



Official Public Records of
Harris County
Stan Stanart
County Clerk

Campaign Finance Report



Stan Stanart
COUNTY CLERK
HARRIS COUNTY, TEXAS

FileNo: 201884
Received By Clerk: 1/16/2018
File Date: January 16, 2018
Office: County Judge
Candidate: Hidalgo, Lina M.
Treasurer: Pickett, G Troy
Category: Contributions And Expenditures
Delivered By: Personal Appearance
Type: COR

Harris County No Fee

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

201884

Page - 2

The C/OH Instruction Guide explains how to complete this form.			1. Filer ID (Ethics Commission Filers)		2. Total pages filed: 73		
3 CANDIDATE/ OFFICEHOLDER NAME	MS/MRS/MR	FIRST	MI		OFFICE USE ONLY		
	NICKNAME	LAST	SUFFIX				
4 CANDIDATE/ OFFICEHOLDER ADDRESS	ADDRESS /PO BOX:		APT/SUITE #	CITY	STATE:	ZIP CODE	
	P. O. Box 88392			Houston	TX	77288	
<input type="checkbox"/> Change of Address							
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		Receipt #	Amount \$	
		(713) 898-4624					
6 CAMPAIGN TREASURER NAME	MS/MRS/MR	FIRST	MI		Date Processed		
	NICKNAME	LAST	SUFFIX		Date Imaged		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS:		APT/SUITE #	CITY	STATE:	ZIP CODE	
	2222 Bissonnet Street		Ste 203	Houston	TX	77005	
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
		(713) 589-8692					
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach- COH-FR)						
10 PERIOD COVERED	Month	Day	Year	THROUGH	Month	Day	Year
			08/01/2017				12/31/2017
11 ELECTION	ELECTION DATE			ELECTION TYPE			
	Month	Day	Year	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other	
			03/06/2018	<input type="checkbox"/> General	<input type="checkbox"/> Special		
12 OFFICE	OFFICE HELD (if any)				13 OFFICE SOUGHT (if known) Statutory County Judge		
GO TO PAGE 2							

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME	Lina M. Hidalgo		15 Filer ID (Ethics Commission Filers)
16 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.		
	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME	
		COMMITTEE ADDRESS	
		COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
<input type="checkbox"/> additional pages			
17 CONTRIBUTION TOTALS	1	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$2,774.84
EXPENDITURE TOTALS	2	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$54,949.75
	3	TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$653.41
CONTRIBUTION BALANCE	4	TOTAL POLITICAL EXPENDITURES	\$47,828.76
	5	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$7,443.08
OUTSTANDING LOAN TOTALS	6	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$1,400.00
18 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. <div style="display: flex; justify-content: space-between;"> <div> 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. </div> <div> _____ Signature of Candidate or Officeholder </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div> _____ Signature of officer administering oath </div> <div> _____ Printed name of officer administering oath </div> <div> _____ Title of officer administering oath </div> </div>			

SUBTOTALS - COH**FORM C/OH
COVER SHEET PG 3**

19. FILER NAME Lina M. Hidalgo		20. FILER ID (Ethics Commission Filers)
21. SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTALS AMOUNT
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$52,754.84
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$2,194.91
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$0.00
4. SCHEDULE E: LOANS		\$1,400.00
5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$47,828.76
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$0.00
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS		\$0.00
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$0.00
9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS		\$0.00
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH		\$0.00
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$0.00
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS AND CONTRIBUTIONS RETURNED TO FILER		\$1,117.00

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

201884

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A1: not available
2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 10/29/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Moctar Aboubacar 6. Contributor address; City; State; ZIP Code 2 Peabody Ter Apt 904 Cambridge, MA 02138-6213	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
4. Date 09/30/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Hana Al-Henaid 6. Contributor address; City; State; ZIP Code 30634 Lucania Dr Rancho Palos Verdes, CA 90275-6265	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
4. Date 11/05/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Andrew Bergamo 6. Contributor address; City; State; ZIP Code 3939 Veselich Ave Apt 202 Los Angeles, CA 90039-1484	7. Amount of contribution (\$) \$500.00
8. Principal occupation / Job title (See Instructions) Creative Executive		9 Employer (See Instructions) The Donners' Company
4. Date 09/30/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Rita Bergers 6. Contributor address; City; State; ZIP Code 1123 Berthea St Houston, TX 77006-6469	7. Amount of contribution (\$) \$500.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
4. Date 12/03/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Barbara Bergin-Nader 6. Contributor address; City; State; ZIP Code 104 Laura Ln Rollingwood, TX 78746-4666	7. Amount of contribution (\$) \$1,000.00
8. Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) Texas Orthopedics Sports & Rehabilitation

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

201884

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A1: not available
2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 12/17/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Linda Bessin 6. Contributor address; City; State; ZIP Code 741 N Clybourn Ave Burbank, CA 91505-3153	7. Amount of contribution (\$) \$500.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
4. Date 11/12/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Niraj Bhavsar 6. Contributor address; City; State; ZIP Code 19406 Plantation Orchard Ln Richmond, TX 77407-3084	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
4. Date 08/13/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Iteza Binte-Farid 6. Contributor address; City; State; ZIP Code 293 Peyton Ct Apt 8 Charlottesville, VA 22903-5410	7. Amount of contribution (\$) \$200.00
8. Principal occupation / Job title (See Instructions) PhD student		9 Employer (See Instructions) UPenn
4. Date 08/27/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Dan Black 6. Contributor address; City; State; ZIP Code 66 Stroudwater Rd Portland, ME 04102-1614	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) None
4. Date 10/22/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Katharine Bodnar 6. Contributor address; City; State; ZIP Code 126 Kinnaird St Apt 2 Cambridge, MA 02139-2914	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

201884

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A1: not available
2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 08/13/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Valentin Bolotnyy 6. Contributor address; City; State; ZIP Code 8 Suffolk St # 3 Cambridge, MA 02139-2713	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Student		9 Employer (See Instructions) Not Employed
4. Date 10/30/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Valentin Bolotnyy 6. Contributor address; City; State; ZIP Code 8 Suffolk St # 3 Cambridge, MA 02139-2713	7. Amount of contribution (\$) \$50.00
8. Principal occupation / Job title (See Instructions) Student		9 Employer (See Instructions) Not Employed
4. Date 12/29/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Alexandra Bowes 6. Contributor address; City; State; ZIP Code 3000 Pacific Ave San Francisco, CA 94115-1014	7. Amount of contribution (\$) \$600.00
8. Principal occupation / Job title (See Instructions) Artist		9 Employer (See Instructions) Self employed
4. Date 12/31/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Lane Burtz 6. Contributor address; City; State; ZIP Code 2505 Mosswood Dr Carrollton, TX 75010-4230	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Retired
4. Date 08/06/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Sandra Bustamante 6. Contributor address; City; State; ZIP Code 1701 Hermann Dr Houston, TX 77004-7452	7. Amount of contribution (\$) \$50.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

201884

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A1: not available
2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 08/14/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Sandra Bustamante 6. Contributor address; City; State; ZIP Code 1701 Hermann Dr Houston, TX 77004-7452	7. Amount of contribution (\$) \$200.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
4. Date 08/14/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Sandra Bustamante 6. Contributor address; City; State; ZIP Code 1701 Hermann Dr Houston, TX 77004-7452	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
4. Date 09/10/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Sandra Bustamante 6. Contributor address; City; State; ZIP Code 1701 Hermann Dr Houston, TX 77004-7452	7. Amount of contribution (\$) \$400.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
4. Date 10/08/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Sandra Bustamante 6. Contributor address; City; State; ZIP Code 1701 Hermann Dr Houston, TX 77004-7452	7. Amount of contribution (\$) \$900.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
4. Date 10/10/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC _____ Sandra Bustamante 6. Contributor address; City; State; ZIP Code 1701 Hermann Dr Houston, TX 77004-7452	7. Amount of contribution (\$) \$43.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A1: not available
2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 10/22/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Sandra Bustamante 6. Contributor address; City; State; ZIP Code 1701 Hermann Dr Houston, TX 77004-7452	7. Amount of contribution (\$) \$300.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
4. Date 10/25/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Sandra Bustamante 6. Contributor address; City; State; ZIP Code 1701 Hermann Dr Houston, TX 77004-7452	7. Amount of contribution (\$) \$700.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
4. Date 11/07/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Sandra Bustamante 6. Contributor address; City; State; ZIP Code 1701 Hermann Dr Houston, TX 77004-7452	7. Amount of contribution (\$) \$300.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
4. Date 12/05/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Sandra Bustamante 6. Contributor address; City; State; ZIP Code 1701 Hermann Dr Houston, TX 77004-7452	7. Amount of contribution (\$) \$1,000.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
4. Date 12/18/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Sandra Bustamante 6. Contributor address; City; State; ZIP Code 1701 Hermann Dr Houston, TX 77004-7452	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

201884

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The Instruction Guide explains how to complete this form.		1. Total pages Schedule A1: not available
2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 08/13/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Sergio Bustamante 6. Contributor address; City; State; ZIP Code 2544 Ginger Wren Rd Pepper Pike, OH 44124-4564	7. Amount of contribution (\$) \$250.00
8. Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) Cleveland Clinic
4. Date 10/29/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Kris Butler 6. Contributor address; City; State; ZIP Code 3501 Ross Ave Dallas, TX 75204-5449	7. Amount of contribution (\$) \$200.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
4. Date 10/29/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Erika Carlsen 6. Contributor address; City; State; ZIP Code 5 Craigie Cir Apt 7 Cambridge, MA 02138-3451	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Assistant Director		9 Employer (See Instructions) Center for Public Leadership
4. Date 10/15/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Synthia Chan 6. Contributor address; City; State; ZIP Code 19335 Greenwind Chase Dr Houston, TX 77094-3440	7. Amount of contribution (\$) \$2,000.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
4. Date 09/30/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Ashley Chang 6. Contributor address; City; State; ZIP Code 1195 Chapel St Apt 3 New Haven, CT 06511-4700	7. Amount of contribution (\$) \$25.00
8. Principal occupation / Job title (See Instructions) Student		9 Employer (See Instructions) Yale School of Drama

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A1: not available
2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 10/29/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Ashley Chang 6. Contributor address; City; State; ZIP Code 1195 Chapel St Apt 3 New Haven, CT 06511-4700	7. Amount of contribution (\$) \$25.00
8. Principal occupation / Job title (See Instructions) Student		9 Employer (See Instructions) Yale School of Drama
4. Date 12/03/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Ashley Chang 6. Contributor address; City; State; ZIP Code 1195 Chapel St Apt 3 New Haven, CT 06511-4700	7. Amount of contribution (\$) \$25.00
8. Principal occupation / Job title (See Instructions) Student		9 Employer (See Instructions) Yale School of Drama
4. Date 12/17/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Vincent Chen 6. Contributor address; City; State; ZIP Code 653 Arkansas St San Francisco, CA 94107-2830	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Business Analyst		9 Employer (See Instructions) Jupiter Intelligence
4. Date 09/24/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Christian Chung 6. Contributor address; City; State; ZIP Code 4700 N Capital Of Texas Hwy Apt 104 Austin, TX 78746-1132	7. Amount of contribution (\$) \$200.00
8. Principal occupation / Job title (See Instructions) Security Engineer		9 Employer (See Instructions) NCC Group
4. Date 11/12/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Barbara Comiskey 6. Contributor address; City; State; ZIP Code 4810 Kingdale Dr San Jose, CA 95124-4909	7. Amount of contribution (\$) \$200.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

201884

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A1: not available
2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 12/31/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Jonathan Coopersmith 6. Contributor address; City; State; ZIP Code 1811 Shadowwood Dr Tam College Station, TX 77840-4846	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) academic		9 Employer (See Instructions) Texas A&M
4. Date 10/22/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Geoffrey Corn 6. Contributor address; City; State; ZIP Code 1238 W 22nd St Houston, TX 77008-1808	7. Amount of contribution (\$) \$50.00
8. Principal occupation / Job title (See Instructions) professor		9 Employer (See Instructions) south texas college of law
4. Date 11/26/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Geoffrey Corn 6. Contributor address; City; State; ZIP Code 1238 W 22nd St Houston, TX 77008-1808	7. Amount of contribution (\$) \$50.00
8. Principal occupation / Job title (See Instructions) professor		9 Employer (See Instructions) south texas college of law
4. Date 12/24/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Geoffrey Corn 6. Contributor address; City; State; ZIP Code 1238 W 22nd St Houston, TX 77008-1808	7. Amount of contribution (\$) \$50.00
8. Principal occupation / Job title (See Instructions) professor		9 Employer (See Instructions) south texas college of law
4. Date 12/17/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC julie Costanzo 6. Contributor address; City; State; ZIP Code 140 Divisadero St Apt 1 San Francisco, CA 94117-3238	7. Amount of contribution (\$) \$150.00
8. Principal occupation / Job title (See Instructions) Producer		9 Employer (See Instructions) Self

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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A1: not available
2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 08/27/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Katherine Cromack 6. Contributor address; City; State; ZIP Code 536 Peru Ave San Francisco, CA 94112-1619	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Operations Coordinator		9 Employer (See Instructions) Galileo Learning
4. Date 11/05/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC jorge CUBIDES 6. Contributor address; City; State; ZIP Code 28314 Rolling Ridge Dr Katy, TX 77494-1455	7. Amount of contribution (\$) \$250.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
4. Date 12/17/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC David L DesJardins 6. Contributor address; City; State; ZIP Code 1538 Burlingame Ave Burlingame, CA 94010-5102	7. Amount of contribution (\$) \$1,000.00
8. Principal occupation / Job title (See Instructions) Investor		9 Employer (See Instructions) Self Employed
4. Date 11/19/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Larry Diamond 6. Contributor address; City; State; ZIP Code 837 Tolman Dr Stanford, CA 94305-1025	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Senior Fellow		9 Employer (See Instructions) Stanford University
4. Date 09/30/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Lauren Felice 6. Contributor address; City; State; ZIP Code 1263 1st St SE Apt 422 Washington, DC 20003-4522	7. Amount of contribution (\$) \$200.00
8. Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions) Under Armour

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A1: not available
2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 08/27/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Maxime Fischer-Zemin 6. Contributor address; City; State; ZIP Code 300 E 77th St New York, NY 10075-2450	7. Amount of contribution (\$) \$150.00
8. Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
4. Date 08/13/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Imani Rence Franklin 6. Contributor address; City; State; ZIP Code 4700 Guilford Forest Dr SW Atlanta, GA 30331-7394	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Student		9 Employer (See Instructions) Harvard
4. Date 08/20/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Lindsay Funk 6. Contributor address; City; State; ZIP Code 7 W View Dr Flemington, NJ 08822-5937	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
4. Date 12/31/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC David Fyffe 6. Contributor address; City; State; ZIP Code 6628 Warm Breeze Ln Dallas, TX 75248-5021	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Dentist		9 Employer (See Instructions) Self
4. Date 08/27/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Justin Galle 6. Contributor address; City; State; ZIP Code 508 McBride Dr Lafayette, CA 94549-5718	7. Amount of contribution (\$) \$150.00
8. Principal occupation / Job title (See Instructions) Student		9 Employer (See Instructions) HKS

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A1: not available
2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 10/22/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Justin Galle 6. Contributor address; City; State; ZIP Code 508 McBride Dr Lafayette, CA 94549-5718	7. Amount of contribution (\$) \$25.00
8. Principal occupation / Job title (See Instructions) Student		9. Employer (See Instructions) HKS
4. Date 10/15/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Adam Genecov 6. Contributor address; City; State; ZIP Code 1609 Amapola Ave Torrance, CA 90501-3102	7. Amount of contribution (\$) \$600.00
8. Principal occupation / Job title (See Instructions) Engineer		9. Employer (See Instructions) SpaceX
4. Date 08/20/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Daniel Goldberg 6. Contributor address; City; State; ZIP Code 28 Kelly Rd Apt 2 Cambridge, MA 02139-4404	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Not Employed		9. Employer (See Instructions) Not Employed
4. Date 12/03/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Millie Gong 6. Contributor address; City; State; ZIP Code 24201 Summerhill Ave Los Altos, CA 94024-5230	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Marketing Consultant		9. Employer (See Instructions) Self
4. Date 08/20/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Jacob Goodman 6. Contributor address; City; State; ZIP Code 5619 Kent Pl Goleta, CA 93117-2131	7. Amount of contribution (\$) \$300.00
8. Principal occupation / Job title (See Instructions) Legal Specialist		9. Employer (See Instructions) Google

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1. Total pages Schedule A1: not available
2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 10/22/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Colin Gray 6. Contributor address; City; State; ZIP Code 524 Putnam Ave Cambridge MA 02139 Cambridge, MA 02139-4758	7. Amount of contribution (\$) \$250.00
8. Principal occupation / Job title (See Instructions) PhD Student		9 Employer (See Instructions) MIT
4. Date 08/20/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Pukar Hamal 6. Contributor address; City; State; ZIP Code 619 N San Mateo Dr Apt 105 San Mateo, CA 94401-2344	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Co-Founder		9 Employer (See Instructions) Teamable
4. Date 09/17/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Pukar Hamal 6. Contributor address; City; State; ZIP Code 619 N San Mateo Dr Apt 105 San Mateo, CA 94401-2344	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Co-Founder		9 Employer (See Instructions) Teamable
4. Date 08/06/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Devney Hamilton 6. Contributor address; City; State; ZIP Code 1419 S 14th St Lafayette, IN 47905-1966	7. Amount of contribution (\$) \$202.00
8. Principal occupation / Job title (See Instructions) Software Developer		9 Employer (See Instructions) Sassafras Tech Collective
4. Date 10/08/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC LiHe Han 6. Contributor address; City; State; ZIP Code 2240 Blake St Apt 107 Berkeley, CA 94704-2744	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The instruction Guide explains how to complete this form.		1. Total pages Schedule A1: not available
2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 12/31/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC James Roger Hellums 6. Contributor address; City; State; ZIP Code 4537 Pecan Valley Dr Plano, TX 75093-3327	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
4. Date 08/14/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Jorge Luis Hidalgo 6. Contributor address; City; State; ZIP Code 1701 Hermann Dr # 28F Houston, TX 77004-7452	7. Amount of contribution (\$) \$1,050.00
8. Principal occupation / Job title (See Instructions) COO		9 Employer (See Instructions) Avangard Innovative
4. Date 08/13/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Sandy Huang 6. Contributor address; City; State; ZIP Code 2014 Virginia St Apt 4 Berkeley, CA 94709-2112	7. Amount of contribution (\$) \$500.00
8. Principal occupation / Job title (See Instructions) Graduate Student Researcher		9 Employer (See Instructions) UC Berkeley
4. Date 12/18/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Sue Jackson 6. Contributor address; City; State; ZIP Code 25 Via Sierra Grande Manitou Springs, CO 80829-2446	7. Amount of contribution (\$) \$250.00
8. Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Ruth Washburn Cooperative Nursery School
4. Date 08/20/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC David James 6. Contributor address; City; State; ZIP Code 6430 Meadowcreek Dr Dallas, TX 75254-7832	7. Amount of contribution (\$) \$2,000.00
8. Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Edwards Law

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filters)
4. Date 09/24/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC David James 6. Contributor address; City; State; ZIP Code 6430 Meadowcreek Dr Dallas, TX 75254-7832	7. Amount of contribution (\$) \$1,900.00
8. Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Edwards Law
4. Date 09/24/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC David James 6. Contributor address; City; State; ZIP Code 6430 Meadowcreek Dr Dallas, TX 75254-7832	7. Amount of contribution (\$) \$1,000.00
8. Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Edwards Law
4. Date 12/31/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC David James 6. Contributor address; City; State; ZIP Code 6430 Meadowcreek Dr Dallas, TX 75254-7832	7. Amount of contribution (\$) \$2,100.00
8. Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Edwards Law
4. Date 08/13/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Felicia James 6. Contributor address; City; State; ZIP Code 2640 Creekway Dr Carrollton, TX 75010-4227	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Engineering Manager		9 Employer (See Instructions) Zipalog Inc.
4. Date 12/31/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Steve James 6. Contributor address; City; State; ZIP Code 6430 Meadowcreek Dr Dallas, TX 75254-7832	7. Amount of contribution (\$) \$250.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 11/13/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Lauren Kamin 6. Contributor address; City; State; ZIP Code 51 Ardsley Fern Irvington, NY 10633	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4. Date 12/31/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Alayne Katz 6. Contributor address; City; State; ZIP Code 76 Greenway Dr Irvington, NY 10533-1844	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) Self
4. Date 11/12/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Susan Kay 6. Contributor address; City; State; ZIP Code 2640 Benedict Canyon Dr Beverly Hills, CA 90210-1023	7. Amount of contribution (\$) \$500.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
4. Date 10/29/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Colin Killick 6. Contributor address; City; State; ZIP Code 163A Albion St Somerville, MA 02144-2647	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Community Organizer		9 Employer (See Instructions) Disability Policy Consortium
4. Date 09/01/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Amy Kimball 6. Contributor address; City; State; ZIP Code 2026 Lakeshore Dr Agoura Hills, CA 91301-2864	7. Amount of contribution (\$) \$250.00
8. Principal occupation / Job title (See Instructions) Medical Director		9 Employer (See Instructions) Amgen

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MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A1: not available
2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 12/17/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Samuel Kohn 6. Contributor address; City; State; ZIP Code 1327 Martin Luther King Jr Way Apt 1 Berkeley, CA 94709-1988	7. Amount of contribution (\$) \$75.00
8. Principal occupation / Job title (See Instructions) Graduate Student Researcher		9 Employer (See Instructions) UC Berkeley
4. Date 08/13/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Amy Larsen 6. Contributor address; City; State; ZIP Code 103 Hunters Run Dobbs Ferry, NY 10522-3404	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) Davis Polk & Wardwell
4. Date 11/05/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Lizhi Liu 6. Contributor address; City; State; ZIP Code 509 Fox Ct W Redwood City, CA 94061-3922	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) PHD candidate		9 Employer (See Instructions) stanford
4. Date 09/17/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Charles Ludlam 6. Contributor address; City; State; ZIP Code 4020 Reno Rd NW Washington, DC 20008-3012	7. Amount of contribution (\$) \$2,500.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
4. Date 10/30/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Jane Manopoli 6. Contributor address; City; State; ZIP Code 370 Beacon St Boston, MA 02116-1002	7. Amount of contribution (\$) \$250.00
8. Principal occupation / Job title (See Instructions) Writing and Editing Professional		9 Employer (See Instructions) Self employed

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1. Total pages Schedule A1: not available
2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 12/17/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Saskia Mauro 6. Contributor address; City; State; ZIP Code 1001 Tennessee St San Francisco, CA 94107-3015	7. Amount of contribution (\$) \$300.00
8. Principal occupation / Job title (See Instructions) Small Business Owner		9 Employer (See Instructions) Self
4. Date 12/28/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Mark McClung 6. Contributor address; City; State; ZIP Code 4156 Kite Meadow Dr Plano, TX 75074-7778	7. Amount of contribution (\$) \$250.00
8. Principal occupation / Job title (See Instructions) Electrical Engineer		9 Employer (See Instructions) Texas Instrument
4. Date 11/12/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Anmol Mehra 6. Contributor address; City; State; ZIP Code 79 Chandler St Apt 9 Boston, MA 02116-6285	7. Amount of contribution (\$) \$50.00
8. Principal occupation / Job title (See Instructions) Student		9 Employer (See Instructions) HKS
4. Date 12/10/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Anmol Mehra 6. Contributor address; City; State; ZIP Code 79 Chandler St Apt 9 Boston, MA 02116-6285	7. Amount of contribution (\$) \$50.00
8. Principal occupation / Job title (See Instructions) Student		9 Employer (See Instructions) HKS
4. Date 09/17/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Luis Mendoza 6. Contributor address; City; State; ZIP Code 24654 Kingsland Blvd Katy, TX 77494-3386	7. Amount of contribution (\$) \$300.00
8. Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Ecuatex Investments Co.

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1. Total pages Schedule A1: not available
2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 10/15/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Luis Mendoza 6. Contributor address; City; State; ZIP Code 24654 Kingsland Blvd Katy, TX 77494-3386	7. Amount of contribution (\$) \$300.00
8. Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Ecuatex Investments Co.
4. Date 08/27/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Nhu Miller 6. Contributor address; City; State; ZIP Code 160 Panoramic Way Berkeley, CA 94704-1830	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) not employed		9 Employer (See Instructions) none
4. Date 08/27/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Thomas Miller 6. Contributor address; City; State; ZIP Code 725 Washington St # 300 Oakland, CA 94607-3924	7. Amount of contribution (\$) \$500.00
8. Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) Miller Washington & Kim
4. Date 10/22/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Thomas Miller 6. Contributor address; City; State; ZIP Code 725 Washington St # 300 Oakland, CA 94607-3924	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) Miller Washington & Kim
4. Date 11/26/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Thomas Miller 6. Contributor address; City; State; ZIP Code 725 Washington St # 300 Oakland, CA 94607-3924	7. Amount of contribution (\$) \$500.00
8. Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) Miller Washington & Kim

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1. Total pages Schedule A1: not available
2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 12/03/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Deborah Milner 6. Contributor address; City; State; ZIP Code 532 W 23rd St Houston, TX 77008-1940	7. Amount of contribution (\$) \$500.00
8. Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) Vinson & Elkins
4. Date 09/03/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Querube Montoya 6. Contributor address; City; State; ZIP Code 13566 Bullick Hollow Rd Austin, TX 78726-5004	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Financial Advisor		9 Employer (See Instructions) Capital Strategies
4. Date 09/12/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Linda Moore 6. Contributor address; City; State; ZIP Code 3318 Desert Inn Dr Montgomery, TX 77356-5350	7. Amount of contribution (\$) \$200.00
8. Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4. Date 08/27/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Wallis Nader 6. Contributor address; City; State; ZIP Code 2001 Westheimer Rd Apt 326 Houston, TX 77098-1585	7. Amount of contribution (\$) \$1,000.00
8. Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Texas Civil Rights Project
4. Date 08/20/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Daniel Peckham 6. Contributor address; City; State; ZIP Code 255 Massachusetts Ave Apt 705 Boston, MA 02115-3514	7. Amount of contribution (\$) \$50.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1. Total pages Schedule A1: not available
2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 09/17/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Daniel Peckham 6. Contributor address; City; State; ZIP Code 255 Massachusetts Ave Apt 705 Boston, MA 02115-3514	7. Amount of contribution (\$) \$50.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
4. Date 10/22/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Benjamin Peters 6. Contributor address; City; State; ZIP Code 1719 Sullins Way Houston, TX 77058-2321	7. Amount of contribution (\$) \$300.00
8. Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) NASA
4. Date 08/27/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Elisabeth N Ponce 6. Contributor address; City; State; ZIP Code 22 Orchard Hill Ln Greenwich, CT 06831-3626	7. Amount of contribution (\$) \$300.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
4. Date 08/27/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Elisabeth N Ponce 6. Contributor address; City; State; ZIP Code 22 Orchard Hill Ln Greenwich, CT 06831-3626	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
4. Date 08/27/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Irene Ponce 6. Contributor address; City; State; ZIP Code 22 Orchard Hill Ln Greenwich, CT 06831-3626	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1. Total pages Schedule A1: not available
2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 11/19/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Joseph Quackenbush 6. Contributor address; City; State; ZIP Code 600 E 97th St Apt 201 Inglewood, CA 90301-4394	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Reliability Engineer		9 Employer (See Instructions) PBF Energy- Torrance Refinery
4. Date 09/10/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Putsata Reang 6. Contributor address; City; State; ZIP Code 1115 SW 166th St Burien, WA 98166-2950	7. Amount of contribution (\$) \$500.00
8. Principal occupation / Job title (See Instructions) Self-employed		9 Employer (See Instructions) Self
4. Date 08/13/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Otis Reid 6. Contributor address; City; State; ZIP Code 60 Bishop Richard Allen Dr Cambridge, MA 02139-3418	7. Amount of contribution (\$) \$50.00
8. Principal occupation / Job title (See Instructions) MIT		9 Employer (See Instructions) Student
4. Date 10/22/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Otis Reid 6. Contributor address; City; State; ZIP Code 60 Bishop Richard Allen Dr Cambridge, MA 02139-3418	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) MIT		9 Employer (See Instructions) Student
4. Date 12/24/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Margot Riemer 6. Contributor address; City; State; ZIP Code 3811 Mound View Ave Studio City, CA 91604-3631	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed

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MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A1: not available
2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 11/05/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Matt Rogers 6. Contributor address; City; State; ZIP Code 65 Montclair Ter San Francisco, CA 94109-1517	7. Amount of contribution (\$) \$10,000.00
8. Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Google
4. Date 10/29/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Danielle Rossoni 6. Contributor address; City; State; ZIP Code 2518 29th Ave San Francisco, CA 94116-2928	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Operations Management		9 Employer (See Instructions) People Rocket LLC
4. Date 12/24/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Neal Sarkar 6. Contributor address; City; State; ZIP Code 1412 Marshall St Houston, TX 77006-4265	7. Amount of contribution (\$) \$500.00
8. Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) AZA
4. Date 10/01/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Max Schoening 6. Contributor address; City; State; ZIP Code 2307 Scott St San Francisco, CA 94115-1723	7. Amount of contribution (\$) \$300.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
4. Date 11/12/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Ricky Sharma 6. Contributor address; City; State; ZIP Code 1560 3rd St Apt 608 San Francisco, CA 94158-2311	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A1: not available
2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 12/29/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Harry Shoening 6. Contributor address; City; State; ZIP Code 2307 Scott St San Francisco, CA 94115-1723	7. Amount of contribution (\$) \$1,000.00
8. Principal occupation / Job title (See Instructions) Managing Director		9 Employer (See Instructions) Jones Lang LaSalle
4. Date 09/24/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Michael Singley 6. Contributor address; City; State; ZIP Code 7726 Lakewood Dr Austin, TX 78750-8104	7. Amount of contribution (\$) \$250.00
8. Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Edwards Law
4. Date 12/31/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Pamela Sutherland 6. Contributor address; City; State; ZIP Code 3133 Connecticut Ave NW Apt 711 Washington, DC 20008-5109	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) lawyer		9 Employer (See Instructions) self
4. Date 10/30/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Michelle Swotinsky 6. Contributor address; City; State; ZIP Code 21 Raymond Rd Sudbury, MA 01776-3444	7. Amount of contribution (\$) \$200.00
8. Principal occupation / Job title (See Instructions) Director, Medical Writing		9 Employer (See Instructions) Alexion Pharmaceuticals, Inc.
4. Date 09/03/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Kingston Tam 6. Contributor address; City; State; ZIP Code 435 Steiner St San Francisco, CA 94117-2520	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Product Manager		9 Employer (See Instructions) Google

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A1: not available
2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 08/13/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Mari Tanabe 6. Contributor address; City; State; ZIP Code 4675 W 37th Ave Apt B305 Denver, CO 80212-2193	7. Amount of contribution (\$) \$200.00
8. Principal occupation / Job title (See Instructions) Program and Membership Manager		9 Employer (See Instructions) Colorado Association of Funders
4. Date 12/17/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Jennifer Tanner 6. Contributor address; City; State; ZIP Code PO Box 2265 Sedona, AZ 86339-2265	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) consultant		9 Employer (See Instructions) self
4. Date 10/19/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Patricia Villamizar 6. Contributor address; City; State; ZIP Code 14438 Kingston Cove Ln Houston, TX 77077-3544	7. Amount of contribution (\$) \$60.00
8. Principal occupation / Job title (See Instructions) Housewife		9 Employer (See Instructions) N/A
4. Date 08/27/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Jacob Viola 6. Contributor address; City; State; ZIP Code 132 Brindle Cir South Portland, ME 04106-6864	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
4. Date 08/13/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Fatima Wagdy 6. Contributor address; City; State; ZIP Code 450 Massachusetts Ave NW Apt 508 Washington, DC 20001-6209	7. Amount of contribution (\$) \$500.00
8. Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Booz Allen Hamilton

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

201884

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A1: not available
2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 11/29/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Leslie Walker 6. Contributor address; City; State; ZIP Code 126 Commonwealth Ave San Francisco, CA 94118-2604	7. Amount of contribution (\$) \$500.00
8. Principal occupation / Job title (See Instructions) Community Volunteer		9 Employer (See Instructions) Self employed
4. Date 11/12/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Kevin Wan 6. Contributor address; City; State; ZIP Code 5660 Glen Haven Ct San Jose, CA 95129-4101	7. Amount of contribution (\$) \$250.00
8. Principal occupation / Job title (See Instructions) Education		9 Employer (See Instructions) SJUSD
4. Date 08/13/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Cole Wheeler 6. Contributor address; City; State; ZIP Code 600 Pollard Park Williamsburg, VA 23185-4033	7. Amount of contribution (\$) \$150.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
4. Date 12/17/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Charlotte Winton 6. Contributor address; City; State; ZIP Code 3905 Clay St San Francisco, CA 94118-1623	7. Amount of contribution (\$) \$250.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
4. Date 09/03/2017	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Alina Xu 6. Contributor address; City; State; ZIP Code 1550 Cambridge St Apt 2 Cambridge, MA 02139-1036	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A2: not available	
2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)	
4. TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$0.00	
5 Date 11/08/2017	6 Full name of contributor Sandra Bustamante <input type="checkbox"/> out-of-state PAC 7 Contributor address; City; State; Zip Code 1701 Hermann Dr Houston, TX 77004-7452	8 Amount of contribution (\$) \$514.10 <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T	9 In-Kind contribution description Airfare
10 Principal occupation / Job Title (FOR NON-JUDICIAL) (See Instructions) Not Employed		11 Employer (FOR NON-JUDICIAL) (See Instructions) Not Employed	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parents (if any) (FOR JUDICIAL)			
5 Date 12/03/2017	6 Full name of contributor Sandra Bustamante <input type="checkbox"/> out-of-state PAC 7 Contributor address; City; State; Zip Code 1701 Hermann Dr Houston, TX 77004-7452	8 Amount of contribution (\$) \$391.61 <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T	9 In-Kind contribution description Airfare
10 Principal occupation / Job Title (FOR NON-JUDICIAL) (See Instructions) Not Employed		11 Employer (FOR NON-JUDICIAL) (See Instructions) Not Employed	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parents (if any) (FOR JUDICIAL)			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A2: not available	
2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)	
4. TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$0.00	
5 Date 08/08/2017	6 Full name of contributor Christina Ha 7 Contributor address; City; State; Zip Code 3507 Bryant St Palo Alto, CA 94306-4263 <input type="checkbox"/> out-of-state PAC	8 Amount of contribution (\$) \$500.00 <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T	9 In-Kind contribution description Campaign Logo Design
10 Principal occupation / Job Title (FOR NON-JUDICIAL) (See Instructions) Product Manager		11 Employer (FOR NON-JUDICIAL) (See Instructions) World Evermore	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parents (if any) (FOR JUDICIAL)			
5 Date 12/11/2017	6 Full name of contributor David James 7 Contributor address; City; State; Zip Code 6430 Meadowcreek Dr Dallas, TX 75254-7832 <input type="checkbox"/> out-of-state PAC	8 Amount of contribution (\$) \$139.20 <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T	9 In-Kind contribution description Airfare
10 Principal occupation / Job Title (FOR NON-JUDICIAL) (See Instructions) Attorney		11 Employer (FOR NON-JUDICIAL) (See Instructions) Edwards Law	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parents (if any) (FOR JUDICIAL)			

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

201884

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A2: not available	
2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)	
4. TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$0.00	
5 Date 10/30/2017	6 Full name of contributor <input type="checkbox"/> out-of-state PAC Carlos Montanez	8 Amount of contribution (\$) \$100.00	9 In-Kind contribution description Accounting Services
7 Contributor address; City; State; Zip Code 6819 Oakbranch Manor Ln Richmond, TX 77407-8541		<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T	
10 Principal occupation / Job Title (FOR NON-JUDICIAL) (See Instructions) Certified Public Accountant		11 Employer (FOR NON-JUDICIAL) (See Instructions) Avangard Innovative	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parents (if any) (FOR JUDICIAL)			
5 Date 08/08/2017	6 Full name of contributor <input type="checkbox"/> out-of-state PAC F. Carter Smith	8 Amount of contribution (\$) \$550.00	9 In-Kind contribution description Photoshoot and Post-production
7 Contributor address; City; State; Zip Code 2000 Edwards St Ste 203 Houston, TX 77007-4433		<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T	
10 Principal occupation / Job Title (FOR NON-JUDICIAL) (See Instructions) Photographer		11 Employer (FOR NON-JUDICIAL) (See Instructions) Self employed	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parents (if any) (FOR JUDICIAL)			

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1. Total pages Schedule E: not available	
2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)	
4. TOTAL OF UNITEMIZED LOANS		\$0.00	
5. Date of loan 08/01/2017	7. Name of lender Lina Hidalgo <input type="checkbox"/> out-of-state PAC	9. Loan Amount \$300.00	
6 Is lender a financial Institution? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	8. Lender address; City; State; ZIP Code 1701 Hermann Dr Houston, TX 77004-7452	10. Interest rate 0.00%	
		11. Maturity date	
12. Principal occupation / Job title (See Instructions) Researcher		13 Employer (See Instructions) Program on Criminal Justice	
14. Description of Collateral <input checked="" type="checkbox"/> none		15 Check if personal funds were deposited into political account <input checked="" type="checkbox"/>	
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor 18 Guarantor address; City; State; ZIP Code	19 Amount Guaranteed (\$)	
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)	
5. Date of loan 09/30/2017	7. Name of lender Lina Hidalgo <input type="checkbox"/> out-of-state PAC	9. Loan Amount \$1,100.00	
6 Is lender a financial Institution? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	8. Lender address; City; State; ZIP Code 1701 Hermann Dr Houston, TX 77004-7452	10. Interest rate 0.00%	
		11. Maturity date	
12. Principal occupation / Job title (See Instructions) Researcher		13 Employer (See Instructions) Program on Criminal Justice	
14. Description of Collateral <input checked="" type="checkbox"/> none		15 Check if personal funds were deposited into political account <input checked="" type="checkbox"/>	
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor 18 Guarantor address; City; State; ZIP Code	19 Amount Guaranteed (\$)	
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)	

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

201884

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Office Overhead/Rental	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Polling Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Printing Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Travel Out of District
Credit Card Payment	Legal Services		Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Lina M. Hidalgo	3. Filer ID (Ethics Commission Filers)
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4 Date 08/06/2017	5 Payee name ActBlue Technical Services, Inc.
6 Amount \$9.96	7 Payee address; City; State; Zip Code 14 Arrow St Ste 11 Cambridge, MA 02138-5106
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees (b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held

4 Date 08/13/2017	5 Payee name ActBlue Technical Services, Inc.
6 Amount \$105.34	7 Payee address; City; State; Zip Code 14 Arrow St Ste 11 Cambridge, MA 02138-5106
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees (b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held

4 Date 08/20/2017	5 Payee name ActBlue Technical Services, Inc.
6 Amount \$116.77	7 Payee address; City; State; Zip Code 14 Arrow St Ste 11 Cambridge, MA 02138-5106
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees (b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

201884

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Lina M. Hidalgo	3. Filer ID (Ethics Commission Filers)
4 Date 08/27/2017	5 Payee name ActBlue Technical Services, Inc.	
6 Amount \$116.56	7 Payee address; City; State: Zip Code 14 Arrow St Ste 11 Cambridge, MA 02138-5106	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 09/03/2017	5 Payee name ActBlue Technical Services, Inc.	
6 Amount \$13.83	7 Payee address; City; State: Zip Code 14 Arrow St Ste 11 Cambridge, MA 02138-5106	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 09/10/2017	5 Payee name ActBlue Technical Services, Inc.	
6 Amount \$39.71	7 Payee address; City; State: Zip Code 14 Arrow St Ste 11 Cambridge, MA 02138-5106	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

201884

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Lina M. Hidalgo	3. Filer ID (Ethics Commission Filers)
4 Date 09/17/2017	5 Payee name ActBlue Technical Services, Inc.	
6 Amount \$119.11	7 Payee address; City; State: Zip Code 14 Arrow St Ste 11 Cambridge, MA 02138-5106	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 09/24/2017	5 Payee name ActBlue Technical Services, Inc.	
6 Amount \$134.31	7 Payee address; City; State: Zip Code 14 Arrow St Ste 11 Cambridge, MA 02138-5106	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 09/30/2017	5 Payee name ActBlue Technical Services, Inc.	
6 Amount \$79.01	7 Payee address; City; State: Zip Code 14 Arrow St Ste 11 Cambridge, MA 02138-5106	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

201884

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The instruction Guide explains how to complete this form.

1. Total pages Schedule F1:		2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)	
4 Date 10/01/2017		5 Payee name ActBlue Technical Services, Inc.			
6 Amount \$12.84		7 Payee address; City; State: Zip Code 14 Arrow St Ste 11 Cambridge, MA 02138-5106			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fee	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
4 Date 10/08/2017		5 Payee name ActBlue Technical Services, Inc.			
6 Amount \$47.43		7 Payee address; City; State: Zip Code 14 Arrow St Ste 11 Cambridge, MA 02138-5106			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fee	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
4 Date 10/15/2017		5 Payee name ActBlue Technical Services, Inc.			
6 Amount \$116.53		7 Payee address; City; State: Zip Code 14 Arrow St Ste 11 Cambridge, MA 02138-5106			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fee	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

201884

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Lina M. Hidalgo	3. Filer ID (Ethics Commission Filers)
4 Date 10/22/2017	5 Payee name ActBlue Technical Services, Inc.	
6 Amount \$52.56	7 Payee address; City; State; Zip Code 14 Arrow St Ste 11 Cambridge, MA 02138-5106	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 10/29/2017	5 Payee name ActBlue Technical Services, Inc.	
6 Amount \$40.34	7 Payee address; City; State; Zip Code 14 Arrow St Ste 11 Cambridge, MA 02138-5106	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 11/05/2017	5 Payee name ActBlue Technical Services, Inc.	
6 Amount \$430.16	7 Payee address; City; State; Zip Code 14 Arrow St Ste 11 Cambridge, MA 02138-5106	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Lina M. Hidalgo	3. Filer ID (Ethics Commission Filers)
4 Date 11/12/2017	5 Payee name ActBlue Technical Services, Inc.	
6 Amount \$51.77	7 Payee address; City: State: Zip Code 14 Arrow St Ste 11 Cambridge, MA 02138-5106	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 11/19/2017	5 Payee name ActBlue Technical Services, Inc.	
6 Amount \$10.08	7 Payee address; City: State: Zip Code 14 Arrow St Ste 11 Cambridge, MA 02138-5106	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 11/26/2017	5 Payee name ActBlue Technical Services, Inc.	
6 Amount \$21.73	7 Payee address; City: State: Zip Code 14 Arrow St Ste 11 Cambridge, MA 02138-5106	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

201884

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Office Overhead/Rental	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Polling Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Printing Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Travel Out of District
Credit Card Payment	Legal Services		Other (enter a category not listed above)
The instruction Guide explains how to complete this form.			
1. Total pages Schedule F1:	2. FILER NAME Lina M. Hidalgo	3. Filer ID (Ethics Commission Filers)	
4 Date 12/03/2017	5 Payee name ActBlue Technical Services, Inc.		
6 Amount \$65.18	7 Payee address; 14 Arrow St Ste 11 Cambridge, MA 02138-5106	City; Cambridge, MA	State: MA Zip Code 02138-5106
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 Credit Card Processing Fee	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4 Date 12/10/2017	5 Payee name ActBlue Technical Services, Inc.		
6 Amount \$4.76	7 Payee address; 14 Arrow St Ste 11 Cambridge, MA 02138-5106	City; Cambridge, MA	State: MA Zip Code 02138-5106
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 Credit Card Processing Fee	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4 Date 12/17/2017	5 Payee name ActBlue Technical Services, Inc.		
6 Amount \$101.15	7 Payee address; 14 Arrow St Ste 11 Cambridge, MA 02138-5106	City; Cambridge, MA	State: MA Zip Code 02138-5106
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 Credit Card Processing Fee	
9 Complete ONLY 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

201884

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)
4 Date 12/24/2017	5 Payee name ActBlue Technical Services, Inc.		
6 Amount \$27.27	7 Payee address; 14 Arrow St Ste 11 Cambridge, MA 02138-5106	City; Cambridge, MA	State: Zip Code
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 Credit Card Processing Fees	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4 Date 12/31/2017	5 Payee name ActBlue Technical Services, Inc.		
6 Amount \$120.90	7 Payee address; 14 Arrow St Ste 11 Cambridge, MA 02138-5106	City; Cambridge, MA	State: Zip Code
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 Credit Card Processing Fees	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4 Date 12/12/2017	5 Payee name Administrative Business Services, LLC		
6 Amount \$1,280.00	7 Payee address; 10205 Atkins Ridge Dr Charlotte, NC 28213-4290	City; Charlotte, NC	State: Zip Code
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 Accounting Services	
9 Complete ONLY 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

201884

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)
4 Date 08/31/2017	5 Payee name Myla Bell		
6 Amount \$3,000.00	7 Payee address; 1103 Nadine St Houston, TX 77009-2444	City; Houston, TX	State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4 Date 09/04/2017	5 Payee name Myla Bell		
6 Amount \$183.44	7 Payee address; 1103 Nadine St Houston, TX 77009-2444	City; Houston, TX	State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4 Date 09/08/2017	5 Payee name Myla Bell		
6 Amount \$700.00	7 Payee address; 1103 Nadine St Houston, TX 77009-2444	City; Houston, TX	State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor	
9 Complete ONLY 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	Event Expense	Office Overhead/Rental	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Polling Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Printing Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Travel Out of District
Credit Card Payment	Legal Services		Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)
4 Date 10/06/2017	5 Payee name Kristopher Black		
6 Amount \$100.00	7 Payee address; 3606 Park Bank Ct Houston, TX 77068-1835	City;	State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4 Date 10/24/2017	5 Payee name Kristopher Black		
6 Amount \$100.00	7 Payee address; 3606 Park Bank Ct Houston, TX 77068-1835	City;	State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4 Date 12/11/2017	5 Payee name Kristopher Black		
6 Amount \$216.50	7 Payee address; 3606 Park Bank Ct Houston, TX 77068-1835	City;	State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor	
9 Complete ONLY 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

Office Overhead/Rental
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:	2. FILER NAME Lina M. Hidalgo	3. Filer ID (Ethics Commission Filers)
4 Date 11/13/2017	5 Payee name Carroll Printing Company	
6 Amount \$182.94	7 Payee address; City: State: Zip Code 2907 Canal St Houston, TX 77003-1624	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Printing 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 Printing and Reproduction
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 11/30/2017	5 Payee name Cindy Castelblanco	
6 Amount \$144.00	7 Payee address; City: State: Zip Code 19602 Franz Rd Houston, TX 77084-5206	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/15/2017	5 Payee name Cindy Castelblanco	
6 Amount \$73.80	7 Payee address; City: State: Zip Code 19602 Franz Rd Houston, TX 77084-5206	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor
9 Complete ONLY 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

201884

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

Office Overhead/Rental
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:		2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)	
4 Date 10/06/2017		5 Payee name Cognitive Campaigns			
6 Amount \$1,250.00		7 Payee address; City: State: Zip Code 2406 Wyckchester Dr Pearland, TX 77584-5967			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
4 Date 10/15/2017		5 Payee name Cognitive Campaigns			
6 Amount \$1,250.00		7 Payee address; City: State: Zip Code 2406 Wyckchester Dr Pearland, TX 77584-5967			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
4 Date 09/04/2017		5 Payee name Corinthian Real Estate Inc.			
6 Amount \$400.00		7 Payee address; City: State: Zip Code 1215 Durham Dr Houston, TX 77007-5409			
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 Rent	
9 Complete ONLY 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

201884

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

Office Overhead/Rental
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:		2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)	
4 Date 09/19/2017		5 Payee name Corinthian Real Estate Inc.			
6 Amount \$253.33		7 Payee address; City; State: Zip Code 1215 Durham Dr Houston, TX 77007-5409			
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 Rent	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
4 Date 08/31/2017		5 Payee name Kathleen Da Silva			
6 Amount \$837.50		7 Payee address; City; State: Zip Code 109 Mockingbird Dr North Kingstown, RI 02852-6436			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
4 Date 09/18/2017		5 Payee name Kathleen Da Silva			
6 Amount \$50.00		7 Payee address; City; State: Zip Code 109 Mockingbird Dr North Kingstown, RI 02852-6436			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor	
9 Complete ONLY 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

201884

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)
4 Date 11/16/2017	5 Payee name Kathleen Da Silva		
6 Amount \$50.00	7 Payee address; City: State: Zip Code 109 Mockingbird Dr North Kingstown, RI 02852-6436		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4 Date 11/15/2017	5 Payee name Alyssa Davis		
6 Amount \$120.00	7 Payee address; City: State: Zip Code 3000 Connecticut Ave NW Apt 121 Washington, DC 20008-2551		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4 Date 09/15/2017	5 Payee name Democratic GAIN		
6 Amount \$50.00	7 Payee address; City: State: Zip Code 1850 M St NW Ste 1100 Washington, DC 20036-5845		
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 Recruitment	
9 Complete ONLY 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

201884

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)
4 Date 09/18/2017	5 Payee name Democratic GAIN		
6 Amount \$100.00	7 Payee address; 1850 M St NW Ste 1100 Washington, DC 20036-5845	City;	State: Zip Code
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 Recruitment	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4 Date 10/19/2017	5 Payee name Facebook		
6 Amount \$25.18	7 Payee address; 1 Hacker Way Menlo Park, CA 94025-1456	City;	State: Zip Code
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 and Marketing	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4 Date 10/23/2017	5 Payee name Facebook		
6 Amount \$50.05	7 Payee address; 1 Hacker Way Menlo Park, CA 94025-1456	City;	State: Zip Code
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 and Marketing	
9 Complete ONLY 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

201884

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:		2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)	
4 Date 11/01/2017		5 Payee name Facebook			
6 Amount \$24.72		7 Payee address; City; State: Zip Code 1 Hacker Way Menlo Park, CA 94025-1456			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Advertising Expense		(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 and Marketing	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
4 Date 12/01/2017		5 Payee name Facebook			
6 Amount \$56.54		7 Payee address; City; State: Zip Code 1 Hacker Way Menlo Park, CA 94025-1456			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Advertising Expense		(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 and Marketing	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
4 Date 10/15/2017		5 Payee name Savannah Fritz			
6 Amount \$1,050.00		7 Payee address; City; State: Zip Code 925 S 8th St Apt 1 Philadelphia, PA 19147-3938			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor	
9 Complete ONLY 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

201884

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

Office Overhead/Rental
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:		2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)	
4 Date 10/02/2017		5 Payee name Google			
6 Amount \$23.15		7 Payee address; City: State: Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043-1351			
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 Campaign Email	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
4 Date 11/02/2017		5 Payee name Google			
6 Amount \$42.25		7 Payee address; City: State: Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043-1351			
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 Campaign Email	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
4 Date 12/04/2017		5 Payee name Google			
6 Amount \$38.55		7 Payee address; City: State: Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043-1351			
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 Campaign Email	
9 Complete ONLY 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

Office Overhead/Rental
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:	2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)
4 Date 09/29/2017	5 Payee name Jason Haas		
6 Amount \$650.00	7 Payee address; City; State; Zip Code 6711 Stearns St Houston, TX 77021-2419		
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 Video	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4 Date 10/23/2017	5 Payee name Jason Haas		
6 Amount \$100.00	7 Payee address; City; State; Zip Code 6711 Stearns St Houston, TX 77021-2419		
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 Video	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4 Date 11/22/2017	5 Payee name Jason Haas		
6 Amount \$757.17	7 Payee address; City; State; Zip Code 6711 Stearns St Houston, TX 77021-2419		
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 Video	
9 Complete ONLY 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

201884

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Office Overhead/Rental	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Polling Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Printing Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Travel Out of District
Credit Card Payment	Legal Services		Other (enter a category not listed above)

The instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Lina M. Hidalgo	3. Filer ID (Ethics Commission Filers)
4 Date 10/31/2017	5 Payee name Harris County Democratic Party	
6 Amount \$1,250.00	7 Payee address; City: State: Zip Code 1445 North Loop W Ste 110 Houston, TX 77008-1654	
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 Registration Fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 10/20/2017	5 Payee name J&N Enterprises	
6 Amount \$163.00	7 Payee address; City: State: Zip Code 2015 W 34th St Houston, TX 77018-6139	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Printing 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 Printing and Reproduction
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 11/20/2017	5 Payee name J&N Enterprises	
6 Amount \$65.00	7 Payee address; City: State: Zip Code 2015 W 34th St Houston, TX 77018-6139	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Printing 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 Printing and Reproduction
9 Complete ONLY 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

201884

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

Office Overhead/Rental
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:		2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)	
4 Date 11/24/2017		5 Payee name J&N Enterprises			
6 Amount \$85.00		7 Payee address; 2015 W 34th St Houston, TX 77018-6139		City; State: Zip Code	
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Printing 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 Printing and Reproduction	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
4 Date 12/01/2017		5 Payee name J&N Enterprises			
6 Amount \$389.00		7 Payee address; 2015 W 34th St Houston, TX 77018-6139		City; State: Zip Code	
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Printing 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 Printing and Reproduction	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
4 Date 11/30/2017		5 Payee name Antron Johnson			
6 Amount \$500.00		7 Payee address; 2400 S Loop W Apt 413 Houston, TX 77054-2820		City; State: Zip Code	
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor	
9 Complete ONLY 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

201884

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Lina M. Hidalgo	3. Filer ID (Ethics Commission Filers)
4 Date 09/04/2017	5 Payee name KCM Consulting	
6 Amount \$2,500.00	7 Payee address; City; State; Zip Code 267 Gleaner Chapel Rd North Scituate, RI 02857-1207	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 11/04/2017	5 Payee name Mehran H Khodabandeh	
6 Amount \$2,250.00	7 Payee address; City; State; Zip Code 27 Franciscan Way Kensington, CA 94707-1112	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/15/2017	5 Payee name Mehran H Khodabandeh	
6 Amount \$1,250.00	7 Payee address; City; State; Zip Code 27 Franciscan Way Kensington, CA 94707-1112	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor
9 Complete ONLY 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

201884

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The instruction Guide explains how to complete this form.

1. Total pages Schedule F1:		2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)	
4 Date 09/30/2017		5 Payee name Shaniqua McClendon			
6 Amount \$743.55		7 Payee address; City; State: Zip Code 54 Foster St Cambridge, MA 02138-4817			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
4 Date 09/30/2017		5 Payee name Mariah Najmuddin			
6 Amount \$102.60		7 Payee address; City; State: Zip Code 16027 Cypress Farms Dr Cypress, TX 77429-7401			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
4 Date 10/15/2017		5 Payee name Mariah Najmuddin			
6 Amount \$109.00		7 Payee address; City; State: Zip Code 16027 Cypress Farms Dr Cypress, TX 77429-7401			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor	
9 Complete ONLY 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

Office Overhead/Rental
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:	2. FILER NAME Lina M. Hidalgo	3. Filer ID (Ethics Commission Filers)
4 Date 10/31/2017	5 Payee name Mariah Najmuddin	
6 Amount \$168.75	7 Payee address; City; State: Zip Code 16027 Cypress Farms Dr Cypress, TX 77429-7401	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 11/15/2017	5 Payee name Mariah Najmuddin	
6 Amount \$243.75	7 Payee address; City; State: Zip Code 16027 Cypress Farms Dr Cypress, TX 77429-7401	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 11/30/2017	5 Payee name Mariah Najmuddin	
6 Amount \$266.25	7 Payee address; City; State: Zip Code 16027 Cypress Farms Dr Cypress, TX 77429-7401	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor
9 Complete ONLY 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

201884

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Lina M. Hidalgo	3. Filer ID (Ethics Commission Filers)
4 Date 12/15/2017	5 Payee name Mariah Najmuddin	
6 Amount \$243.75	7 Payee address; City: State: Zip Code 16027 Cypress Farms Dr Cypress, TX 77429-7401	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 09/06/2017	5 Payee name Nationbuilder	
6 Amount \$29.00	7 Payee address; City: State: Zip Code 520 S Grand Ave Los Angeles, CA 90071-2600	
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 Website
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 10/06/2017	5 Payee name Nationbuilder	
6 Amount \$179.00	7 Payee address; City: State: Zip Code 520 S Grand Ave Los Angeles, CA 90071-2600	
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 Mass Email
9 Complete ONLY 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

201884

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

Office Overhead/Rental
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:	2. FILER NAME Lina M. Hidalgo	3. Filer ID (Ethics Commission Filers)
4 Date 11/06/2017	5 Payee name Nationbuilder	
6 Amount \$179.00	7 Payee address; City; State; Zip Code 520 S Grand Ave Los Angeles, CA 90071-2600	
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 Mass Email
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/06/2017	5 Payee name Nationbuilder	
6 Amount \$29.00	7 Payee address; City; State; Zip Code 520 S Grand Ave Los Angeles, CA 90071-2600	
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 Website
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 10/02/2017	5 Payee name NGP VAN	
6 Amount \$150.00	7 Payee address; City; State; Zip Code 1445 New York Ave NW Ste 200 Washington, DC 20005-2158	
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 Compliance Software
9 Complete ONLY 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

201884

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

Office Overhead/Rental
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:	2. FILER NAME Lina M. Hidalgo	3. Filer ID (Ethics Commission Filers)
4 Date 11/02/2017	5 Payee name NGP VAN	
6 Amount \$150.00	7 Payee address; City; State: Zip Code 1445 New York Ave NW Ste 200 Washington, DC 20005-2158	
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 Compliance Software
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 11/20/2017	5 Payee name NGP VAN	
6 Amount \$170.00	7 Payee address; City; State: Zip Code 1445 New York Ave NW Ste 200 Washington, DC 20005-2158	
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 Compliance Software
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/04/2017	5 Payee name NGP VAN	
6 Amount \$150.00	7 Payee address; City; State: Zip Code 1445 New York Ave NW Ste 200 Washington, DC 20005-2158	
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 Compliance Software
9 Complete ONLY 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	Event Expense	Office Overhead/Rental	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Polling Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Printing Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Travel Out of District
Credit Card Payment	Legal Services		Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Lina M. Hidalgo	3. Filer ID (Ethics Commission Filers)
4 Date 12/12/2017	5 Payee name NGP VAN	
6 Amount \$170.00	7 Payee address; City: State: Zip Code 1445 New York Ave NW Ste 200 Washington, DC 20005-2158	
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 Compliance Software
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 09/18/2017	5 Payee name Rory Payne	
6 Amount \$318.67	7 Payee address; City: State: Zip Code 44 Martin St Cambridge, MA 02138-1617	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 09/30/2017	5 Payee name Rory Payne	
6 Amount \$361.12	7 Payee address; City: State: Zip Code 44 Martin St Cambridge, MA 02138-1617	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor
9 Complete ONLY 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

201884

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Office Overhead/Rental	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Polling Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Printing Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Travel Out of District
Credit Card Payment	Legal Services		Other (enter a category not listed above)
The Instruction Guide explains how to complete this form.			
1. Total pages Schedule F1:	2. FILER NAME Lina M. Hidalgo	3. Filer ID (Ethics Commission Filers)	
4 Date 10/15/2017	5 Payee name Rory Payne		
6 Amount \$304.80	7 Payee address; City; State; Zip Code 44 Martin St Cambridge, MA 02138-1617		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
4 Date 10/31/2017	5 Payee name Rory Payne		
6 Amount \$224.00	7 Payee address; City; State; Zip Code 44 Martin St Cambridge, MA 02138-1617		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
4 Date 11/15/2017	5 Payee name Rory Payne		
6 Amount \$48.00	7 Payee address; City; State; Zip Code 44 Martin St Cambridge, MA 02138-1617		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Lina M. Hidalgo	3. Filer ID (Ethics Commission Filers)
4 Date 10/31/2017	5 Payee name Nicola E Portz	
6 Amount \$1,000.00	7 Payee address; City; State; Zip Code 4400 Memorial Dr Apt 3044 Houston, TX 77007-7389	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 11/20/2017	5 Payee name Nicola E Portz	
6 Amount \$1,000.00	7 Payee address; City; State; Zip Code 4400 Memorial Dr Apt 3044 Houston, TX 77007-7389	
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 Contract Labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 11/30/2017	5 Payee name Nicola E Portz	
6 Amount \$1,000.00	7 Payee address; City; State; Zip Code 4400 Memorial Dr Apt 3044 Houston, TX 77007-7389	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

201884

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

Office Overhead/Rental
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:	2. FILER NAME Lina M. Hidalgo	3. Filer ID (Ethics Commission Filers)
4 Date 12/15/2017	5 Payee name Nicola E Portz	
6 Amount \$312.90	7 Payee address; City: State: Zip Code 4400 Memorial Dr Apt 3044 Houston, TX 77007-7389	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 09/30/2017	5 Payee name Dynisha Randle	
6 Amount \$210.00	7 Payee address; City: State: Zip Code 917 Pinckney St Houston, TX 77009-8616	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 10/15/2017	5 Payee name Dynisha Randle	
6 Amount \$450.00	7 Payee address; City: State: Zip Code 917 Pinckney St Houston, TX 77009-8616	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

201884

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:		2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)	
4 Date 10/31/2017		5 Payee name Dynisha Randle			
6 Amount \$1,050.00		7 Payee address; City; State; Zip Code 917 Pinckney St Houston, TX 77009-8616			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
4 Date 11/15/2017		5 Payee name Dynisha Randle			
6 Amount \$1,250.00		7 Payee address; City; State; Zip Code 917 Pinckney St Houston, TX 77009-8616			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
4 Date 11/30/2017		5 Payee name Dynisha Randle			
6 Amount \$1,250.00		7 Payee address; City; State; Zip Code 917 Pinckney St Houston, TX 77009-8616			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor	
9 Complete ONLY 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

201884

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Lina M. Hidalgo	3. Filer ID (Ethics Commission Filers)
4 Date 12/13/2017	5 Payee name Dynisha Randle	
6 Amount \$1,250.00	7 Payee address; City; State: Zip Code 917 Pinckney St Houston, TX 77009-8616	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/28/2017	5 Payee name Dynisha Randle	
6 Amount \$1,250.00	7 Payee address; City; State: Zip Code 917 Pinckney St Houston, TX 77009-8616	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 10/15/2017	5 Payee name Redshift Writers LLC	
6 Amount \$1,100.00	7 Payee address; City; State: Zip Code 2744 Briarhurst Dr Apt 12 Houston, TX 77057-5317	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor
9 Complete ONLY 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

Office Overhead/Rental
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:	2. FILER NAME Lina M. Hidalgo	3. Filer ID (Ethics Commission Filers)
4 Date 09/20/2017	5 Payee name Carroll Robinson	
6 Amount \$1,500.00	7 Payee address; City; State; Zip Code 3401 Prospect St Houston, TX 77004-7811	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 10/31/2017	5 Payee name Carroll Robinson	
6 Amount \$750.00	7 Payee address; City; State; Zip Code 3401 Prospect St Houston, TX 77004-7811	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/12/2017	5 Payee name Carroll Robinson	
6 Amount \$750.00	7 Payee address; City; State; Zip Code 3401 Prospect St Houston, TX 77004-7811	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor
9 Complete ONLY 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

201884

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

Office Overhead/Rental
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:	2. FILER NAME Lina M. Hidalgo	3. Filer ID (Ethics Commission Filers)
4 Date 09/18/2017	5 Payee name David Sorensen	
6 Amount \$315.00	7 Payee address; City: State: Zip Code 2718 Meadowcreek Dr Missouri City, TX 77459-2628	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 09/30/2017	5 Payee name David Sorensen	
6 Amount \$1,050.00	7 Payee address; City: State: Zip Code 2718 Meadowcreek Dr Missouri City, TX 77459-2628	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 10/15/2017	5 Payee name David Sorensen	
6 Amount \$406.45	7 Payee address; City: State: Zip Code 2718 Meadowcreek Dr Missouri City, TX 77459-2628	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor
9 Complete ONLY 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

201884

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)
4 Date 10/31/2017	5 Payee name Southwest Airlines		
6 Amount \$1,485.92	7 Payee address; 2702 Love Field Dr Dallas, TX 75235-1908	City; Dallas	State: Zip Code TX 75235
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Travel Out Of District	(b) Description <input checked="" type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Airfare	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4 Date 10/31/2017	5 Payee name Texas Workforce Commission		
6 Amount \$190.42	7 Payee address; 101 E 15th St Rm 122 Austin, TX 78778-1442	City; Austin	State: Zip Code TX 78778
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll Taxes	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4 Date 09/18/2017	5 Payee name Sean Walker		
6 Amount \$123.00	7 Payee address; 4222 Luckenbach Rd San Antonio, TX 78251-4306	City; San Antonio	State: Zip Code TX 78251
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor	
9 Complete ONLY 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

201884

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

Office Overhead/Rental
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:		2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)	
4 Date 09/30/2017		5 Payee name Sean Walker			
6 Amount \$72.00		7 Payee address; City; State; Zip Code 4222 Luckenbach Rd San Antonio, TX 78251-4306			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
4 Date 10/15/2017		5 Payee name Sean Walker			
6 Amount \$165.00		7 Payee address; City; State; Zip Code 4222 Luckenbach Rd San Antonio, TX 78251-4306			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
4 Date 10/31/2017		5 Payee name Sean Walker			
6 Amount \$105.00		7 Payee address; City; State; Zip Code 4222 Luckenbach Rd San Antonio, TX 78251-4306			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor	
9 Complete ONLY 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

201884

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Lina M. Hidalgo	3. Filer ID (Ethics Commission Filers)
4 Date 11/15/2017	5 Payee name Sean Walker	
6 Amount \$141.00	7 Payee address; City; State: Zip Code 4222 Luckenbach Rd San Antonio, TX 78251-4306	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 11/30/2017	5 Payee name Sean Walker	
6 Amount \$252.00	7 Payee address; City; State: Zip Code 4222 Luckenbach Rd San Antonio, TX 78251-4306	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/15/2017	5 Payee name Sean Walker	
6 Amount \$258.00	7 Payee address; City; State: Zip Code 4222 Luckenbach Rd San Antonio, TX 78251-4306	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor
9 Complete ONLY 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

201884

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Lina M. Hidalgo	3. Filer ID (Ethics Commission Filers)
4 Date 10/20/2017	5 Payee name Wi Cowork LLC	
6 Amount \$300.00	7 Payee address; City: State: Zip Code 2502 La Branch St Houston, TX 77004-1028	
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 Rent
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 11/20/2017	5 Payee name Wi Cowork LLC	
6 Amount \$300.00	7 Payee address; City: State: Zip Code 2502 La Branch St Houston, TX 77004-1028	
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 Rent
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 12/19/2017	5 Payee name Wi Cowork LLC	
6 Amount \$100.00	7 Payee address; City: State: Zip Code 2502 La Branch St Houston, TX 77004-1028	
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 Rent
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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**INTEREST, CREDITS, GAINS, REFUNDS, AND
CONTRIBUTIONS RETURNED TO FILER****SCHEDULE K**

201884

The Instruction Guide explains how to complete this form.		1. Total pages Schedule K: not available
2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date 10/30/2017	5 Name of person from whom amount is received Mehran H Khodabandeh 6 Address of person from whom amount is received; City; State; Zip Code 27 Franciscan Way Kensington, CA 94707-1112 7 Purpose for which amount is received Reimbursement of travel expenses <input type="checkbox"/> Check if political contribution returned to filer	8 Amount \$742.00
4. Date 11/29/2017	5 Name of person from whom amount is received Nationbuilder 6 Address of person from whom amount is received; City; State; Zip Code 520 S Grand Ave Los Angeles, CA 90071-2600 7 Purpose for which amount is received Refund of mass email charge <input type="checkbox"/> Check if political contribution returned to filer	8 Amount \$150.00
4. Date 11/29/2017	5 Name of person from whom amount is received Nationbuilder 6 Address of person from whom amount is received; City; State; Zip Code 520 S Grand Ave Los Angeles, CA 90071-2600 7 Purpose for which amount is received Refund of mass email charge <input type="checkbox"/> Check if political contribution returned to filer	8 Amount \$150.00

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

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

SCHEDULE T

The Instruction Guide explains how to complete this form.		1. Total pages Schedule T:	
2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)	
4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee Southwest Airlines			
5 Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input checked="" type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC <input type="checkbox"/> Schedule B-SS			
6 Dates of travel 11/03/2017 And 11/05/2017	7 Name of person(s) traveling Mehran Khodabandeh		
	8 Departure city or name of departure location Oakland, CA		
	9 Destination city or name of destination location Houston, TX		
10 Means of transportation COMMAIR		11 Purpose of travel (including name of conference, seminar, or other event) Meetings with campaign	
4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee Southwest Airlines			
5 Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input checked="" type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC <input type="checkbox"/> Schedule B-SS			
6 Dates of travel 11/3/2017 And 11/5/2017	7 Name of person(s) traveling Nicole Larson		
	8 Departure city or name of departure location Oakland, CA		
	9 Destination city or name of destination location Houston, TX		
10 Means of transportation COMMAIR		11 Purpose of travel (including name of conference, seminar, or other event) Meetings with campaign	
4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee Sandra Bustamante			
5 Contribution / Expenditure reported on: <input checked="" type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC <input type="checkbox"/> Schedule B-SS			
6 Dates of travel 11/11/2017 And 11/12/2017	7 Name of person(s) traveling Lina Hidalgo		
	8 Departure city or name of departure location Houston, TX		
	9 Destination city or name of destination location Newark, NJ		
10 Means of transportation COMMAIR		11 Purpose of travel (including name of conference, seminar, or other event) Fundraiser in New York	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

SCHEDULE T

The Instruction Guide explains how to complete this form.		1. Total pages Schedule T:	
2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)	
4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee Sandra Bustamante			
5 Contribution / Expenditure reported on:			
<input checked="" type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC <input type="checkbox"/> Schedule B-SS			
6 Dates of travel 12/12/2017 And 12/15/2017	7 Name of person(s) traveling Lina Hidalgo		
	8 Departure city or name of departure location Houston, TX		
	9 Destination city or name of destination location Phoenix, AZ		
10 Means of transportation COMMAIR		11 Purpose of travel (including name of conference, seminar, or other event) Arena Phoenix Conference	
4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee David James			
5 Contribution / Expenditure reported on:			
<input checked="" type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input checked="" type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC <input type="checkbox"/> Schedule B-SS			
6 Dates of travel 12/11/2017 And 12/13/2017	7 Name of person(s) traveling Lina Hidalgo		
	8 Departure city or name of departure location Houston, TX		
	9 Destination city or name of destination location Los Angeles, CA		
10 Means of transportation COMMAIR		11 Purpose of travel (including name of conference, seminar, or other event) Donor meeting in Los Angeles	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

RECORDER'S MEMORANDUM:

At the time of recordation, this instrument was found to be inadequate for the best photographic reproduction because of illegibility, carbon or photo copy, discolored paper, etc. All blockouts, additions and changes were present at the time the instrument was filed and recorded.