributor's sp	oouse (if any)
-	-		
	s a child, law firm of parent(s) (if any)		
Data			
Date 09/29/2017	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$) \$250.00
09/29/2017	Lozano, Jorge (Mr.)		\$250.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77092		
Contributor's F	Principal Occupation	Contributor's Job Title	
Attorney		Associate Attorney	
_	employer/law firm	Law firm of contributor's sp	pouse (if any)
	zar Law Firm, PLLC		
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
10/19/2017	Mack, Natalia (Mrs.)		\$1,000.00
	Contributor address; City; State; Zip Code		
	Austin, TX 78738		
Contributor's F	Principal Occupation	Contributor's Job Title	
Manager		Rates and Pricing Mana	ager
	employer/law firm	Law firm of contributor's sp	oouse (if any)
Pedernales I	Electric Co-Op Inc.		
If contributor is	s a child, law firm of parent(s) (if any)		
Forms provided	by Texas Ethics Commission www.ethic	s state tx us	Version V1 0 5389

The Instru	ction Guide explains how to complete this t	form.	1 Total pages Schedule A(J)1: Sch: 8/12 Rpt: 11/28
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
Lopez, Gloria	a (Ms.)		00081836
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
09/29/2017	Mora, Mayra (Ms.)		\$200.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77076	1	
	Principal Occupation	9 Contributor's Job Title	
Attorney		Solo Practitioner. Attorn	
10 Contributor's e	employer/law firm w Firm, PLLC	<b>11</b> Law firm of contributor's sp	bouse (if any)
	·		
	s a child, law firm of parent(s) (if any)		
Data			
Date 12/20/2017	Full name of contributor out-of-state PAC (ID#: Moreno, Candace (Mrs.)	)	Amount of Contribution (\$) \$25.00
12/20/2017	Contributor address; City; State; Zip Code		
	Contributor address, City, State, Zip Code		
	Houston, TX 77087		
Contributor's F	I Principal Occupation	Contributor's Job Title	1
Unemployed	I	N/A	
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)
N/A			
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
10/19/2017	Navarro Jr., Guadalupez (Mr.)		\$150.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77096		
	Principal Occupation	Contributor's Job Title	
Attorney		Solo Practitioner. Attorn	
	employer/law firm	Law firm of contributor's sp	bouse (if any)
	f Guadalupe Navarro Jr.		
II CONTRIBUTOR IS	s a child, law firm of parent(s) (if any)		
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The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 9/12 Rpt: 12/28
2 FILER NAME		<b>3</b> Filer ID (Ethics Commission Filers)	
Lopez, Glori	a (Ms.)		00081836
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
10/19/2017	Northcutt, Frances M. (Ms.)		\$50.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77027		
	Principal Occupation	9 Contributor's Job Title	
Attorney	and the set from	Solo Practitioner. Attorn	
10 Contributor's e	employer/law firm Northcutt Attorney at Law	<b>11</b> Law firm of contributor's sp	oouse (if any)
	s a child, law firm of parent(s) (if any)		
	s a child, law lifth of parend(s) (if any)		
Data	Full name of contributor Out-of-state PAC (ID#:		Amount of Contribution (ft)
Date 12/02/2017	Full name of contributor out-of-state PAC (ID#: Olguin, Jennifer (Mrs.)	)	Amount of Contribution (\$) \$100.00
12/02/2017			\$100.00
	Contributor address, City, State, Zip Code		
	Spring, TX 77379		
Contributor's I	Principal Occupation	Contributor's Job Title	
Manager		Engineering Program M	lanager
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)
Hewlett Pac	kward Enterprises		
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
12/02/2017	Olguin, Ramon (Mr.)		\$100.00
	Contributor address; City; State; Zip Code		
	Spring, TX 77379		
Contributor's I	Principal Occupation	Contributor's Job Title	•
Accountant		Accounting Manager	
	employer/law firm	Law firm of contributor's sp	bouse (if any)
National Oilv			
If contributor is	s a child, law firm of parent(s) (if any)		
L Forme provided	by Texas Ethics Commission	s state ty us	Version V/1 0 5380

The Instruction Guide explains how to	1 Total pages Schedule A(J)1: Sch: 10/12 Rpt: 13/28					
2 FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)					
Lopez, Gloria (Ms.)		00081836				
4 Date 5 Full name of contributor	5 Full name of contributor out-of-state PAC (ID#:)					
09/29/2017 Ramirez, Andrea (Ms.)		\$250.00				
6 Contributor address; City; State						
Houston, TX 77055						
8 Contributor's Principal Occupation	9 Contributor's Job Title					
Attorney	Associate Attorney					
10 Contributor's employer/law firm	<b>11</b> Law firm of contributor's sp	pouse (if any)				
Callegri Law Firm, PC						
<b>12</b> If contributor is a child, law firm of parent(s) (if any	()					
	out-of-state PAC (ID#:)	Amount of Contribution (\$)				
09/26/2017 Ramirez, Guadalupe (Mrs.)		\$100.00				
Contributor address; City; State	e; Zip Code					
Houston, TX 77070						
Contributor's Principal Occupation	Contributor's Job Title					
Attorney	Assistant District Attorn					
Contributor's employer/law firm Harris County District Attorney's Office	Law firm of contributor's s	pouse (ii any)				
If contributor is a child, law firm of parent(s) (if any	A					
in contributor is a child, law infit of parent(s) (if any	)					
Date Full name of contributor		Amount of Contribution (f)				
Date Full name of contributor 09/26/2017 Ramirez, Karina (Ms.)	out-of-state PAC (ID#:)	Amount of Contribution (\$) \$200.00				
	a: Zia Cada					
Contributor address; City; State	e, zip code					
Houston, TX 77006						
Contributor's Principal Occupation	Contributor's Job Title					
Attorney	Solo Practitioner. Attorn	ney.				
Contributor's employer/law firm	Law firm of contributor's s	-				
Law Office of Karina A. Ramirez						
If contributor is a child, law firm of parent(s) (if any	/)					
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The Instruction Guide explains how to complete this for	n. 1 Total pages Schedule A(J)1: Sch: 11/12 Rpt: 14/28
2 FILER NAME Lopez, Gloria (Ms.)	<b>3</b> Filer ID (Ethics Commission Filers) 00081836
4 Date       5 Full name of contributor       out-of-state PAC (ID#:	\$250.00
Baytown, TX 77520	
8 Contributor's Principal Occupation 9 Attorney	Contributor's Job Title Solo Practitioner. Attorney.
	Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)	
Date       Full name of contributor       out-of-state PAC (ID#:         10/19/2017       Salfiti, Ryan (Mr.)         Contributor address; City; State; Zip Code	\$150.00
Katy, TX 77450 Contributor's Principal Occupation	Contributor's Job Title
Attorney	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       Full name of contributor       out-of-state PAC (ID#:         09/29/2017       Salfiti, Ryan (Mr.)         Contributor address;       City; State; Zip Code	) Amount of Contribution (\$) \$250.00
Katy, TX 77450 Contributor's Principal Occupation	Contributor's Job Title
Attorney	Solo Practitioner. Attorney.
Contributor's employer/law firm	Law firm of contributor's spouse (if any)
Law Office of Ryan Salfiti	
If contributor is a child, law firm of parent(s) (if any)	
Forms provided by Texas Ethics Commission www.ethics.st	ate.tx.us Version V1.0.5389

The Instruc	ction Guide explains how to complete this t	1 Total pages Schedule A(J)1: Sch: 12/12 Rpt: 15/28			
2 FILER NAME		<b>3</b> Filer ID (Ethics Commission Filers)			
Lopez, Gloria	a (Ms.)		00081836		
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)		
12/01/2017	Shah, Rizwan (Mr.)		\$25.00		
	6 Contributor address; City; State; Zip Code				
	Houston, TX 77034				
	Principal Occupation	9 Contributor's Job Title			
Attorney		Solo Practitioner. Attor			
10 Contributor's e		<b>11</b> Law firm of contributor's sp	bouse (if any)		
The Shah La					
12 If contributor is	s a child, law firm of parent(s) (if any)				
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)		
09/28/2017	Wilson, Tasha (Mrs.)		\$100.00		
	Contributor address; City; State; Zip Code				
	Fresno, TX 77545				
	Principal Occupation	Contributor's Job Title			
Attorney		Associate Attorney			
	mployer/law firm	Law firm of contributor's sp	bouse (if any)		
	mith & Associates, P.C.				
If contributor is	s a child, law firm of parent(s) (if any)				
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)		
12/01/2017	Zapata, Wilfredo (Mr.)		\$1,000.00		
	Contributor address; City; State; Zip Code				
	Houston, TX 77058	-			
	Principal Occupation	Contributor's Job Title			
Loan Origina		Broker			
	mployer/law firm	Law firm of contributor's sp	bouse (if any)		
Houston Bro					
If contributor is	s a child, law firm of parent(s) (if any)				
Forms provided	by Texas Ethics Commission www.ethic	cs.state.tx.us	Version V1.0.5389		

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A2: Sch: 1/1 Rpt: 16/28					
2 FILER NAME	3 Filer ID (Ethics Commission Filers)					
Lopez, Gloria (Ms.)	00081836					
⁴ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS	\$					
5 Date       6 Full name of contributor       □ out-of-state PAC (ID#:)         10/19/2017       Law, Nora (Mrs.)         7 Contributor address; City; State; Zip Code	8 Amount of 9 In-kind contribution contribution (\$) description \$2,613.951					
Katy, TX 77450	I Check if travel outside of Texas. Complete Schedule T.					
<b>10</b> Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) <b>11</b> Employer (FOR NON	-JUDICIAL) (See instructions)					
12 Contributor's principal occupation (FOR JUDICIAL)13 Contributor's job title	13 Contributor's job title (FOR JUDICIAL) (See instructions)					
Attorney Solo Practitioner	Contribution (\$) Contributor (FOR NON-JUDICIAL) Contributor (FOR NON-JUDICIAL) Contributor (See instructions) Contributor (See instructing (See instructing (See instructing (See instructi					
14 Contributor's employer/law firm (FOR JUDICIAL)15 Law firm of contributor	15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)					
Law Office of Nora V. Law						
<b>16</b> If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)						

	LOANS (J	UDICIAL)			SCHEDULE E(J)
	The Instruction		ges Schedule E(J): 1 Rpt: 17/28		
2	FILER NAME Lopez, Gloria (N	(Ethics Commission Filers) 336			
4	TOTAL OF UN	IITEMIZED LOANS			\$
5	Date of loan 08/18/2017	9 Loan Amount (\$) \$5,000.00			
6	Is lender a financial institution?	8 Lender address; City; State;	Zip Code		10 Interest Rate 0
	No	Houston, TX 77056			<b>11</b> Maturity Date 01/01/2019
12	Lender's Principal	Occupation	13 Lender's Job Title		
	Attorney		Attorney		
14	Lender's Employe	r/Law Firm	15 Law Firm of lender's spous	e (if any)	
	Law Office of GI	oria E Lopez			
16	if lender is child, la	aw firm of parent(s) (if any)	•		
4-	Description of Coll	lataral	<b>18</b> Check if personal funds we		dista political appoint
1/	Description of Col	ere deposited	(See Instructions)		
X None     Image: Constraint of the second sec					22 Amount Guaranteed (\$)
	INFORMATION				
	X not applicable	21 Guarantor address; City; State;	Zip Code		
		,	_p		
23	Guarantor's Princi	I pal Occupation	24 Guarantor's Job Title		
25	Guarantor's Emplo	oyer/Law Firm	26 Law Firm of guarantor's sp	ouse (if any)	
27	If guarantor is child	d, law firm of parent(s) (if any)			
					_

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

			EXPENDITURE	CATEGO	RIES FOR	BOX 8(a)			
	Advertising Expense     Event Expense     Loan Repayment/Reimbursement       Accounting/Banking     Fees     Office Overhead/Rental Expense       Consulting Expense     Food/Beverage Expense     Polling Expense       Contributions/ Donations Made By -     Gitt/Awards/Memorials Expense     Printing Expense       Candidate/Officeholder/Political Committee     Legal Services     Salaries/Wages/Contract Labor       Credit Card Payment     The Instruction Guide explains how to complete this form.					Travel in District Travel Out of Dis	quipment & Related Expense		
1	Total pages Schedule F1:	<b>2</b> F	FILER NAME				3	Filer ID	(Ethics Commission Filers)
	Sch: 1/10 Rpt: 18/28		₋opez, Gloria (Ms.)					00081836	
4	Date 11/01/2017		Payee name Bank of America						
6	Amount (\$) \$16.00	Ę	Payee address; City; 5171 San Felipe St. Houston, TX 77056	State;	; Zip Coo	e			
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the t	op of this sch	iedule)		η, TX,	ide of Texas. Com , officeholder living <b>:ing Service</b>	expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office souç	ht		Office he	əld
	Date	F	Payee name						
	12/01/2017	E	Bank of America						
	Amount (\$) \$16.00	Ę	Payee address; City; 5171 San Felipe St. Houston, TX 77056	State	; Zip Coo	e			
	PURPOSE OF EXPENDITURE	(a) (	Category (See Categories listed at the t	op of this sch	nedule)		η, TX,	ide of Texas. Com , officeholder living <b>:ing Service</b>	j expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ht		Office he	eld
	Date	F	Payee name				_		
	09/15/2017		Go Daddy						
	Amount (\$) \$43.32	1	Payee address; City; L4455 N. Hayden Rd. Suite 219 Scottsdale, AZ 85260	State	; Zip Coo	e			
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the t	op of this sch	nedule)		η, TX,	ide of Texas. Com , officeholder living site Domain	expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	(	Office sou	ht		Office he	eld

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

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 -     Gitfr/Awards/Memorials Expense     Printing Expense     Travel in District       Candidate/Officeholder/Political Committee     Legal Services     Salaries/Wages/Contract Labor     OTHER (enter a category not listed above)						quipment & Related Expense trict				
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commission Filers)
	Sch: 2/10 Rpt: 19/28	-	Lopez, Gloria (Ms.)						00081836	(
4	Date	5	Payee name							
	10/20/2017		Harris County Democratic Pa	irty						
6	Amount (\$)	7	7 Payee address; City; State; Zip Code							
	\$500.00		1445 North Loop West							
			Suite 110							
			Houston, TX 77008							
_	BUBBAAF					<i>a</i> >				
8	PURPOSE OF	(a)	Category (See Categories listed at the		edule)	(a)	Description	outoi	de of Texas. Com	alata Sabadula T
	EXPENDITURE		Contributions/Donations Mad Candidate/Officeholder/Politic	-	vittoo				officeholder living	
			Candidate/Onicenoiden/Fonitio		nuee		Contribution t		-	•
										F
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	C	Office sou	ght			Office he	eld
	Date		Payee name							
	09/21/2017		Harris County Democratic Pa	rty						
Amount (\$) Payee address; City; State; Zip Code										
\$500.00 1445 North Loop West										
	Suite 110									
		Houston, TX 77008								
	PURPOSE	(a)	Category (See Categories listed at the	top of this sch	edule)	(b)	Description			
	OF EXPENDITURE		Contributions/Donations Mad						de of Texas. Com	
	-		Candidate/Officeholder/Politio	cal Comm	littee				officeholder living	
							Contribution t		Joordinating	Campaign.
	Operation ONITY is aligned								0.0	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Ĺ	Office sou	gnt			Office he	210
		_								
	Date		Payee name							
	11/29/2017		Harris County Democratic Pri	,						
	Amount (\$)		Payee address; City;	State;	; Zip Co	de				
	\$2,500.00		1445 North Loop West							
Suite 110										
	Houston, TX 77008									
	PURPOSE	(a)	Category (See Categories listed at the	top of this sch	edule)	(b)	Description			
	OF EXPENDITURE		Fees		,		Check if travel	outsi	de of Texas. Com	plete Schedule T.
	EXPENDITORE								officeholder living	
							Judicial Cano	lida	te Filing Fee	9.
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office sou	ght			Office he	eld
								_		

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

	Advertising Expense       Event Expense       Loan Repayment/Reimbursement       Solicitation/Fundraising Expense         Accounting/Banking       Fees       Office Overhead/Rental Expense       Transportation Equipment & Related Expense         Constributions/ Donations Made By - Candidate/Officeholder/Political Committee       Gift/Awards/Memorials Expense       Printing Expense       Travel in District         Credit Card Payment       The Instruction Guide explains + ow to complete this form.       The Instruction Guide explains + ow to complete this form.						
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
1							
	Sch: 3/10 Rpt: 20/28	Lopez, Gloria (Ms.) 00081836					
4	Date	5 Payee name					
	09/25/2017	Michaels Store					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
ľ	\$17.03	7630 FM 1960 W.					
	ψ17.05	7050 FW 1900 W.					
		Houston, TX 77070					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF	Supplies Check if travel outside of Texas. Complete Schedule T.					
	EXPENDITURE	Check if Austin, TX, officeholder living expense					
		Supplies for Campaign Kick Off Event. Decorations.					
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
Ŭ	expenditure to benefit C/OI						
	Date	Pavee name					
	12/20/2017	Moreno, Candace (Ms.)					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$600.00	2911 Aspen Park Ln.					
		Houston, TX 77084					
	PURPOSE						
	OF						
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
		Creation of Campaign Website.					
	Complete ONILV if direct						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held					
		·					
	Date	Payee name					
	09/22/2017	Office Depot					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$22.71	3931 Fairway Plaza Drive					
	φζζ./Ι	5951 Failway Flaza Dilve					
		Pasadena, TX 77505					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF	Office Overhead/Rental Expense					
	EXPENDITURE	Check if Austin, TX, officeholder living expense					
		Pens and Clip Boards for Petitions. Campaign Office					
		Supplies.					
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/Oł	0					

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

			E	EXPENDITURE C	ATEGOR	RIES FOR	BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Committee Legal Services Salaries/Wages/Contract			head/Rental Expense bense pense ages/Contract Labor		Travel in District Travel Out of Dis	quipment & Related				
				Instruction Guide	explains l	how to cor	nplete this form.						
1	Total pages Schedule F1:	2	FILER NAME					3	3 Filer ID (Ethics Commission F				
	Sch: 4/10 Rpt: 21/28		Lopez, Gloria (I	Ms.)					00081836				
4	Date	5	Payee name										
	09/29/2017		Paypal										
6	Amount (\$)	7	Payee address;	City;	State;	Zip Co	de						
	\$87.65		2211 North Firs	t Street									
			San Jose, CA 9	5131									
	DUDDOSE					r	<b>(b)</b>						
8	PURPOSE OF			tegories listed at the to	p of this sche	edule)	(b) Description	outsid	de of Texas. Comp	nlata Schadula T			
	EXPENDITURE		Fees						officeholder living				
							Online Contri	ibuti	ion Service I	Fee.			
9	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeho	older name	C	Dffice sou	ght		Office he	ld			
	Date		Payee name										
	09/29/2017		Paypal										
	Amount (\$)		Payee address;	City;	State:	Zip Co	de						
	\$17.65		2211 North Firs	-	,								
	\$11100												
			San Jose, CA 9	5131									
	PURPOSE OF EXPENDITURE		Category _{(See Ca} Fees	tegories listed at the to	p of this sche	edule)	Check if Austin	ı, TX,	de of Texas. Comp officeholder living	expense			
							Online Contri	ibuti	ion Service I	Fee.			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeho	older name	С	Office sou	ght		Office he	eld			
	Date		Payee name										
	09/29/2017		Paypal										
	Amount (\$)		Payee address;	City;	State;	Zip Co	de						
	\$1.90		2211 North Firs	t Street									
			San Jose, CA 9	5131									
	PURPOSE OF			tegories listed at the to	p of this sche	edule)	(b) Description		da	-l			
	EXPENDITURE		Fees						de of Texas. Comp officeholder living				
							Online Contri						
	Complete ONLY if direct	Ľ	andidate/Officeho	lder name	~	Office sou	tht		Office he	JI.			
	expenditure to benefit C/OF			nuel name	Ĺ		JIIL		Onice he	au			

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

				EXPENDITURE	CATEGOR	RIES FOR	BOX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment						Travel in District Travel Out of Dist	uipment & Related Expense			
1	Total pages Schedule F1:	2	2 FILER NAME 3 Filer							(Ethics Commission Filers)	
	Sch: 5/10 Rpt: 22/28		Lopez, Glo	ria (Ms.)					00081836		
4	Date	5	Payee name					-			
	09/29/2017		Paypal								
6	Amount (\$)	7	Payee addre	ess; City;	State;	; Zip Coo	le				
	\$7.15		2211 North	First Street							
		San Jose, CA 95131									
8	PURPOSE	(a)	Category (S	ee Categories listed at the	top of this coh	odulo)	(b) Description				
-	OF		Fees	ee Calegones iisleu al life	top of this sch	edule)		outsi	de of Texas. Comp	lete Schedule T.	
	EXPENDITURE								officeholder living		
							Online Contri	ibut	tion Service F	=ee.	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Off	iceholder name	C	Office souç	ht		Office he	ld	
	Date		Payee name	•							
	09/29/2017		Paypal								
	Amount (\$)		Payee addre	ess; City;	State;	; Zip Coo	le				
	\$8.90		2211 North	First Street							
			San Jose, (	CA 95131							
	PURPOSE OF EXPENDITURE		Category _{(S} Fees	iee Categories listed at the	e top of this sch	edule)			de of Texas. Comp		
									officeholder living		
							Online Contra	ibui			
	Complete ONLY if direct		andidate/Off	iceholder name		Office souc	iht		Office he	ld	
	expenditure to benefit C/OF								01100110		
	Date		Payee name								
	09/29/2017		Payee hame								
	Amount (\$)		Payee addre	es: City:	Stato:	Zin Cor	10				
	4mount (\$) \$3.65		-	ess; City; First Street	State;	; Zip Coo					
	ψ5.05										
			San Jose, (	CA 95131							
	PURPOSE	(a)	Category (S	ee Categories listed at the	e top of this sch	edule)	(b) Description	_			
	OF EXPENDITURE		Fees						de of Texas. Comp		
							Online Contri		officeholder living		
								ibul		66.	
	Complete ONLY if direct	Ľ	Sandidata/Off	iceholder name		Office soug	lht		Office he	Id	
	expenditure to benefit C/OF				Ċ	Surce Soul	µ n.		Onice ne	iu	

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

				EXPENDITURE		RIES FOR	BOX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Food/Beverage Expense Polling Expense Travel in District /- Gift/Awards/Memorials Expense Printing Expense Travel Out of District					quipment & Related Expense			
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commission Filers)
	Sch: 6/10 Rpt: 23/28		Lopez, Glor	ia (Ms.)					00081836	
4	Date	5	Payee name							
	10/06/2017		Paypal							
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	le			
	\$8.90		2211 North	First Street						
			San Jose, C	A 95131						
8	PURPOSE	(a)	Category (Se	e Categories listed at the	top of this sch	edule)	(b) Description			
	OF EXPENDITURE		Fees			,	Check if travel		de of Texas. Com	
									officeholder living	
							Online Contri	bui	ION Service	ree.
9	Complete ONLY if direct		andidate/Offi	ceholder name		Office sou	.bt		Office he	ld
9	expenditure to benefit C/OF		anuiuale/Oni				, inc		Onice he	20
	Date		Payee name							
	10/06/2017		Paypal							
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	le			
	\$8.90		2211 North	First Street						
			San Jose, C	A 95131						
	PURPOSE OF EXPENDITURE		Category _{(Se} Fees	e Categories listed at the	e top of this sch	edule)		, тх,	de of Texas. Com , officeholder living tion Service	expense
	Complete ONLY if direct		`andidate/Offi	ceholder name		Office sou	iht		Office he	ald
	expenditure to benefit C/Oł		and date/official				, ne		Onice ne	
	Date		Payee name							
	10/19/2017		Paypal							
	Amount (\$)		Payee addres	ss; City;	State [.]	Zip Co	1e			
	\$4.05		2211 North		State,					
	φ-1.00									
			San Jose, C	A 95131						
	PURPOSE OF			e Categories listed at the	top of this sch	edule)	(b) Description	_		
	EXPENDITURE		Fees						de of Texas. Com	
							Online Contri			
									2	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Offi	ceholder name	C	Office sou	ht		Office he	eld
	,									

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

				EXPENDITURE	CATEGO	RIES FOR	BOX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Food/Beverage Expense Polling Expense Travel in District Gift/Awards/Memorials Expense Printing Expense Travel Out of District				quipment & Related Expense				
1	Total pages Schedule F1:	2	FILER NAM	E				3	Filer ID	(Ethics Commission Filers)
	Sch: 7/10 Rpt: 24/28		Lopez, Glo	ria (Ms.)					00081836	
4	Date	5	Payee name	9						
	10/19/2017		Paypal							
6	Amount (\$)	7	Payee addre	ess; City;	State;	Zip Co	le			
	\$0.68		2211 North	n First Street						
			San Jose,	CA 95131						
8	PURPOSE	(a)	Category (S	See Categories listed at the	top of this sch	edule)	(b) Description			
	OF EXPENDITURE		Fees	-		ŕ			de of Texas. Com	•
									officeholder living	
							Online Contri	bui	ION Service	ree.
9	Complete ONLY if direct		Candidato/Of	ficeholder name		Office soug	ubt		Office he	bld
9	expenditure to benefit C/OF		Januiuale/OI				, in t		Once he	
	Date		Payee name	9						
	10/19/2017		Paypal							
	Amount (\$)		Payee addre	ess; City;	State;	Zip Co	le			
	\$27.00		2211 North	n First Street						
			San Jose,	CA 95131						
	PURPOSE OF EXPENDITURE	(a)	Category (s Fees	See Categories listed at the	e top of this sch	edule)		, тх	de of Texas. Com , officeholder living tion Service	expense
			Canadialata (Of	finalalar nama			- la 4		Office he	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Januluale/OI	ficeholder name	Ĺ	Office sou	Int		Office he	210
	Data	_								
	Date 10/19/2017		Payee name Paypal	÷						
				City	Ctoto	Zip Co				
	Amount (\$) \$5.40		Payee addre	ess; City; n First Street	State,	Zip Co	Je			
	ψ0.40			Filst Street						
			San Jose,	CA 95131						
	PURPOSE OF	(a)	Category (S	See Categories listed at the	top of this sch	edule)	(b) Description			
	EXPENDITURE		Fees						de of Texas. Com	•
							Online Contri		officeholder living	
							Chine Contin			
	Complete ONLY if direct	L(	Candidate/Of	ficeholder name	C	Office soug	iht		Office he	eld
	expenditure to benefit C/OF								2	

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

			EXPENDITURE	CATEGOR	IES FOR	BOX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Food/Beverage Expense Polling Expense Travel in District Gift/Awards/Memorials Expense Printing Expense Travel Out of District				uipment & Related Expense			
1	Total pages Schedule F1:	2 FILE	RNAME				3	Filer ID	(Ethics Commission Filers)
	Sch: 8/10 Rpt: 25/28	Lop	ez, Gloria (Ms.)					00081836	
4	Date	5 Pay	ee name				1		
	10/19/2017	Pay							
6	Amount (\$)	7 Pay	ee address; City;	State;	Zip Coo	e			
	\$1.03	221	1 North First Street						
		San	Jose, CA 95131						
8	PURPOSE	(a) Cate	gory (See Categories listed at the	e top of this sche	dule)	b) Description			
	OF EXPENDITURE	Fee			,			de of Texas. Comp	
						Online Contr		officeholder living	
						Online Contr	ibui	ION Service F	-ee.
9	Complete ONLY if direct	Cand	date/Officeholder name	0	ffice soug	bt		Office he	Id
5	expenditure to benefit C/OF					in .		Office fiel	
	Date	Pay	ee name						
	10/19/2017	Pay	pal						
	Amount (\$)	Pay	ee address; City;	State;	Zip Coo	е			
	\$35.15	221	1 North First Street						
		San	Jose, CA 95131						
	PURPOSE OF EXPENDITURE	(a) Cate Fee	gOry (See Categories listed at the S	e top of this sche	dule)	Check if Austin	n, TX,	de of Texas. Comp	expense
						Online Contr	ibut	tion Service F	-ee.
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		date/Officeholder name	0	ffice soug	ht		Office he	ld
	Date	Pay	ee name						
	10/19/2017	Pay							
	Amount (\$)	Pay	ee address; City;	State;	Zip Coo	e			
	\$1.03	221	1 North First Street						
		San	Jose, CA 95131		i				
	PURPOSE OF EXPENDITURE	(a) Cate Fee	gOry (See Categories listed at the S	e top of this sche	dule)		n, TX,	de of Texas. Comp , officeholder living tion Service F	expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		date/Officeholder name	O	ffice soug	ht		Office he	ld

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

		EXPENDITURE CATEGORIES FOR BOX 8(a)
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	
-	Sch: 9/10 Rpt: 26/28	Lopez, Gloria (Ms.) 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	<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Food/Beverage Expense</li> <li>(b) Description         <ul> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> <li>Pizza Expense for Campaign Kick Off Event.</li> </ul> </li> </ul>
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	08/24/2017	Saint Arnold Brewery Company
	Amount (\$) \$1,150.16	Payee address; City; State; Zip Code 2000 Lyons Ave. Houston, TX 77020
	PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Event Expense</li> <li>(b) Description</li> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> <li>Fee paid to hold/reserve location at Saint Arnold Brewery Company. Fee for Campaign Kick Off</li> </ul>
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	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.     State; Zip Code
		Houston, TX 77020
	PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Event Expense</li> <li>(b) Description</li> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> <li>Additional Fee for Campaign Kick Off Event held at Saint Arnold Brewery Company.</li> </ul>
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment	al Committee 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       3       Filer ID       (Ethics Commission Filers)         Lopez, Gloria (Ms.)       00081836				
4	Date 09/25/2017	5 Payee name Walmart				
6	Amount (\$) \$15.48	7       Payee address; City; State; Zip Code         22605 State Highway 249       Tomball, TX 77375				
8	PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule) Supplies.</li> <li>(b) Description         <ul> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> <li>Balloons, Table Cloths, and decorations for Campaign Kick Off Event.</li> </ul> </li> </ul>				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held H				
	Date	Payee name				
	09/25/2017	Walmart				
	Amount (\$) \$8.02	Payee address; City; State; Zip Code 22605 State Highway 249 Tomball, TX 77375				
	PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Supplies</li> <li>(b) Description         <ul> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> <li>Additional Table Cloths for Campaign Kick Off Even</li> </ul> </li> </ul>	٦t.			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held				

POLITICAL EX	PENDITURES FROM PERSON	IAL FUNDS SCHEDULE G
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office OV Food/Beverage Expense Polling E: / - Gift/Awards/Memorials Expense Printing E	epayment/Reimbursement     Solicitation/Fundraising Expense       verhead/Rental Expense     Transportation Equipment & Related Expense       Expense     Travel in District       Expense     Travel Out of District       /Wages/Contract Labor     OTHER (enter a category not listed above)
1 Total pages Schedule G: Sch: 1/1 Rpt: 28/28	2 FILER NAME Lopez, Gloria (Ms.)	<b>3</b> Filer ID (Ethics Commission Filers) 00081836
4 Date 07/31/2017	5 Payee name ProV Marketting LLC	
6 Amount (\$) \$458.51 Reimbursement from	7 Payee address;       City;       State; Zip Code         P.O. Box 34213       State;       State; Zip Code	
X political contributions intended	Houston, TX 77234	
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 Check if Austin, TX, officeholder living expense Campaign Logo and Campaign Envelopes.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	L Candidate/Officeholder name	Office sought Office held
Date	Payee name	
08/02/2017	ProV Marketting LLC	
Amount (\$) \$595.38	Payee address; City; State; Zip Co P.O. Box 34213	ode
X Reimbursement from political contributions intended	Houston, TX 77234	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expense Campaign TShirts.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held