CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM JCOR-C/OH

4	Filer ID (Eth		2 Total names filed.				· · · · · · · · · · · · · · · · · · ·	
ľ	Filer ID (Eth 00065750	ics Commission Filers)	2 Total pages filed: 19			OFFICE USE ONLY		
	00003750		19				Date Received	
3	CANDIDATE / OFFICEHOLDER	MS / MRS / MR The Honorable	FIRST Julia A.			MI	ELECTRONICAL 01/15/2019	LY FILED
	NAME	 NICKNAME	LAST			SUFFIX		
			Maldonado			SOLLY		
4	ORIGINAL	X January 15		F	Other (s	nonifu)	Date Hand-delivered or D	ate Postmarked
4	REPORT TYPE			L	Other (s	pecity)		
		July 15	Exceeded \$500 lim				Receipt #	Amount
		30th day before election	15th day after cam appointment (office		r		Date Processed	
		8th day before election	Final Report (Attac	h C/OH-FR)			Date Flocessed	
5	ORIGINAL PERIOD	Month Day Yea	ır	Month	Day	Year	Date Imaged	
	COVERED	07/01/2018	THROUGH	12/3	31/2018		, , , , , , , , , , , , , , , , , , ,	
6	EXPLANATION OF (<u> </u>	
	Corrected the addres	s for an expenditure to Sha	rpstown Democrats. I	added the da	ate of the d	general election	. The report showed	a court number I
		ears ago, so I deleted it.						
7	AFFIDAVIT			ear, or affirm correct.	n, under pe	enalty of perjury	, that this corrected r	eport is true
			Che	ck the box n	ext to any	and all applicat	ole statements:	
			X	was made	in good fa	ith and without	affirm that the origina an intent to mislead ned in the report.	
				report not that the rep	later than t port as orig affirm, that	the 14th busines ginally filed is in any error or or	that I am filing this co ss day after the date accurate or incomple hission in the report a	I learned ete. I
					The Ho	norable Julia	A. Maldonado	
	AFFIX NOTARY ST	AMP / SEAL ABOVE			Signatu	re of Candidate	or Officeholder	
	Sworp to and subsa	ribed before me, by the said	4			thic th	1e	dav
		nbed before me, by the said					IC	day
	01	, 20, 10 cen	ny winci, withess fily	המווע מווע שפ				
	Signature of offic	er administering oath	Printed name of o	fficer adminis	stering oat	h T	Fitle of officer adminis	stering oath
		Remember To Att		The Cam	paign F	inance Repo		-

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 1

		1	Filer ID		2 Total pages file	ed:
The JC/OH Instruction	Guide explains how to complete th		(Ethics Commission Filers) 00065750)	1	
3 CANDIDATE /	MS / MRS / MR FIRS	Т		MI		JSE ONLY
OFFICEHOLDER	The Honorable Julia	A.				
NAME					Date Received	
					ELECTRONICA	LLY FILED
	NICKNAME LAST	-		SUFFIX	01/15/2019	
		onado				
	Iviaiu	Unauu				
4 CANDIDATE /	ADDRESS / PO BOX; APT / SUIT	E#; CITY;		ZIP CODE	Date Hand-delivered or	Date Postmarked
OFFICEHOLDER	4606 San Jacinto					
MAILING ADDRESS					Receipt #	Amount
ADDRESS						
Change of Address	Houston, TX 77004				Date Processed	
					Date Flocesseu	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR FIRST	Г			MI	
TREASURER NAME	Mr. Denn	is M.				
NAME						
	NICKNAME LAST				SUFFIX	
	Slate					
6 CAMPAIGN	STREET ADDRESS (NO PO BOX F	PLEASE):	APT / SUITE	E#; CITY;	STA	TE; ZIP CODE
TREASURER	112 E. Forrest	- ,,		, - ,		,
ADDRESS						
(Residence or Business)						
	Deer Park, TX 77536					
7 CAMPAIGN	AREA CODE PHONE NUN	IBER EXT	ENSION			
TREASURER	(281) 476-9447					
PHONE	()					
8 REPORT						
TYPE	X January 15 30tl	n day before ele	ection Runoff	Г	15th day after can	nnaign treasurer
		rudy sciole cit		L	appointment (offic	
	July 15 8th	day before elec	tion Exceeded	d \$500 limit	Final Report (Atta	ch C/OH-FR)
		-		L	_	
	Month Day Year			onth Dov	Voor	
9 PERIOD COVERED	Month Day Year	TUD		onth Day	Year	
	07/01/2018	INK	DUGH	12/31/201	8	
10 ELECTION	ELECTION DATE		ELEC	TION TYPE		
	Month Day Year	Prim	ary 🗌 Ru	unoff	Other	
	11/08/2016					
		X Gene	eral Sp	pecial		
11 OFFICE	OFFICE HELD (if any)	-	12 OF	FICE SOUGHT	(if known)	
	District Judge District 507 Harris					
		GOTO	PAGE 2			
Forms provided by Te	xas Ethics Commission	www.ethic	s.state.tx.us		Vers	ion V1.1.28ab6150

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2 3 of 19

I

13 C / OH NAME	Maldonado, Julia A. (The Honorable)		14 Filer ID 00065750	(Ethics Commissi	on Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	These expenditures m	ccepted or political expenditu ay have been made without i uired to report this information	the candidate's or o	fficeholder's knowled	lge or
Additional Pages	Additional Pages COMMITTEE TYPE COMMITTEE NAME					
COMMITTEE ADDRESS						
	SPECIFIC					
		COMMITTEE CAMP	AIGN TREASURER NAME			
		COMMITTEE CAMP/	AIGN TREASURER ADDRES	55		
16 CONTIBUTION 1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED						0.00
		ICAL CONTRIBUTI PLEDGES, LOANS, C	ONS IR GUARANTEES OF LOAN	S)	\$	0.00
EXPENDITURE 3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED TOTALS						0.00
	4. TOTAL POLIT	ICAL EXPENDITUR	RES		\$	3,934.54
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE		MAINTAINED AS OF THE L	AST DAY OF THE	\$ 2	20,099.28
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR		OUTSTANDING LOANS AS	OF THE LAST DAY	⁽ \$	0.00
17 AFFADAVIT		tru	wear, or affirm, under penalty le and correct and includes a der Title 15, Election Code.			
		_		able Julia A. Mald		
			Signature of	Candidate or Office	enolaer	
	TARY STAMP / SEAL AB					
	cribed before me, by the s, 20, to ce		v hand and seal of office.	, this the	da	Ŋ
	, =>, to u	,				
Signature of offi	cer administering oath	Printed name of	officer administering oath	Title of of	ficer administering oa	ath
Forms provided by Te	exas Ethics Commission	www.et	hics.state.tx.us		Version V1.1.	28ab6150

FORM JC/OH СО G 3 4 of 19

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VER	SHE	ET PO

18 FILER NAME	19 Filer ID	(Ethics Commission Filers)			
Maldonado, Julia A. (The Honorable)	00065750				
20 SCHEDULE SUBTOTALS					
NAME OF SCHEDULE		SUBTOTAL AMOUNT			
1. SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$			
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$				
3. SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	3. SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)				
4. SCHEDULE E(J): LOANS (JUDICIAL)		\$			
5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	NS	\$ 3,622.58			
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$			
7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUT	TIONS	\$			
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD				
9. X SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$ 311.96			
10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	S OF C/OH	\$			
11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUT	IONS	\$			
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	S RETURNED	\$			

SUBTOTALS - JC/OH

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)					
-	Sch: 1/8 Rpt: 5/19	Maldonado, Julia A. (The Honorable)	00065750					
4	Date 07/16/2018	5 Payee name BBVA Compass						
6	6 Amount (\$) 7 Payee address; City; State; Zip Code \$3.00 7047 Harrisburg Blvd Houston, TX 77011							
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Service fee Service fee								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	08/15/2018	BBVA Compass						
	Amount (\$) \$3.00	Payee address; City; State; Zip Code 7047 Harrisburg Blvd Houston, TX 77011						
	PURPOSE OF EXPENDITURE		l outside of Texas. Complete Schedule T. n, TX, officeholder living expense					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	09/17/2018	BBVA Compass						
	Amount (\$) \$3.00	Payee address; City; State; Zip Code 7047 Harrisburg Blvd						
		Houston, TX 77011						
	PURPOSE OF EXPENDITURE		l outside of Texas. Complete Schedule T. n, TX, officeholder living expense					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)					
_	Sch: 2/8 Rpt: 6/19	Maldonado, Julia A. (The Honorable)	00065750					
4	Date 10/15/2018	5 Payee name BBVA Compass						
6	6 Amount (\$) 7 Payee address; City; State; Zip Code \$3.00 7047 Harrisburg Blvd Houston, TX 77011							
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Service fee Service fee								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	11/15/2018	BBVA Compass						
	Amount (\$) \$3.00	Payee address; City; State; Zip Code 7047 Harrisburg Blvd Houston, TX 77011						
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	12/17/2018	BBVA Compass						
	Amount (\$) \$3.00	Payee address; City; State; Zip Code 7047 Harrisburg Blvd						
		Houston, TX 77011						
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. I, TX, officeholder living expense					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services 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)						
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)						
	Sch: 3/8 Rpt: 7/19	Maldonado, Julia A. (The Honorable) 00065750							
4	Date 11/16/2018	Payee name Benihana Houston I							
6	Amount (\$) 7 Payee address; City; State; Zip Code \$130.00 1318 Louisiana St Houston, TX 77002								
8	B PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Check if Austin, TX, officeholder living expense Thanksgiving dinner for court staff								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	12/11/2018	Blackburn Photography							
	Amount (\$) \$275.00	Payee address; City; State; Zip Code 1260 Blalock Rd # 110							
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense staff photo in courtroom						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	12/14/2018	El Tiempo							
	Amount (\$) \$621.64	Payee address;City;State; Zip Code2814 Navigation Blvd,							
		Houston, TX 77003							
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense r w/staff						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						

		EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	3 Filer ID (Ethics Commission Filers)						
	Sch: 4/8 Rpt: 8/19							
4	Date 08/21/2018	5 Payee name Fannin Flowers						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$70.36	4803 Fannin Houston, TX 77004						
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Flowers for Judge Moore's father's funeral							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	07/25/2018	Frank's Pizza						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$56.50	314 Prairie Houston, TX 77002						
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense f during office meeting					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	12/21/2018	Frank's Pizza						
	Amount (\$) \$33.50	Payee address; City; State; Zip Code 314 Prairie						
		Houston, TX 77002						
	PURPOSE OF EXPENDITURE	Check if Austin,	utside of Texas. Complete Schedule T. TX, officeholder living expense 'S retirement luncheon					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					

			EX	PENDITURE CA	TEGORI	ES FOR	BOX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Aw mittee Legal S	everage Expense ards/Memorials Expens	ie F	Office Over Polling Exp Printing Exp Salaries/Wa	oense ages/Contract Labor		Transportation E Travel in District Travel Out of Dis	
1	Total pages Schedule F1:	2	ILER NAME					3	Filer ID	(Ethics Commission Filers)
	Sch: 5/8 Rpt: 9/19		Maldonado, Julia	A. (The Honora	able)				00065750	
4	Date 12/28/2018		Payee name Frank's Pizza							
6	Amount (\$) \$58.00	:	Payee address; 314 Prairie Houston, TX 770	City; 02	State;	Zip Coo	le			
 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Newly elected family judges lunch during training 						g expense				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officehold	ler name	Off	fice soug	ht		Office he	eld
	Date	ŀ	Payee name							
	10/02/2018		Harris County De	mocratic Party						
	Amount (\$) \$500.00		Payee address; 1445 N. Loop W. Suite 110 Houston, TX 770	City; 08	State;	Zip Coo	le			
	PURPOSE OF EXPENDITURE	(Category _{(See Categ} Contributions/Do Candidate/Office	nations Made B	у			ı, TX,	officeholder living	
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officehold	ler name	Off	fice soug	ht		Office he	eld
	Date	1	Payee name							
	10/27/2018		Hobby Lobby							
	Amount (\$) \$249.04	1	Payee address; 3715 West Loop	City; South	State;	Zip Coo	le			
			Houston, TX 770	96						
	PURPOSE OF EXPENDITURE		Category _{(See Categ} Office Overhead/			lule)		n, TX,	officeholder living	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officehold	ler name	Off	fice soug	ht		Office he	eld

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
Contributions/ Donations Made By - Gift/Awards/Memo Candidate/Officholder/Political Committee Legal Services Credit Card Payment			es od/Beverage Exper ft/Awards/Memorial	s Expense	Office Over Polling Exp Printing Ex Salaries/W	rhead pense pens ages	e /Contract Labor		Travel in District Travel Out of Dis	quipment & Relate		
1	Total pages Schedule E1:	12				1000 00 000			5		(Ethics Comm	iccion Eilors)
1	L Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 6/8 Rpt: 10/19 Maldonado, Julia A. (The Honorable) 00065							00065750	(Ethics Conni	ission Fliers)		
4	Date	5	Payee name									
	12/02/2018		Home Depot									
6	Amount (\$) \$32.43		Payee address 999 West Nor Houston, TX	th Loop	State;	; Zip Coo	de					
8	PURPOSE	(a)	Category (See	Categories listed at	the top of this sch	edule)	(b)	Description				
 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Holiday Decorations for courtroom 												
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Office	holder name	С	Office sou	ght			Office he	eld	
	Date		Payee name									
	11/08/2018		Houston Bar	Assoc.iation								
	Amount (\$)		Payee address	City;	State;	; Zip Co	de					
	\$156.00		1111 Bagby S	St								
			FLB 200									
			Houston, TX	77002								
	PURPOSE OF EXPENDITURE	(a)	Category _{(See} Event Expens		the top of this sch	iedule)	(b)		, TX,	officeholder living	plete Schedule T. I expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Office	holder name	C	Office sou	ght			Office he	eld	
	Date		Payee name									
	08/28/2018		Houston GLB	T Political Ca	ucus							
	Amount (\$) \$40.00		Payee address Post Office B		State;	; Zip Coo	de					
	\$40.00		Post Onice B	JX 00004								
			Houston, TX	77266		i						
	PURPOSE OF		Category (See			nedule)	(b)	Description	outoir	do of Toyac Cam	nloto Schodulo T	
	EXPENDITURE		Contributions Candidate/Of			hittee				de of Texas. Com officeholder living	plete Schedule T. I expense	
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Office	holder name	С	Office sou	ght			Office he	eld	

	EXPENDITURE CATEGORIES 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 - Candidate/Officeholder/Political Committee Git/Awards/Memorials Expense Printing Expense Credit Card Payment The Instruction Guide explains how to complete this form.					Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)		
	Sch: 7/8 Rpt: 11/19	Maldonado, Julia A. (The Honorable) 00065750							
4	Date	5 Payee name							
	09/14/2018		Pappas Delivery						
6	Amount (\$)	7	Payee address; City; State	; Zip Co	de				
	\$366.17		6378 Richmond Ave.						
			Houston, TX 77057						
8	PURPOSE	<u> </u>			(b) Description				
ľ	OF		Category (See Categories listed at the top of this sch Food/Beverage Expense	nedule)		outs	ide of Texas. Complete Schedule T.		
	EXPENDITURE		roou/beverage Expense				, officeholder living expense		
					Lunch for mo	nth	nly judges meeting		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ght		Office held		
	Date		Payee name						
	08/28/2018		Sharpstown Democrats						
	Amount (\$)	<u> </u>	-	; Zip Co	ho				
	\$250.00		PO Box 2053	, ziμ co	ue				
	φ250.00		FO B0X 2033						
			Houston, TX 77042						
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	nedule)	(b) Description				
	EXPENDITURE		Contributions/Donations Made By				ide of Texas. Complete Schedule T.		
			Candidate/Officeholder/Political Comn	nittee	Contribution		, officeholder living expense		
					Contribution	101			
	Complete ONLV if direct		andidate/Officeholder name	Office sou	abt.		Office held		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF			Office sou	Ju		Office field		
-	Date		Payee name						
	11/16/2018		Shipley's Donut Shop #1						
				7					
	Amount (\$)			; Zip Co	de				
	\$8.39		3932 N. Main St.						
			Houston, TX 77009						
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	nedule)	(b) Description	_			
	OF EXPENDITURE		Food/Beverage Expense				ide of Texas. Complete Schedule T.		
							, officeholder living expense		
					Friday morni attorneys	ıg	weekly coffee in jury room for		
					-				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ght		Office held		
	supervisitore to serient C/OI	•							

	EXPENDITURE CATEGORIES 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 By - Gift/Awards/Memorials Expense Printing Expense Travel Out of District	ng Expense ment & Related Expense gory not listed above)	
1	Total pages Schedule F1:	.: 2 FILER NAME 3 Filer ID (E	thics Commission Filers)	
	Sch: 8/8 Rpt: 12/19	Maldonado, Julia A. (The Honorable) 00065750		
4	Date 11/30/2018	5 Payee name Shipley's Donut Shop #1		
6	Amount (\$) \$7.34	7 Payee address; City; State; Zip Code 4 3932 N. Main St. Houston, TX 77009		
8	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Check if Austin, TX, officeholder living expense Weekly coffee meeting in jury rest 	ense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held OH		
	Date	Payee name		
	09/17/2018	Texas Cap & Embroidery		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$40.21	PO Box 3460 Conroe, TX 77305		
	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Check if Austin, TX, officeholder living expension Court shirt for staff reporter 		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held OH		
	Date	Payee name		
	11/07/2018	Truluck's Seafood		
	Amount (\$) \$710.00	Payee address;City;State;Zip Code05350 Westheimer Rd.		
		Houston, TX 77056		
	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Check if Austin, TX, officeholder living exp Dinner for newly elected family 	ense	
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held OH		

	POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Overhee Food/Beverage Expense Polling Expens - Gift/Awards/Memorials Expense Printing Expen	ent/Reinbursement Solicitation/Fundraising Expense d/Rental Expense Transportation Equipment & Related Expense e Travel in District se Travel Out of District s/Contract Labor OTHER (enter a category not listed above)	
1	Total pages Schedule G: Sch: 1/7 Rpt: 13/19	2 FILER NAME Maldonado, Julia A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00065750	
4	Date 11/13/2018	5 Payee name Frank's Pizza		
6	Amount (\$) \$50.00 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 314 Prairie Houston, TX 77002		
8	PURPOSE OF EXPENDITURE	Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense nch for meeting with elected judges	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	
	Date 07/28/2018	Payee name Harris County Democratic Party		
	Amount (\$) \$10.00 X Reimbursement from political contributions intended	Payee address; City; State; Zip Code 4619 Lyons Ave. Houston, TX 77020		
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description Check if travel outside of Texas. Complete Schedule T.	
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Office held Office held			
	Date 08/28/2018	Payee name Harris County Democratic Party		
	Amount (\$) \$10.00	Payee address; City; State; Zip Code 4619 Lyons Ave.		
	X Reimbursement from political contributions intended	Houston, TX 77020		
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Mc	Description Check if travel outside of Texas. Complete Schedule T.	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	

Р	POLITICAL EX	PENDITURES FROM PERSON	AL FUNDS SCHEDULE G	
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Over Food/Beverage Expense Polling Ex Gift/Awards/Memorials Expense Printing E	ayment/Reimbursement Solicitation/Fundraising Expense erhead/Rental Expense Transportation Equipment & Related Expense spense Travel in District xpes/Contract Labor OTHER (enter a category not listed above)	
	otal pages Schedule G: ch: 2/7 Rpt: 14/19	2 FILER NAME Maldonado, Julia A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00065750	
4 Da	ate 9/28/2018	5 Payee name Harris County Democratic Party		
6 Ar	mount (\$) \$10.00	7 Payee address; City; State; Zip Code 4619 Lyons Ave. Houston, TX 77020		
8 E	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Monthly sustaining membership	
ex	omplete <u>ONLY</u> if direct openditure to benefit /OH	Candidate/Officeholder name	Office sought Office held	
	ate D/28/2018	Payee name Harris County Democratic Party		
Ar	mount (\$) \$10.00	Payee address; City; State; Zip Code 4619 Lyons Ave. Houston, TX 77020		
E	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Monthly sustaining membership	
ex	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Office sought Office held			
	ate 1/28/2018	Payee name Harris County Democratic Party		
Ar	mount (\$) \$10.00	Payee address; City; State; Zip Code \$10.00 4619 Lyons Ave.		
X	Reimbursement from political contributions intended	Houston, TX 77020		
E	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description Check if travel outside of Texas. Complete Schedule T.	
ex	omplete <u>ONLY</u> if direct kpenditure to benefit /OH	Candidate/Officeholder name	Office sought Office held	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office O Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing E	bayment/Reimbursement Solicitation/Fundraising Expense erhead/Rental Expense Transportation Equipment & Related Expense cpense Travel in District xpense Travel Out of District Vages/Contract Labor OTHER (enter a category not listed above)	
1 Total pages Schedule G: Sch: 3/7 Rpt: 15/19	2 FILER NAME Maldonado, Julia A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00065750	
4 Date 12/28/2018	5 Payee name Harris County Democratic Party		
6 Amount (\$) \$10.00 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 4619 Lyons Ave. Houston, TX 77020		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description Check if travel outside of Texas. Complete Schedule T.	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	
Date 08/18/2018	Payee name Hobby Lobby		
Amount (\$) \$41.55 X Reimbursement from political contributions intended	Payee address; City; State; Zip Code 8715 West Loop South Houston, TX 77096		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Frames for judges' group photos	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	
Date 12/18/2018	Payee name McDonald's		
Amount (\$) \$30.97	Payee address; City; State; Zip Code 3611 Main		
X Reimbursement from political contributions intended	Houston, TX 77002		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense breakfast for court staff	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made E Candidate/Officeholder/Politic Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E by - Gift/Awards/Memorials Expense Printing I	epayment/Reimbursement Solicitation/Fundraising Expense tverhead/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: 4/7 Rpt: 16/19	2 FILER NAME Maldonado, Julia A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00065750		
4 Date 11/16/2018	5 Payee name Regency Garage			
6 Amount (\$) \$20.00 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 611 Play St Houston, TX 77002			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) parking	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense parking during staff luncheon		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		
Date 07/06/2018	Payee name Shipley's Donut Shop #1			
Amount (\$) \$7.54 X Reimbursement from political contributions intended	Payee address; City; State; Zip Code 3932 N. Main St. Houston, TX 77009			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Weekly coffee in jury room with attys		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	expenditure to benefit			
Date 08/03/2018	Payee name Shipley's Donut Shop #1			
Amount (\$) \$7.89	Payee address; City; State; Zip Code 3932 N. Main St.			
Reimbursement from political contributions intended	Houston, TX 77009			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Weekly coffee in jury room with attys		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	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 O Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing	payment/Reimbursement Solicitation/Fundraising Expense verhead/Rental Expense Transportation Equipment & Related Expense xpense Travel in District Expense Travel Out of District Wages/Contract Labor OTHER (enter a category not listed above)		
1 Total pages Schedule G: Sch: 5/7 Rpt: 17/19	2 FILER NAME Maldonado, Julia A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00065750		
4 Date 08/24/2018	5 Payee name Shipley's Donut Shop #1			
6 Amount (\$) \$10.79 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 3932 N. Main St. Houston, TX 77009			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Weekly coffee in jury room with attys		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		
Date 08/31/2018	Payee name Shipley's Donut Shop #1			
Amount (\$) \$7.04 X Reimbursement from political contributions intended	Payee address; City; State; Zip Code 3932 N. Main St. Houston, TX 77009			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Weekly coffee in jury room with attys		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	expenditure to benefit			
Date 09/28/2018 Amount (\$)	Payee name Shipley's Donut Shop #1 Payee address; City; State; Zip Code			
\$9.19 Reimbursement from political contributions intended				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Weekly coffee in jury room with attys		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	L Candidate/Officeholder name	Office sought Office held		

POLITICAL EXPENDITURES FROM PERSONAL 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 y - Gift/Awards/Memorials Expense Printing I	bayment/Reimbursement erhead/Rental Expense kpense Travel in District Expense Travel Out of District Wages/Contract Labor	ient & Related Expense
1 Total pages Schedule G: Sch: 6/7 Rpt: 18/19	2 FILER NAME Maldonado, Julia A. (The Honorable)	3 Filer ID (Ethics 00065750	S Commission Filers)
4 Date 10/12/2018	5 Payee name Shipley's Donut Shop #1		
6 Amount (\$) \$9.23 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 3932 N. Main St. Houston, TX 77009		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Check if travel outside of Check if Austin, TX, office Weekly coffee in jury room with atty	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office	held
Date 11/02/2018	Payee name Shipley's Donut Shop #1		
Amount (\$) \$8.94	Payee address; City; State; Zip Code 3932 N. Main St. Houston, TX 77009		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Check if Austin, TX, office Weekly coffee in jury room with atty	
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Office sought Office held		held	
Date 11/09/2018	Payee name Shipley's Donut Shop #1		
Amount (\$) \$7.44	Payee address; City; State; Zip Code 3932 N. Main St.		
X Reimbursement from political contributions intended	Houston, TX 77009		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Check if Austin, TX, office Weekly coffee in jury room with atty	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office	held

POLITICAL EX	(PENDITURES FROM PERSON	NAL FUNDS SCHEDULE G
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing F	epayment/Reimbursement Solicitation/Fundraising Expense tverhead/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: 7/7 Rpt: 19/19	2 FILER NAME Maldonado, Julia A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00065750
4 Date 12/14/2018	5 Payee name Shipley's Donut Shop #1	
6 Amount (\$) \$6.49 Reimbursement from	7 Payee address; City; State; Zip Code 3932 N. Main St.	
X political contributions intended	Houston, TX 77009	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Check if travel outside of Texas. Complete Schedule T Check if Austin, TX, officeholder living expense Weekly coffee in jury room with attys
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/29/2018	Payee name Spec's	
Amount (\$) \$34.89	Payee address; City; State; Zip C 2410 Smith	Code
X Reimbursement from political contributions intended	Houston, TX 77006	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	Description Check if travel outside of Texas. Complete Schedule T Check if Austin, TX, officeholder living expense Gift to staff member for birth of baby
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held