

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) 00065750	2 Total pages filed: 69		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR The Honorable	FIRST Julia A.	MI	OFFICE USE ONLY	
	NICKNAME	LAST Maldonado	SUFFIX		Date Received ELECTRONICALLY FILED 07/15/2019
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input checked="" type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; P. O. Box 2804 Houston, TX 77252		ZIP CODE	Date Hand-delivered or Date Postmarked	
				Receipt #	
				Amount	
				Date Processed	
				Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Dennis M.	MI		
	NICKNAME	LAST Slate	SUFFIX		
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 112 E. Forrest Deer Park, TX 77536				
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		
	(281)	476-9447			
8 REPORT TYPE	<input 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 checked="" 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	THROUGH	
	01	01	2019	06/30/2019	
10 ELECTION	ELECTION DATE		ELECTION TYPE		
	Month	Day	Year	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> Runoff
	03	03	2020	<input type="checkbox"/> General	<input type="checkbox"/> Other
11 OFFICE	OFFICE HELD (if any)			OFFICE SOUGHT (if known)	
	Family District Court Judge District 507th Harris			Family District Court Judge District 507th	

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JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH
COVER SHEET PG 2

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13 C / OH NAME Maldonado, Julia A. (The Honorable) **14** Filer ID (Ethics Commission Filers)
00065750

15 NOTICE FROM POLITICAL COMMITTEE(S)
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.

Additional Pages

COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME
	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)	\$ 104,081.07
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 6,017.14
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 111,746.70
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

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.

The Honorable Julia A. Maldonado

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**FORM JC/OH
COVER SHEET PG 3**

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18 FILER NAME Maldonado, Julia A. (The Honorable)		19 Filer ID 00065750	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$	99,531.07
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	4,550.00
3.	<input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$	
4.	<input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$	
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	5,389.24
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	\$	627.90
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: 1/34 Rpt: 4/69
2 FILER NAME Maldonado, Julia A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065750
4 Date 05/15/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adjei, Denise (Ms.)	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Houston, TX 77229		
8 Contributor's Principal Occupation Retired		9 Contributor's Job Title Retired
10 Contributor's employer/law firm Retired		11 Law firm of contributor's spouse (if any) None
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/15/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aguirre, Juan (Mr.)	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Houston, TX 77008		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney At Law
Contributor's employer/law firm Law Office of Juan J. Aguirre		Law firm of contributor's spouse (if any) None
If contributor is a child, law firm of parent(s) (if any)		
Date 05/21/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allshouse, Jack D. (Mr.)	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Houston, TX 77056		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney At Law
Contributor's employer/law firm J. D. Bucky Allshouse, P.C.		Law firm of contributor's spouse (if any) None
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: 2/34 Rpt: 5/69
2 FILER NAME Maldonado, Julia A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065750
4 Date 05/16/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Basu Law Firm	7 Amount of Contribution (\$) \$300.00
	6 Contributor address; City; State; Zip Code Houston, TX 77055	
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/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 05/15/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Billings, Patricia. (Mrs.)	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Humble, TX 77338	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney At Law
Contributor's employer/law firm Law Office of Patricia Garcia Billings		Law firm of contributor's spouse (if any) None
If contributor is a child, law firm of parent(s) (if any)		
Date 06/05/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bobby K. Newman, P.C.	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Houston, TX 77098	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		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: 3/34 Rpt: 6/69
2 FILER NAME Maldonado, Julia A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065750
4 Date 05/15/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bohorquez, Libia E. (Ms.)	7 Amount of Contribution (\$) \$150.00
	6 Contributor address; City; State; Zip Code Houston, TX 77057	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney At Law
10 Contributor's employer/law firm Bohorquez, Hoefker, PLLC		11 Law firm of contributor's spouse (if any) None
12 If contributor is a child, law firm of parent(s) (if any)		
Date 06/30/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boudreaux Jr., Roger (Mr.)	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Houston, TX 77098	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney At Law
Contributor's employer/law firm Roger Boudreaux Jr., Attorney At Law		Law firm of contributor's spouse (if any) None
If contributor is a child, law firm of parent(s) (if any)		
Date 05/15/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burgower Law LLP	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Houston, TX 77098-1875	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		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: 4/34 Rpt: 7/69
2 FILER NAME Maldonado, Julia A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065750
4 Date 05/15/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) C.Y. Lee Legal Group, PLLC	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Houston, TX 77002	
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/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 06/21/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cantu, Rodolfo F. (Mr.)	Amount of Contribution (\$) \$2,000.00
	Contributor address; City; State; Zip Code Houston, TX 77023	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney At Law
Contributor's employer/law firm Law Office Of Rodolfo F. Cantu		Law firm of contributor's spouse (if any) None
If contributor is a child, law firm of parent(s) (if any)		
Date 05/15/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cerf, Lawrence (Mr.)	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Houston, TX 77008	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney At Law
Contributor's employer/law firm Lawrence F. Cerf, Attorney At Law		Law firm of contributor's spouse (if any) None
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: 5/34 Rpt: 8/69
2 FILER NAME Maldonado, Julia A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065750
4 Date 05/17/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chavana, Hector (Mr.)	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code Houston, TX 77093		
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney At Law
10 Contributor's employer/law firm Hector Antonio Chavana, Attorney At Law		11 Law firm of contributor's spouse (if any) None
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/15/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark-Jones, Sherika (Ms.)	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Fresno, TX 77545		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney At Law
Contributor's employer/law firm The Clark-Jones Law Firm		Law firm of contributor's spouse (if any) None
If contributor is a child, law firm of parent(s) (if any)		
Date 05/15/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clevenger, George (Mr.)	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Houston, TX 77069		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney At Law
Contributor's employer/law firm Law Office Of George Clevenger		Law firm of contributor's spouse (if any) None
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: 6/34 Rpt: 9/69
2 FILER NAME Maldonado, Julia A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065750
4 Date 05/22/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coenegrachts, Natalie (Ms.)	7 Amount of Contribution (\$) \$5,000.00
	6 Contributor address; City; State; Zip Code Houston, TX 77091	
8 Contributor's Principal Occupation Management		9 Contributor's Job Title Office Manager
10 Contributor's employer/law firm Torres Law		11 Law firm of contributor's spouse (if any) None
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/15/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cortes, Eddie	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Houston, TX 77001	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney At Law
Contributor's employer/law firm Eddie Cortes, Attorney At Law		Law firm of contributor's spouse (if any) None
If contributor is a child, law firm of parent(s) (if any)		
Date 05/20/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curtis, Rosalind (Mrs.)	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Pasadena, TX 77504	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney At Law
Contributor's employer/law firm Law Office Of Rosalind Curtis		Law firm of contributor's spouse (if any) None
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: 7/34 Rpt: 10/69
2 FILER NAME Maldonado, Julia A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065750
4 Date 06/30/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cusic, Dessiray <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77060	7 Amount of Contribution (\$) \$500.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney At Law
10 Contributor's employer/law firm The Cusic Law Firm		11 Law firm of contributor's spouse (if any) None
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/15/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diggs, Cynthia Thomson (Ms.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77007	Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney At Law
Contributor's employer/law firm Holmes, Diggs, & Stadler		Law firm of contributor's spouse (if any) None
If contributor is a child, law firm of parent(s) (if any)		
Date 05/15/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fullenwider Wilhite <hr/> Contributor address; City; State; Zip Code Houston, TX 77027	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		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: 8/34 Rpt: 11/69
2 FILER NAME Maldonado, Julia A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065750
4 Date 05/15/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Victoria (Ms.)	7 Amount of Contribution (\$) \$300.00
	6 Contributor address; City; State; Zip Code South Houston, TX 77587	
8 Contributor's Principal Occupation Investor		9 Contributor's Job Title Real Estate Investor
10 Contributor's employer/law firm Victoria's Properties		11 Law firm of contributor's spouse (if any) None
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/15/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Good, Tracey (Mr.)	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Houston, TX 77002	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney At Law
Contributor's employer/law firm The Good Law Firm, P.C.		Law firm of contributor's spouse (if any) None
If contributor is a child, law firm of parent(s) (if any)		
Date 05/15/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gray Reed & McGraw LLP	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Houston, TX 77056	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		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: 9/34 Rpt: 12/69
2 FILER NAME Maldonado, Julia A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065750
4 Date 05/15/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gray, Daniel 6 Contributor address; City; State; Zip Code Bellaire, TX 77401-5316	7 Amount of Contribution (\$) \$300.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney At Law
10 Contributor's employer/law firm Law Office of Daniel Gray		11 Law firm of contributor's spouse (if any) None
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/15/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gregory Law PLLC Contributor address; City; State; Zip Code Houston, TX 77008-1757	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/15/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grubb, John K. (Mr.) Contributor address; City; State; Zip Code Houston, TX 77027	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney At Law
Contributor's employer/law firm John K. Grubb & Associates		Law firm of contributor's spouse (if any) None
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: 10/34 Rpt: 13/69
2 FILER NAME Maldonado, Julia A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065750
4 Date 05/15/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haines, Susan (Ms.)	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Houston, TX 77056		
8 Contributor's Principal Occupation Design/Sales		9 Contributor's Job Title Project Management
10 Contributor's employer/law firm Signature Desing		11 Law firm of contributor's spouse (if any) None
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/15/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hale, Catherine Herrington (Mrs.)	Amount of Contribution (\$) \$1,500.00
Contributor address; City; State; Zip Code Houston, TX 77043		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney At Law
Contributor's employer/law firm The Herrington Law Firm, P.C.		Law firm of contributor's spouse (if any) The Hale Firm, P.C.
If contributor is a child, law firm of parent(s) (if any)		
Date 05/15/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hale, Frank A. (Mr.)	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Pasadena, TX 77504		
Contributor's Principal Occupation Attoreny		Contributor's Job Title Attorney At Law
Contributor's employer/law firm Frank A. Hale & Associates, LLC		Law firm of contributor's spouse (if any) None
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: 11/34 Rpt: 14/69
2 FILER NAME Maldonado, Julia A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065750
4 Date 05/15/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hale Jr., Hal (Mr.)	7 Amount of Contribution (\$) \$1,500.00
6 Contributor address; City; State; Zip Code Houston, TX 77056		
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney At Law
10 Contributor's employer/law firm The Hale Firm, P.C.		11 Law firm of contributor's spouse (if any) The Herrington Law Firm, P.C.
12 If contributor is a child, law firm of parent(s) (if any)		
Date 06/30/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrison, Al	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Houston, TX 77002		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney At Law
Contributor's employer/law firm Harrison Law Office, P.C.		Law firm of contributor's spouse (if any) Harrison Law Office, P.C.
If contributor is a child, law firm of parent(s) (if any)		
Date 05/16/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrison, Ronnie (Ms.)	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Houston, TX 77091-1311		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney At Law
Contributor's employer/law firm Harrison Law Office, P.C.		Law firm of contributor's spouse (if any) Harrison Law Office, P.C.
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: 12/34 Rpt: 15/69
2 FILER NAME Maldonado, Julia A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065750
4 Date 06/07/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hatamaleh, Fayeze (Mr.)	7 Amount of Contribution (\$) \$200.00
	6 Contributor address; City; State; Zip Code Friendwood, TX 77546-4665	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney At Law
10 Contributor's employer/law firm Fayeze Law Group, PLLC		11 Law firm of contributor's spouse (if any) None
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/15/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henry, James C. (Mr.)	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Houston, TX 77024-1511	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney At Law
Contributor's employer/law firm James C. Henry, Attorney		Law firm of contributor's spouse (if any) Shelly A. Merchant, Attorney At Law
If contributor is a child, law firm of parent(s) (if any)		
Date 05/15/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacqueline Smith, P.C.	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Houston, TX 77007	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		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: 13/34 Rpt: 16/69
2 FILER NAME Maldonado, Julia A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065750
4 Date 05/15/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James G. Rodriguez, P.C.	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code Houston, TX 77018-5412		
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/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 05/14/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jenkins & Kamin	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Houston, TX 77046		
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/23/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John E. Van Ness, PC	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code Houston, TX 77098		
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		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: 14/34 Rpt: 17/69
2 FILER NAME Maldonado, Julia A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065750
4 Date 06/29/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Shonda	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code Houston, TX 77054	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney At Law
10 Contributor's employer/law firm Shonda M. Jones Attorney At Law and Mediator		11 Law firm of contributor's spouse (if any) None
12 If contributor is a child, law firm of parent(s) (if any)		
Date 06/04/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly L. Fritsch, P.C.	Amount of Contribution (\$) \$2,000.00
	Contributor address; City; State; Zip Code Houston, TX 77007	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/15/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Khatami, Sharareh (Ms.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Houston, TX 77024-6123	
Contributor's Principal Occupation Consultant		Contributor's Job Title International Consultant
Contributor's employer/law firm Self-Employed		Law firm of contributor's spouse (if any) None
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: 15/34 Rpt: 18/69
2 FILER NAME Maldonado, Julia A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065750
4 Date 05/15/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Latino Democratic Pac <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77007	7 Amount of Contribution (\$) \$500.00
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/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 06/30/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Latino Democratic Pac <hr/> Contributor address; City; State; Zip Code Houston, TX 77007	Amount of Contribution (\$) \$15,000.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/15/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Office Of Joaquin Jimenez <hr/> Contributor address; City; State; Zip Code Houston, TX 77017	Amount of Contribution (\$) \$200.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		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: 16/34 Rpt: 19/69
2 FILER NAME Maldonado, Julia A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065750
4 Date 05/16/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Office of Lynne James Hudson <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77056	7 Amount of Contribution (\$) \$2,500.00
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/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 05/15/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Office of Angelica M. Chavez <hr/> Contributor address; City; State; Zip Code South Houston, TX 77587	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/15/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Arnold <hr/> Contributor address; City; State; Zip Code Houston, TX 77009	Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney At Law
Contributor's employer/law firm Arnold Lopez, Attorney At Law		Law firm of contributor's spouse (if any) Arnold Lopez, Attorney At Law
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: 17/34 Rpt: 20/69
2 FILER NAME Maldonado, Julia A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065750
4 Date 06/30/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ly, Stacy (Ms.)	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code Houston, TX 77090		
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney At Law
10 Contributor's employer/law firm Law Office of Stacy Ly		11 Law firm of contributor's spouse (if any) None
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/15/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mahoney, Matthew (Mr.)	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Pasadena, TX 77503		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney At Law
Contributor's employer/law firm Mahoney Attorney		Law firm of contributor's spouse (if any) None
If contributor is a child, law firm of parent(s) (if any)		
Date 05/15/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mahoney Jr., Walter P. (Mr.)	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Pasadena, TX 77504		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney At Law
Contributor's employer/law firm Walter P. Mahoney Jr., Attorney At Law		Law firm of contributor's spouse (if any) None
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: 18/34 Rpt: 21/69
2 FILER NAME Maldonado, Julia A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065750
4 Date 06/03/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McClure, Virginia Lee (Ms.)	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code Humble, TX 77396-3768		
8 Contributor's Principal Occupation Business Valuator		9 Contributor's Job Title Business Valuator
10 Contributor's employer/law firm The McClure Firm		11 Law firm of contributor's spouse (if any) None
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/15/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGee, Andrew (Mr.)	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code Houston, TX 77004		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney At Law
Contributor's employer/law firm Law Office Of Andrew McGee		Law firm of contributor's spouse (if any) None
If contributor is a child, law firm of parent(s) (if any)		
Date 05/15/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McInvale, Robert (Mr.)	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Houston, TX 77084		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney At Law
Contributor's employer/law firm Robert Reid McInvale, Attorney At Law		Law firm of contributor's spouse (if any) None
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: 19/34 Rpt: 22/69
2 FILER NAME Maldonado, Julia A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065750
4 Date 05/15/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merchant, Shelly (Mrs.)	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Deer Park, TX 77536	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney At Law
10 Contributor's employer/law firm Shelly A. Merchant, Attorney At Law		11 Law firm of contributor's spouse (if any) James C. Henry, Attorney At Law
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/15/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mintz, Silvia (Ms.)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Houston, TX 77011	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney At Law
Contributor's employer/law firm Law Office Of Silvia Mintz		Law firm of contributor's spouse (if any) None
If contributor is a child, law firm of parent(s) (if any)		
Date 06/07/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mintz, Silvia (Ms.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Houston, TX 77011	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney At Law
Contributor's employer/law firm Law Office of Silvia Mintz		Law firm of contributor's spouse (if any) None
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: 20/34 Rpt: 23/69
2 FILER NAME Maldonado, Julia A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065750
4 Date 05/20/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monty, Jacob (Mr.)	7 Amount of Contribution (\$) \$5,000.00
6 Contributor address; City; State; Zip Code Houston, TX 77024		
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney At Law
10 Contributor's employer/law firm Monty & Ramirez LLP		11 Law firm of contributor's spouse (if any) None
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/14/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moon, Tammy (Ms.)	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Houston, TX 77008		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney At Law
Contributor's employer/law firm Simien Adams Law Firm		Law firm of contributor's spouse (if any) None
If contributor is a child, law firm of parent(s) (if any)		
Date 05/15/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Vlahakos & Sydow, PLLC	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Houston, TX 77046		
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		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: 21/34 Rpt: 24/69
2 FILER NAME Maldonado, Julia A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065750
4 Date 06/04/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Vlahakos & Sydow, PLLC	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code Houston, TX 77046	
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/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 05/15/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mora , Mayra (Ms.)	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Houston, TX 77009	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney At Law
Contributor's employer/law firm The Mora Law Firm, PLLC		Law firm of contributor's spouse (if any) None
If contributor is a child, law firm of parent(s) (if any)		
Date 06/05/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moreno, Alfred (Mr.)	Amount of Contribution (\$) \$31.07
	Contributor address; City; State; Zip Code Houston, TX 77207	
Contributor's Principal Occupation Design/Sales		Contributor's Job Title Manager
Contributor's employer/law firm Media Prodigy		Law firm of contributor's spouse (if any) None
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: 22/34 Rpt: 25/69
2 FILER NAME Maldonado, Julia A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065750
4 Date 06/28/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murray, Kevin (Mr.)	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code Houston, TX 77056		
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney At Law
10 Contributor's employer/law firm Kevin A. Murray, LLC.		11 Law firm of contributor's spouse (if any) None
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/15/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Myers and Associates, PLLLC	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Houston, TX 77046		
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/14/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Osuji, Edmond N. (Mr.)	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Houston, TX 77074		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney At Law
Contributor's employer/law firm Law Office Of Edmond N. Osuji		Law firm of contributor's spouse (if any) None
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: 23/34 Rpt: 26/69
2 FILER NAME Maldonado, Julia A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065750
4 Date 05/15/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parchman, Jon (Mr.)	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code The Woodland, TX 77380		
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney At Law
10 Contributor's employer/law firm Parchman Law Group		11 Law firm of contributor's spouse (if any) None
12 If contributor is a child, law firm of parent(s) (if any)		
Date 06/04/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, F. Gardner	Amount of Contribution (\$) \$2,000.00
Contributor address; City; State; Zip Code Houston, TX 77027		
Contributor's Principal Occupation Consultant		Contributor's Job Title Consultant
Contributor's employer/law firm Self-employed		Law firm of contributor's spouse (if any) None
If contributor is a child, law firm of parent(s) (if any)		
Date 05/15/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ponce Lopez, Homero (Mr.)	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Houston, TX 77017		
Contributor's Principal Occupation Community liason		Contributor's Job Title Cert Coordinator
Contributor's employer/law firm A-1 Personnel		Law firm of contributor's spouse (if any) None
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: 24/34 Rpt: 27/69
2 FILER NAME Maldonado, Julia A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065750
4 Date 05/15/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rainwater & Associates PLLC <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77056	7 Amount of Contribution (\$) \$250.00
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/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 06/04/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rainwater & Associates PLLC <hr/> Contributor address; City; State; Zip Code Houston, TX 77056	Amount of Contribution (\$) \$2,000.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/15/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramos Law Group <hr/> Contributor address; City; State; Zip Code Houston, TX 77006	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		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: 25/34 Rpt: 28/69
2 FILER NAME Maldonado, Julia A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065750
4 Date 05/15/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Regla, Luis G. (Mr.)	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Pearland, TX 77584-8597	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Assistant Attorney General
10 Contributor's employer/law firm Attorney General Of Texas		11 Law firm of contributor's spouse (if any) None
12 If contributor is a child, law firm of parent(s) (if any)		
Date 06/27/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ricardo L. Ramos, PLLC	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code Houston, TX 77002	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 06/29/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ricketts, Ivy (Mrs.)	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code Houston, TX 77054	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney At Law
Contributor's employer/law firm The Law Firm Of Ivy V. Ricketts		Law firm of contributor's spouse (if any) Elton R. Lockings, P.C.
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: 26/34 Rpt: 29/69
2 FILER NAME Maldonado, Julia A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065750
4 Date 05/15/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ricks, A Tousha (Ms.)	7 Amount of Contribution (\$) \$150.00
6 Contributor address; City; State; Zip Code Bellaire, TX 77401		
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney At Law
10 Contributor's employer/law firm Tasha Ricks Law Firm		11 Law firm of contributor's spouse (if any) None
12 If contributor is a child, law firm of parent(s) (if any)		
Date 06/29/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ricks, Tasha (Ms.)	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Bellaire, TX 77401		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney At Law
Contributor's employer/law firm Tasha Ricks Law Firm		Law firm of contributor's spouse (if any) None
If contributor is a child, law firm of parent(s) (if any)		
Date 05/15/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saldivar Jr., Israel (Mr.)	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Houston, TX 77001		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney At Law
Contributor's employer/law firm Israel Saldivar Jr., Attorney At Law		Law firm of contributor's spouse (if any) None
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: 27/34 Rpt: 30/69
2 FILER NAME Maldonado, Julia A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065750
4 Date 05/15/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salvador Colon, PC <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77002	7 Amount of Contribution (\$) \$100.00
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/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 05/15/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanders, Michelle (Ms.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77005	Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney At Law
Contributor's employer/law firm Sanders Law Firm		Law firm of contributor's spouse (if any) None
If contributor is a child, law firm of parent(s) (if any)		
Date 06/04/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slate, Dennis (Mr.) <hr/> Contributor address; City; State; Zip Code Deer Park, TX 77536	Amount of Contribution (\$) \$2,500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney At Law
Contributor's employer/law firm Dennis M. Slate Attorney At Law		Law firm of contributor's spouse (if any) Dennis M. Slate Attorney At Law
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: 28/34 Rpt: 31/69
2 FILER NAME Maldonado, Julia A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065750
4 Date 06/25/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Jacqueline	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Houston, TX 77056	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney At Law
10 Contributor's employer/law firm Jacqueline Taylor Law Office		11 Law firm of contributor's spouse (if any) None
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/15/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teresa J. Waldrop, P.C.	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Houston, TX 77002	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/15/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texans For Fairness	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Houston, TX 77095	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		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: 29/34 Rpt: 32/69
2 FILER NAME Maldonado, Julia A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065750
4 Date 05/15/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Carlin Law Firm <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77002-2040	7 Amount of Contribution (\$) \$1,000.00
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/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 05/15/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Cusic Law Firm, P.C. <hr/> Contributor address; City; State; Zip Code Houston, TX 77060-5915	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/23/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Gonzalez Law Group, P.L.L.C. <hr/> Contributor address; City; State; Zip Code Houston, TX 77017	Amount of Contribution (\$) \$2,500.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		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: 30/34 Rpt: 33/69
2 FILER NAME Maldonado, Julia A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065750
4 Date 05/15/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Law Office Of Andrew Bayley <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77098	7 Amount of Contribution (\$) \$500.00
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/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 05/15/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Law Office Of Omar O. Vargas PC <hr/> Contributor address; City; State; Zip Code Houston, TX 77063-5199	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/20/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Pinkerton Law Firm, PLLC <hr/> Contributor address; City; State; Zip Code Houston, TX 77077	Amount of Contribution (\$) \$5,000.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		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: 31/34 Rpt: 34/69
2 FILER NAME Maldonado, Julia A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065750
4 Date 05/15/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Romero Law Firm, P.C.	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code Houston, TX 77058	
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/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 06/04/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Timmins Sr., James (Mr.)	Amount of Contribution (\$) \$1,500.00
	Contributor address; City; State; Zip Code Houston, TX 77027	
Contributor's Principal Occupation Investor		Contributor's Job Title Investor
Contributor's employer/law firm Gemini Equity LLC.		Law firm of contributor's spouse (if any) None
If contributor is a child, law firm of parent(s) (if any)		
Date 05/15/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tindall England P.C.	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Houston, TX 77027	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		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: 32/34 Rpt: 35/69
2 FILER NAME Maldonado, Julia A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065750
4 Date 05/15/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tran, Thao T. (Ms.)	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code Houston, TX 77023		
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney At Law
10 Contributor's employer/law firm Law Office of Thao T. Tran		11 Law firm of contributor's spouse (if any) None
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/16/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner, J. A.	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code Houston, TX 77056-8668		
Contributor's Principal Occupation retired		Contributor's Job Title retired
Contributor's employer/law firm retired		Law firm of contributor's spouse (if any) None
If contributor is a child, law firm of parent(s) (if any)		
Date 05/15/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valdez, Stacey Holley (Ms.)	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Webster, TX 77598		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney and Counselor At Law
Contributor's employer/law firm Stacey Valdez & Associates, PLLC		Law firm of contributor's spouse (if any) None
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: 33/34 Rpt: 36/69
2 FILER NAME Maldonado, Julia A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065750
4 Date 05/14/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vara, Richard (The Honorable)	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code Houston, TX 77023		
8 Contributor's Principal Occupation Judge		9 Contributor's Job Title Justice of the Peace
10 Contributor's employer/law firm Harris County		11 Law firm of contributor's spouse (if any) None
12 If contributor is a child, law firm of parent(s) (if any)		
Date 06/04/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vlahakos, Paula (Ms.)	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Houston, TX 77024		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney At Law
Contributor's employer/law firm Moore, Vlahakos, Sydow, PLLC		Law firm of contributor's spouse (if any) None
If contributor is a child, law firm of parent(s) (if any)		
Date 06/28/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walle, Armando	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Houston, TX 77002		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney At Law
Contributor's employer/law firm Armando L. Walle Attorney At Law		Law firm of contributor's spouse (if any) None
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: 34/34 Rpt: 37/69
2 FILER NAME Maldonado, Julia A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065750
4 Date 05/15/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilkins, Ralphaell (Mr.)	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code Houston, TX 77288		
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney At Law
10 Contributor's employer/law firm The Wilkins Law Firm, P.C.		11 Law firm of contributor's spouse (if any) None
12 If contributor is a child, law firm of parent(s) (if any)		
Date 06/28/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Angela	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Katy, TX 77449		
Contributor's Principal Occupation Management		Contributor's Job Title Benefits Manager
Contributor's employer/law firm ALS Group/USA Corp.		Law firm of contributor's spouse (if any) None
If contributor is a child, law firm of parent(s) (if any)		
Date 06/28/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Womack, Gerald	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Houston, TX 77004		
Contributor's Principal Occupation Realtor		Contributor's Job Title Realtor
Contributor's employer/law firm Womack Development & Investment Realtor		Law firm of contributor's spouse (if any) None
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: 38/69	
2 FILER NAME Maldonado, Julia A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065750	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 05/15/2019	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mireskandari, Amir (Mr.) 7 Contributor address; City; State; Zip Code Houston, TX 77024	8 Amount of contribution (\$) \$850.00	9 In-kind contribution description kick-off/fundraiser
<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) consultant		13 Contributor's job title (FOR JUDICIAL) (See instructions) consultant	
14 Contributor's employer/law firm (FOR JUDICIAL) Mires Ran Clark		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) None	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 06/04/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roosbeh, Babak (Mr.) Contributor address; City; State; Zip Code Houston, TX 77098	Amount of contribution (\$) \$3,000.00	In-kind contribution description fundraiser
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL) Attorney At Law		Contributor's job title (FOR JUDICIAL) (See instructions) Associate Attorney	
Contributor's employer/law firm (FOR JUDICIAL) Bobby Newman, P.C.		Law firm of contributor's spouse (if any) (FOR JUDICIAL) None	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 06/04/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slate, Dennis (Mr.) Contributor address; City; State; Zip Code Deer Park, TX 77536	Amount of contribution (\$) \$700.00	In-kind contribution description fundraiser
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL) Attorney		Contributor's job title (FOR JUDICIAL) (See instructions) Attorney At Law	
Contributor's employer/law firm (FOR JUDICIAL) Dennis M. Slate, Attorney At Law		Law firm of contributor's spouse (if any) (FOR JUDICIAL) Dennis M. Slate, Attorney At Law	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

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: 1/28 Rpt: 39/69	2 FILER NAME Maldonado, Julia A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00065750
4 Date 03/26/2019	5 Payee name Area 5 Democratic Club	
6 Amount (\$) \$40.00	7 Payee address; City; State; Zip Code P. O. Box 508 Pasadena, TX 77501	
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 membership dues
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/21/2019	Payee name Arne's	
Amount (\$) \$121.89	Payee address; City; State; Zip Code 2830 Hicks Street Houston, TX 77007	
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 beads and misc. items for pride parade
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/15/2019	Payee name BBVA Compass	
Amount (\$) \$3.00	Payee address; City; State; Zip Code 7047 Harrisburg Blvd., Bldg. A Houston, TX 77011	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Paper Statement 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: 2/28 Rpt: 40/69	2 FILER NAME Maldonado, Julia A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00065750
4 Date 02/15/2019	5 Payee name BBVA Compass	
6 Amount (\$) \$3.00	7 Payee address; City; State; Zip Code 7047 Harrisburg Blvd., Bldg. A Houston, TX 77011	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense monthly paper statement fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/15/2019	Payee name BBVA Compass	
Amount (\$) \$3.00	Payee address; City; State; Zip Code 7047 Harrisburg Blvd., Bldg. A Houston, TX 77011	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense monthly paper statement fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/15/2019	Payee name BBVA Compass	
Amount (\$) \$3.00	Payee address; City; State; Zip Code 7047 Harrisburg Blvd., Bldg. A Houston, TX 77011	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense monthly paper statement fees
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: 3/28 Rpt: 41/69	2 FILER NAME Maldonado, Julia A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00065750
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4 Date 05/15/2019	5 Payee name BBVA Compass
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6 Amount (\$) \$3.00	7 Payee address; City; State; Zip Code 7047 Harrisburg Blvd., Bldg. A Houston, TX 77011
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense monthly paper statement fee
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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 06/17/2019	Payee name BBVA Compass
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Amount (\$) \$3.00	Payee address; City; State; Zip Code 7047 Harrisburg Blvd., Bldg. A Houston, TX 77011
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense monthly paper statement fee
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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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Date 06/20/2019	Payee name Bay Area Association of Democratic Women
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Amount (\$) \$35.00	Payee address; City; State; Zip Code 15918 Cavendish Dr. Houston, TX 77059
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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 membership dues
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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 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: 4/28 Rpt: 42/69	2 FILER NAME Maldonado, Julia A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00065750
4 Date 06/12/2019	5 Payee name Bayou Blue Democrats	
6 Amount (\$) \$20.00	7 Payee address; City; State; Zip Code 3051 Locke Ln. Houston, TX 77019	
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 membership dues
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/08/2019	Payee name Blomma Flowers	
Amount (\$) \$130.48	Payee address; City; State; Zip Code 1602 Patterson St. Houston, TX 77007	
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 Flowers for Judge Peake's husband
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/07/2019	Payee name Constant Contact	
Amount (\$) \$47.97	Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451	
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 monthly fee for mass emails
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: 5/28 Rpt: 43/69	2 FILER NAME Maldonado, Julia A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00065750
4 Date 05/31/2019	5 Payee name Constant Contact	
6 Amount (\$) \$47.97	7 Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451	
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 monthly fee for mass emails
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/16/2019	Payee name El Bolillo Bakery #1	
Amount (\$) \$33.45	Payee address; City; State; Zip Code 2517 Airline Dr. Houston, TX 77009	
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 Staff birthday celebration
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/07/2019	Payee name Facebook, Inc.	
Amount (\$) \$27.80	Payee address; City; State; Zip Code 1 Facebook Way Menlo Park, CA 94025	
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 Facebook Advertising
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: 6/28 Rpt: 44/69	2 FILER NAME Maldonado, Julia A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00065750
4 Date 06/20/2019	5 Payee name Frank's Pizza	
6 Amount (\$) \$21.50	7 Payee address; City; State; Zip Code 314 Prairie Houston, TX 77002	
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 for meeting with family judges
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/06/2019	Payee name GoDaddy.com, LLC	
Amount (\$) \$89.42	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) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website Hosting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/16/2019	Payee name GoDaddy.com, LLC	
Amount (\$) \$30.34	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) 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 Domain Registration
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: 7/28 Rpt: 45/69	2 FILER NAME Maldonado, Julia A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00065750
4 Date 03/16/2019	5 Payee name GoDaddy.com, LLC	
6 Amount (\$) \$30.34	7 Payee address; City; State; Zip Code 14455 N. Hayden Rd., Suite 219 Scottsdale, AZ 85260	
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 Domain Registration
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/02/2019	Payee name Harris County Democratic Lawyer's Association	
Amount (\$) \$30.00	Payee address; City; State; Zip Code 1302 Wawugh Dr. Houston, TX 77019	
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 participate in the monthly luncheon
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/01/2019	Payee name Harris County Democratic Party	
Amount (\$) \$10.00	Payee address; City; State; Zip Code 4619 Lyons Ave. Houston, TX 77020	
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 monthly fees for HCDP sustaining membership
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: 8/28 Rpt: 46/69	2 FILER NAME Maldonado, Julia A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00065750
4 Date 05/24/2019	5 Payee name Harris County Democratic Party	
6 Amount (\$) \$250.00	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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation to HCDP
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/01/2019	Payee name Harris County Democratic Party	
Amount (\$) \$10.00	Payee address; City; State; Zip Code 4619 Lyons Ave. Houston, TX 77020	
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 monthly HCDP sustaining membership
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/21/2019	Payee name Houston Black American Democrats	
Amount (\$) \$100.00	Payee address; City; State; Zip Code P.O. Box 21572 Houston, TX 77226	
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 membership dues
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: 9/28 Rpt: 47/69	2 FILER NAME Maldonado, Julia A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00065750
4 Date 05/15/2019	5 Payee name Houston GLBT Political Caucus	
6 Amount (\$) \$150.00	7 Payee address; City; State; Zip Code Post Office Box 66664 Houston, TX 77266	
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 Donation to GLBT Caucus
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/20/2019	Payee name Human Rights Campaign	
Amount (\$) \$257.25	Payee address; City; State; Zip Code 1640 Rhode Island Ave., N.W. Washington, DC 20036-3278	
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 participate in the luncheon event for HRC
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/10/2019	Payee name Humble Area Democrats	
Amount (\$) \$20.00	Payee address; City; State; Zip Code P. O. Box 3863 Houston, TX 77347-3863	
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 membership dues
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: 10/28 Rpt: 48/69	2 FILER NAME Maldonado, Julia A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00065750
4 Date 06/04/2019	5 Payee name Kingwood Area Democrats	
6 Amount (\$) \$25.00	7 Payee address; City; State; Zip Code 3607 Sweetgum Hill Ln. Kingwood , TX 77345	
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 membership dues
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/20/2019	Payee name Luby's Cafeteria	
Amount (\$) \$11.63	Payee address; City; State; Zip Code 201 Caroline Houston, TX 77002	
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 soft drinks for meeting with family court judges
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/11/2019	Payee name MABAH	
Amount (\$) \$75.00	Payee address; City; State; Zip Code 2800 Post Oak Blvd., Ste. 3400 Houston, TX 77001	
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 yearly membership dues
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: 11/28 Rpt: 49/69	2 FILER NAME Maldonado, Julia A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00065750
4 Date 05/13/2019	5 Payee name MABAH	
6 Amount (\$) \$250.00	7 Payee address; City; State; Zip Code 2800 Post Oak Blvd., Ste. 3400 Houston, TX 77001	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising during golf tournament
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/17/2019	Payee name Meryeralnd Area Democrats	
Amount (\$) \$20.00	Payee address; City; State; Zip Code P. O. Box 30061 Houston, TX 77231	
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 membership dues
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/07/2019	Payee name Oak Forest Area Democrats	
Amount (\$) \$20.00	Payee address; City; State; Zip Code P. O. Box 920526 Houston, TX 77292	
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 membership dues
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: 12/28 Rpt: 50/69	2 FILER NAME Maldonado, Julia A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00065750
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4 Date 05/06/2019	5 Payee name Oak Forest Area Democrats
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6 Amount (\$) \$20.00	7 Payee address; City; State; Zip Code P. O. Box 920526 Houston, TX 77292
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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 membership dues
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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 02/19/2019	Payee name Office Depot
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Amount (\$) \$42.29	Payee address; City; State; Zip Code 3443 Kirby Dr. Houston, TX 77098
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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 Supplies for Harris County voter signatures
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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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Date 03/04/2019	Payee name Parking Managment
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Amount (\$) \$4.00	Payee address; City; State; Zip Code P. O. Box 4997 Houston, TX 77210-4997
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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 parking for 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 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: 13/28 Rpt: 51/69	2 FILER NAME Maldonado, Julia A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00065750
4 Date 05/15/2019	5 Payee name PayPal	
6 Amount (\$) \$6.10	7 Payee address; City; State; Zip Code P. O. Box 45950 Omaha, NE 68145-0950	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fees - political contribution from Law Office of Joaquin Jimenez
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/15/2019	Payee name PayPal	
Amount (\$) \$14.80	Payee address; City; State; Zip Code P. O. Box 45950 Omaha, NE 68145-0950	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fees - political contribution from John Grubb
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/15/2019	Payee name PayPal	
Amount (\$) \$43.80	Payee address; City; State; Zip Code P. O. Box 45950 Omaha, NE 68145-0950	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee - political contribution from Hal Hale
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: 14/28 Rpt: 52/69	2 FILER NAME Maldonado, Julia A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00065750
4 Date 05/15/2019	5 Payee name PayPal	
6 Amount (\$) \$43.80	7 Payee address; City; State; Zip Code P. O. Box 45950 Omaha, NE 68145-0950	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee - political contribution from Catherine Herrington Hale
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/15/2019	Payee name PayPal	
Amount (\$) \$14.80	Payee address; City; State; Zip Code P. O. Box 45950 Omaha, NE 68145-0950	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee - political contribution from Tracy Good
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/15/2019	Payee name PayPal	
Amount (\$) \$29.30	Payee address; City; State; Zip Code P. O. Box 45950 Omaha, NE 68145-0950	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee - political contribution from Cynthia Diggs
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: 15/28 Rpt: 53/69	2 FILER NAME Maldonado, Julia A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00065750
4 Date 05/15/2019	5 Payee name PayPal	
6 Amount (\$) \$1.75	7 Payee address; City; State; Zip Code P. O. Box 45950 Omaha, NE 68145-0950	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee - political contribution from Silvia Mintz
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/15/2019	Payee name PayPal	
Amount (\$) \$3.20	Payee address; City; State; Zip Code P. O. Box 45950 Omaha, NE 68145-0950	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee - political contribution from Juan Aguirre
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/15/2019	Payee name PayPal	
Amount (\$) \$1.75	Payee address; City; State; Zip Code P. O. Box 45950 Omaha, NE 68145-0950	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee - political contribution from Sherika Clark Jones
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: 16/28 Rpt: 54/69	2 FILER NAME Maldonado, Julia A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00065750
4 Date 05/15/2019	5 Payee name PayPal	
6 Amount (\$) \$4.65	7 Payee address; City; State; Zip Code P. O. Box 45950 Omaha, NE 68145-0950	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee - political contribution from Libia E. Bohorquez
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/15/2019	Payee name PayPal	
Amount (\$) \$7.55	Payee address; City; State; Zip Code P. O. Box 45950 Omaha, NE 68145-0950	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee - political contribution from Lawrence Cerf
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/15/2019	Payee name PayPal	
Amount (\$) \$3.20	Payee address; City; State; Zip Code P. O. Box 45950 Omaha, NE 68145-0950	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee - political contribution from Michelle Sanders
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: 17/28 Rpt: 55/69	2 FILER NAME Maldonado, Julia A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00065750
4 Date 05/15/2019	5 Payee name PayPal	
6 Amount (\$) \$29.30	7 Payee address; City; State; Zip Code P. O. Box 45950 Omaha, NE 68145-0950	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee - political contribution from Patricia Billings
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/15/2019	Payee name PayPal	
Amount (\$) \$2.48	Payee address; City; State; Zip Code P. O. Box 45950 Omaha, NE 68145-0950	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee - political contribution from Denise Adjei
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/15/2019	Payee name PayPal	
Amount (\$) \$14.80	Payee address; City; State; Zip Code P. O. Box 45950 Omaha, NE 68145-0950	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee - political contribution from Jon Parchman
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: 18/28 Rpt: 56/69	2 FILER NAME Maldonado, Julia A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00065750
4 Date 05/15/2019	5 Payee name PayPal	
6 Amount (\$) \$1.75	7 Payee address; City; State; Zip Code P. O. Box 45950 Omaha, NE 68145-0950	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee - political contribution from Susan Haines
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/15/2019	Payee name PayPal	
Amount (\$) \$14.80	Payee address; City; State; Zip Code P. O. Box 45950 Omaha, NE 68145-0950	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee - political contribution from C.Y. Lee Legal Group, PLLC
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/15/2019	Payee name PayPal	
Amount (\$) \$4.65	Payee address; City; State; Zip Code P. O. Box 45950 Omaha, NE 68145-0950	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee - political contribution from A Tousha Ricks
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: 19/28 Rpt: 57/69	2 FILER NAME Maldonado, Julia A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00065750
4 Date 05/15/2019	5 Payee name PayPal	
6 Amount (\$) \$14.80	7 Payee address; City; State; Zip Code P. O. Box 45950 Omaha, NE 68145-0950	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee - political contribution from Mayra Mora
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/25/2019	Payee name PayPal	
Amount (\$) \$14.80	Payee address; City; State; Zip Code P. O. Box 45950 Omaha, NE 68145-0950	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fees - political contribution from Jacqueline Taylor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/28/2019	Payee name PayPal	
Amount (\$) \$3.20	Payee address; City; State; Zip Code P. O. Box 45950 Omaha, NE 68145-0950	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee -political contribution from Kevin Murray
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: 20/28 Rpt: 58/69	2 FILER NAME Maldonado, Julia A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00065750
4 Date 06/28/2019	5 Payee name PayPal	
6 Amount (\$) \$7.55	7 Payee address; City; State; Zip Code P. O. Box 45950 Omaha, NE 68145-0950	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee - political contribution from Armando Walle
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/28/2019	Payee name PayPal	
Amount (\$) \$3.20	Payee address; City; State; Zip Code P. O. Box 45950 Omaha, NE 68145-0950	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee - political contribution from Angela Williams
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/29/2019	Payee name PayPal	
Amount (\$) \$1.75	Payee address; City; State; Zip Code P. O. Box 45950 Omaha, NE 68145-0950	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee - political contribution from Tasha Ricks
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: 21/28 Rpt: 59/69	2	FILER NAME Maldonado, Julia A. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00065750
4	Date 06/29/2019	5	Payee name PayPal		
6	Amount (\$) \$7.55	7	Payee address; City; State; Zip Code P. O. Box 45950 Omaha, NE 68145-0950		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fees - political contribution from Shonda Jones		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 06/29/2019		Payee name PayPal		
	Amount (\$) \$9.00		Payee address; City; State; Zip Code P. O. Box 45950 Omaha, NE 68145-0950		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee - political contribution from Ivy Ricketts		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 06/29/2019		Payee name PayPal		
	Amount (\$) \$14.80		Payee address; City; State; Zip Code P. O. Box 45950 Omaha, NE 68145-0950		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee - political contribution from Stacy Ly		
		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 | 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: 22/28 Rpt: 60/69	2 FILER NAME Maldonado, Julia A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00065750
4 Date 06/30/2019	5 Payee name PayPal	
6 Amount (\$) \$7.55	7 Payee address; City; State; Zip Code P. O. Box 45950 Omaha, NE 68145-0950	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee - political contribution from Roger Boudreaux Jr.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/30/2019	Payee name PayPal	
Amount (\$) \$14.80	Payee address; City; State; Zip Code P. O. Box 45950 Omaha, NE 68145-0950	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee - political contribution from Al Harrison
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/26/2019	Payee name Sharpstown Democrats	
Amount (\$) \$20.00	Payee address; City; State; Zip Code P. O. Box 2053 Bellaire, TX 77402	
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 membership dues
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: 23/28 Rpt: 61/69	2 FILER NAME Maldonado, Julia A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00065750
4 Date 01/11/2019	5 Payee name Shipley's Donut Shop #1	
6 Amount (\$) \$13.29	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) 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 Donuts for 507th's weekly coffee with attorneys
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/18/2019	Payee name Shipley's Donut Shop #1	
Amount (\$) \$20.49	Payee address; City; State; Zip Code 3932 N. Main St. Houston, TX 77009	
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 Donuts for 507th's weekly coffee with Attorneys
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/22/2019	Payee name Shipley's Donut Shop #1	
Amount (\$) \$9.39	Payee address; City; State; Zip Code 3932 N. Main St. Houston, TX 77009	
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 Donuts for 507th's weekly coffee with Attorneys
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: 24/28 Rpt: 62/69	2 FILER NAME Maldonado, Julia A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00065750
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4 Date 01/28/2019	5 Payee name Shipley's Donut Shop #1
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6 Amount (\$) \$8.39	7 Payee address; City; State; Zip Code 3932 N. Main St. Houston, TX 77009
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donuts for 507th's weekly coffee with Attorneys
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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 02/07/2019	Payee name Shipley's Donut Shop #1
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Amount (\$) \$8.39	Payee address; City; State; Zip Code 3932 N. Main St. Houston, TX 77009
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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 Donuts for 507th's weekly coffee with attorneys
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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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Date 03/01/2019	Payee name Shipley's Donut Shop #1
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Amount (\$) \$11.29	Payee address; City; State; Zip Code 3932 N. Main St. Houston, TX 77009
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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 donuts for 507th's weekly coffee with attorneys
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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 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: 25/28 Rpt: 63/69	2 FILER NAME Maldonado, Julia A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00065750
4 Date 04/05/2019	5 Payee name Shipley's Donut Shop #1	
6 Amount (\$) \$8.29	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) 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 donuts for 507th's weekly coffee with attorneys
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/17/2019	Payee name Shipley's Donut Shop #1	
Amount (\$) \$8.39	Payee address; City; State; Zip Code 3932 N. Main St. Houston, TX 77009	
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 donuts for 507th's weekly coffee with attorneys
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/31/2019	Payee name Shipley's Donut Shop #1	
Amount (\$) \$9.99	Payee address; City; State; Zip Code 3932 N. Main St. Houston, TX 77009	
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 donuts for 507th's weekly coffee with attorneys
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: 26/28 Rpt: 64/69	2 FILER NAME Maldonado, Julia A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00065750
4 Date 06/21/2019	5 Payee name Shipleys Donut Shop #1	
6 Amount (\$) \$13.70	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) 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 donuts for 507th's weekly coffee with attorneys
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/28/2019	Payee name Shipleys Donut Shop #1	
Amount (\$) \$9.39	Payee address; City; State; Zip Code 3932 N. Main St. Houston, TX 77009	
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 donuts for 507th's weekly coffee with attorneys
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/23/2019	Payee name Spring Democratic Club	
Amount (\$) \$25.00	Payee address; City; State; Zip Code 2327 Peacefull Valley Dr. Sprin, TX 77373	
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 membership dues
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 - | 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 F1: Sch: 27/28 Rpt: 65/69	2 FILER NAME Maldonado, Julia A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00065750
4 Date 05/28/2019	5 Payee name State Print	
6 Amount (\$) \$2,395.00	7 Payee address; City; State; Zip Code p. O. Box 262121 Houston, TX 77207	
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 Card, Envelopes, Website, Banner, political support
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/10/2019	Payee name Texas Board of Legal Specialization	
Amount (\$) \$125.00	Payee address; City; State; Zip Code 505 E. Huntland Dr., Ste. 400 Austin, TX 78752	
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 TBLS annual requirement fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/23/2019	Payee name Texas Democratic Women-Harris County	
Amount (\$) \$50.00	Payee address; City; State; Zip Code 766 Thornbranch Dr. Houston, TX 77079	
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 participate in the TDW luncheon
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: 28/28 Rpt: 66/69	2 FILER NAME Maldonado, Julia A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00065750
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4 Date 02/15/2019	5 Payee name Tiff's Treats
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6 Amount (\$) \$49.50	7 Payee address; City; State; Zip Code 2507 Bagby St. Houston, TX 77006
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Late Valentine's treats for staff.
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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 06/12/2019	Payee name Tribute Store Center
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Amount (\$) \$272.93	Payee address; City; State; Zip Code 2510 Parmenter St., Ste. 300 A Middleton, WI 53562
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials 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 Funeral arrangement for courtreporter's brother's funeral
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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
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 G: Sch: 1/3 Rpt: 67/69	2 FILER NAME Maldonado, Julia A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00065750
4 Date 01/01/2019	5 Payee name Alamo Tamale & Taco	
6 Amount (\$) \$40.05 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 2310 Navigation Blvd. 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 breakfast for new judges meeting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/12/2019	Payee name Doneraki - Gulfgate	
Amount (\$) \$406.12 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 300 Gulfgate Houston, TX 77087	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff birthday celebration - all of April birthdays (4 each)
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/21/2019	Payee name East Houston Democrats	
Amount (\$) \$30.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code P. O. Box 24082 Houston, TX 77229	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense membership dues
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

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 G: Sch: 2/3 Rpt: 68/69	2 FILER NAME Maldonado, Julia A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00065750
4 Date 01/29/2019	5 Payee name Harris County Democratic Party	
6 Amount (\$) \$10.00 <input checked="" type="checkbox"/> 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense monthly HCDP sustaining membership
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 03/01/2019	Payee name Harris County Democratic Party	
Amount (\$) \$10.00 <input checked="" type="checkbox"/> 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense monthly HCDP sustaining membership
	Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 05/14/2019	Payee name Kwik Kopy	
Amount (\$) \$8.12 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 4001 San Jacinto St. Houston, TX 77044	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense copies of signature pages
	Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

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 G: Sch: 3/3 Rpt: 69/69		2 FILER NAME Maldonado, Julia A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065750	
4 Date 01/09/2019		5 Payee name Office Depot			
6 Amount (\$) \$21.63 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code 3443 Kirby Dr. Houston, TX 77098			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense pens to be used at the courthouse. pen cannot be order through county.	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 02/26/2019		Payee name PublicData.com			
Amount (\$) \$37.74 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 7750 N. MacArthur Blvd., Ste. 120-320 Irving, TX 75063-7501			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense research website	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 05/31/2019		Payee name The Rustic			
Amount (\$) \$64.24 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 1836 Polk St. Houston, TX 77003			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense celebrate court reporter's birthday.	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	