

Official Public Records of Harris County Stan Stanart County Clerk

Campaign Finance Report



Stan Stanart

COUNTY CLERK
HARRIS COUNTY, TEXAS

FileNo:

2018475

Received By Clerk:

7/16/2018

File Date:

July 16, 2018

Office:

County Judge

Candidate:

Hidalgo, Lina M.

Treasurer:

Pickett, G. Troy

Category:

Contributions And Expenditures

Delivered By:

**Electronically Filed** 

Type:

COR

**Harris County No Fee** 



#### **CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT**

#### FORM C/OH **COVER SHEET PG 1**

The C/OH Instruction	Gulde explains how	to complete this form.	1 Filer ID (Ethics Comm	ission Filers)	2. Total pages	s filed:
3 CANDIDATE/ OFFICEHOLDER NAME	MS/MRS/MR NICKNAME	FIRST Lina M. LAST	<u> </u>	MI	OFFICE U	JSE ONLY
4 CANDIDATE/ OFFICEHOLDER ADDRESS	ADDRESS /PO BOX:	Hidalgo  APT/SUITE # CITY  Houston	Y STATE:	ZIP CODE 77288	Date Hand-delivered	or Date Postmarked
Change of Address  5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE P (713) 898	HONE NUMBER	EXTENSIO	ON	Receipt#	Amount \$
6 CAMPAIGN TREASURER NAME	MS/MRS/MR NICKNAME	FIRST G. Troy LAST Pickett		MI SUFFIX	Date Processed  Date Imaged	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS: 2222 Bissonnet Street	APT/SUITE # Ste 203	CITY Houston	STATE: TX	ZIP CODE 77005	
8 CAMPAIGN TREASURER PHONE	AREA CODE (713) 589	PHONE NUMBER 0-8692	EXTENSION	ON		
9 REPORT TYPE	☐ January 15 ☑ July 15	30th day before election		unoff xceeded \$500 limit	appointmen appointmen	ier campaign tresurer it (officeholder only) (Attach- COH-FR)
10 PERIOD COVERED	Month Day 01/01/2018		IROUGH	Month	Day Yes 06/30/2018	ar
11 ELECTION	ELECTION DATE Month Day 11/06/2018	Year Prima	nv 📋	Runoff 🔲 🤇 Special	Öther	
12 OFFICE	OFFICE HELD (if any)			13 OFFICE SOUGH Harris Coun		
		GO TO PA	AGE 2			

	/ OFFICEHOI		FORM C/OH
CAMPAIGN	FINANCE REI	PORT	COVER SHEET PG 2
14 C/OH NAME	Lina M. Hidalgo		15 Filer ID (Ethics Commission Filers)
16 NOTICE FROM POLITICAL COMMITTEE(S)	SUPPORT THE CANDIDATE / OF	DLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURE FICEHOLDER THESE EXPENDITURES MAY HAVE BEEN MADE WITH INDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS	OUT THE CANDIDATE'S OR OFFICEHOLDER'S
	COMMITTEE TYPE	COMMITTEE NAME	
	GENERAL	<b>§</b>	
	SPECIFIC	COMMITTEE ADDRESS	
30.		COMMITTEE CAMPAIGN TREASURER NAME	
jedd;flonal pages		COMMITTEE CAMPAIGN TREASURER ADDRESS	
17 CONTRIBUTION TOTALS		CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$150.00
		CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$183,252.46
EXPENDITURE TOTALS	3 TOTAL POLITICAL	EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$1,462.67
	4 TOTAL POLITICAL	EXPENDITURES	\$67.007.79
CONTRIBUTION BALANCE	5 TOTAL POLITICAL OF REPORTING P	CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY ERIOD	\$116,263.26
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF THE REPORTING PERIOD	\$1,400.00
18 AFFIDAVIT	CNOV BOUTTE NOTANY PUBLIC STATE OF IN COMIL DR. 11/10/ NOTANY D 125/6506 STAMP / SEAL ABOVE	is true and correct and includes all me under Title 15. Election Gode TEXAS	perjury, that the accompanying report information required to be reported by didate or Officeholder
Sworn to and subsc	ribed before me, by the said	Lina M. Hidalgo to certify which, witness my hand and seal of office.	this the
Cuna	Boute:	Cindy Brute	texas Motary Dublic
Signature of officer ad	ministering oath Pri		e of officer administering oath

Forms provided by Texas Ethics Commission

www.ethics.state.tx.us

Revised 9/8/2015

#### **SUBTOTALS - COH**

#### FORM C/OH COVER SHEET PG 3

19.	FILER NAME Lina M. Hidalgo	20. FILER ID (E	thics Commission Filers)	
21.	SCHEDULE SUBTOTALS NAME OF SCHEDULE	<u> </u>	SUBTOTALS AMOUNT	
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$174,442.46	
2,	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTI	ons	\$8,810.00	
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$0.00	
4.	SCHEDULE E: LOANS		\$0.00	
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL	CONTRIBUTIONS	\$67,007.79	
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$0.00	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITIC	AL CONTRIBUTIONS	\$0.00	i
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 POLITIC	ALCONTRIBUTIONS	\$0.00	
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS AND CONTRIL TO FILER	BUTIONS RETURNED	\$1,385.51	
			70///	

#### SCHEDULE A1

The Instruction Guide explains how to complete this form.	Total pages Schedule A1:     not available
2. FILER NAME Lina M. Hidalgo	3. Filer ID (Ethics Commission Filers)
4. Date 5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
06/30/2018 Moctar Aboubacar	\$100.00
6. Contributor address; City; State; ZIP Code 2-Peabody Ter Apt 904 Cambridge, MA 02138-6213	<b>\$155.05</b>
8. Principal occupation / Job title (See Instructions)  Not Employed  9 Employ	I /er (See Instructions) ot Employed
4. Date 5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
02/25/2018  Karen Adams  6. Contributor address; City; State; ZIP Code PO Box 271423 Houston, TX 77277-1423	\$25.00
	ver (See Instructions)
	ot Employed
4. Date 5. Full name of contributor out-of-state PAC	7. Amount of contribution (\$)
05/09/2018 Meredith Ahr	\$100.00
6. Contributor address; City; State, ZIP Code	
746 25th St Santa Monica, CA 90402-3144	
	ver (See Instructions) niversal Television Alternative Studio
4. Date 5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
01/28/2018 David Alamia	\$50.00
6. Contributor address; City; State; ZIP Code	
10334 Admirable Path Houston, TX 77044-1679	
<b>.</b>	/er (See Instructions) arris County
4. Date 5. Full name of contributor Out-of-state PAC	7. Amount of contribution (\$)
06/30/2018 David Alamia	\$50,00
6. Contributor address; City; State; ZIP Code	350.00
10334 Admirable Path Houston, TX 77044-1679	
1	ver (See Instructions)

#### SCHEDULE A1

The Ins	truction Guide explains how to complete this form.	Total pages Schedule A1:     not available
2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
02/04/2018	Isabel Allende	\$1,000.00
	6. Contributor address; City; State; ZIP Cod	
<b>^</b>	116 Caledonia St Sausalito, CA 94965-1925	
8 Principal occup Writer	pation / Job title (See Instructions) 9 Em	ployer (See Instructions) Self
4. Date	5 Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
05/23/2018	JUSTIN ANDERSON	\$166.66
	6. Contributor address; City; State; ZIP Cod	e
	9960 Beverly Grove Dr Beverly Hills, CA 90210-2121	
8. Principal occup	pation / Job title (See Instructions) 9 Em	ployer (See Instructions) N/A
4. Date	5. Full name of contributorour-or-state PAC	7. Amount of contribution (\$)
05/16/2018	Jennifer Aniston	\$350.00
	6. Contributor address; City; State; ZIP Cod	<b>e</b>
	4450 W Lakeside Dr Burbank, CA 91505-4000	
8. Principal occup Actor	pation / Job title (See Instructions)	ployer (See Instructions) N/A
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
04/15/2018	Bennie Flores Ansell	\$100.00
	6. Contributor address; City; State; ZIP Cod	e
	707 Sabine St Houston, TX 77007-7626	
8. Principal occup Professor	pation / Job title (See Instructions) 9 Em	ployer (See Instructions) Houston Community College
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
03/31/2018	Kristen Arbuckle	\$1.13
. 1	6. Contributor address; City; State; ZIP Cod	e
	3713 Yuma St NW Washington, DC 20016-2211	
	pation / Job title (See Instructions) 9 Em	ployer (See Instructions)
Analyst		Pc

#### SCHEDULE A1

The I	nstruction Guide explains how to complete this form.	Total pages Schedule A1:     not available
2. FILER NAME Lina M. Hidal	<del></del>	3. Filer ID (Ethics Commission Filers)
4. Date	Full name of contributor	7. Amount of contribution (\$)
05/06/2018	Kristen Arbuckle	\$1.00
	6. Contributor address; City; State; ZIF	Code
	3713 Yuma St NW Washington, DC 20016-2211	
8. Principal occ Analyst	upation / Job title (See Instructions)	Employer (See Instructions) Pc
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
03/31/2018	Amanda Arch	\$2,700.00
	6. Contributor address; City; State; ZIF	Code
	875 Indiana St Unit 515 San Francisco, CA 94107-3598	
8. Principal occ Technology		Employer (See Instructions)  Kasha
4. Date 03/25/2018	5. Full name of contributor out-of-state PAC  Thomas Armel 6. Contributor address; City; State; ZIF  4630 Michaux St Houston, TX 77009-4415	7. Amount of contribution (\$)  Code \$25.00
8. Principal occ Tax Consul	15	Employer (See Instructions) PwC
4. Date 05/23/2018	Full name of contributorout-of-state PAC  Nicole Avant	7. Amount of contribution (\$) \$250.00
	6. Contributor address; City; State; ZIF	Code
	611 S Muirfield Rd Los Angeles, CA 90005-3832	
8. Principal occ Retired	supation / Job title (See Instructions)	Employer (See Instructions) Retired
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
06/30/2018	Anne Avis	\$1,000.00
	6. Contributor address; City; State; ZIF	Code
	1545 Waverley St Palo Alto, CA 94301-3642	
	supation / Job title (See Instructions)	Employer (See Instructions)
Volunteer		Internews Board

#### SCHEDULE A1

The	Instruction Guide explains how	to complete this fo	rm.	Total pages Schedule A1:     not available	
2. FILER NAN Lina M. Hid				3. Filer ID (Ethics Commission I	Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
01/28/2018	Aaron Azios				\$5.00
	6. Contributor address;	City; State;	ZIP Code		
	6227 Wynnwood Ln Houston, T.	X 77008-3241	***		
	ccupation / Job title (See Instruction landler/Student	ns)		yer (See Instructions) ederal Express	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
03/04/2018	Aaron Azios				\$2.00
	6. Contributor address;	City; State	ZIP Code		
	6227 Wynnwood Ln Houston, T	X 77008-3241			
	ccupation / Job title (See Instruction Handler/Student	ns)	·····	yer (See Instructions) ederal Express	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/03/2018	Aaron Azios				\$3.00
	6. Contributor address;	City; State;	ZIP Code		
	6227 Wynnwood Ln Houston, T.	X 77008-3241			
	ecupation / Job title (See Instruction Handler/Student	ns)	1	yer (See Instructions) ederal Express	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/24/2018	Aaron Azios	***************************************			\$5.00
	6. Contributor address;	City, State;	ZIP Code		
	6227 Wynnwood Ln Houston, T	X 77008-3241 .			
	ccupation / Job title (See Instruction	is)		yer (See Instructions)	
	fandler/Student  5. Full name of contributor		F	ederal Express	
4. Date		out-of-state PAC		7. Amount of contribution (\$)	
06/17/2018	Katy Bacon				\$100.00
	6. Contributor address;	City; State;	ZIP Code		
	5822 Kenwood Ave Dallas, TX				
8. Principal oc Consultar	ccupation / Job title (See Instruction	ns)		yer (See Instructions) ain & Company	
Consultai	<u> </u>		lB	am or Company	

#### SCHEDULE A1

The	Instruction Guide explains how	to complete this form	n.	Total pages Schedule A1:     not available	
2. FILER NAM Lina M. Hida			************	3. Filer ID (Ethics Commission	n Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
03/26/2018	Betty Baer				\$250.00
	6. Contributor address;	City; State;	ZIP Code		
	9023 Ilona Ln Houston, TX 7702	25-3619			
8. Principal oc Retired	cupation / Job title (See Instruction	15)	1	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
05/13/2018	Abdul N. Bahalim				\$5.00
	6. Contributor address;	City; State;	ZIP Code		
	2615 Chestnut Mills Rd Houston	, TX 77067-1266			
l '	cupation / Job title (See Instruction Service Representative	18)	10000	/er (See Instructions)	
4. Date	5. Full name of contributor	Out-of-state PAC		7. Amount of contribution (\$)	
02/25/2018	Abdul Bahalim				\$5.00
	6. Contributor address;	City; State;	ZIP Code		
	2615 Chestnut Mills Rd Houston	,TX 77067-1266	<b>*</b>		
	cupation / Job title (See Instruction Service Representative	15)		/er (See Instructions) nited Airtines	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/17/2018	Joe Bailey Jr.				\$100.00
	6. Contributor address;	City; State;	ZIP Code		
	6042 Crab Orchard Rd Houston,	TX 77057-1448			
8. Principal oc filmmaker	cupation / Job title (See Instruction	ns)	9 Employ	ver (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/30/2018	Manuel Barrera				\$25.00
	6. Contributor address;	City; State;	ZIP Code		
	9402 Camargo Ct Houston, TX 7				
300	cupation / Job title (See Instruction	15)	, ,	ver (See Instructions)	
Not Emplo	oyeu		1 N	ot Employed	

#### SCHEDULE A1

The Ins	struction Guide explains how to complete this	lorm.	Total pages Schedule A1:     not available
2. FILER NAME Lina M. Hidalgo	)		3. Filer ID (Ethics Commission Filers)
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
)5/29/2018	Marry Ann Bass		\$25.00
	6. Contributor address; City; State	; ZIP Code	
	4011 Leeshire Dr Houston, TX 77025-4019		
B. Principal occup Retired	pation / Job title (See Instructions)		yer (See Instructions) Retired
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
06/24/2018	William Beard		\$10.00
	6. Contributor address; City; State	ZIP Code	
	931 Hackberry St La Porte, TX 77571-6911		
	pation / Job title (See Instructions)	1 '	yer (See Instructions)
Senior HVAC		1	a Porte ISD
4. Date 05/23/2018	5. Full name of contributor out-of-state PAC Coffeen Bell 6. Contributor address; City; State 391 N Carolwood Dr Les Angeles, CA 90077-3512		7. Amount of contribution (\$) \$333.34
, ,	oation / Job title (See Instructions) rmer US Ambassador	9 Emplo	yer (See Instructions)
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
03/31/2018	Kiersten Bergeron		\$1.00
	6. Contributor address; City; State	ZIP Code	
	201 Main St Maynard, MA 01754-2511		
8. Principal occup Outreach	pation / Job title (See Instructions)	' '	oyer (See Instructions) ActBlue
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
02/26/2018	Rita Bergers		\$500.00
	6. Contributor address; City; State	; ZIP Code	
	1123 Berthea St Houston, TX 77006-6469		1
8. Principal occup Retired	pation / Job title (See Instructions)	1	oyer (See Instructions) Retired

#### SCHEDULE A1

The In	struction Guide explains how t	o complete this for	m.	Total pages Schedule A1:     not available	· · · ·
2. FILER NAME Lina M. Hidalg	o			3. Filer ID (Ethics Commission	Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/26/2018	Rita Bergers				\$750.00
	6. Contributor address;	City; State;	ZIP Code		*.**
	1123 Berthea St Houston, TX 770	06-6469			
8. Principal occu Retired	pation / Job title (See Instruction	s)		yer (See Instructions) etired	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
05/16/2018	Linda Bessin				\$1,000.00
	6. Contributor address;	City; State;	ZIP Code		
***	741 N Clybourn Ave Burbank, CA	A 91505-3153			
	pation / Job title (See Instruction	s)		yer (See Instructions)	
Not Employe			N	ot Employed	<u> </u>
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
04/08/2018	Aliya Bhatia				\$50.00
	6. Contributor address;	City; State;	ZIP Code		
	1805 Buckhead Valley Ln NE Atl	anta, GA 30324-2796			
8. Principal occu Not Employe	pation / Job title (See Instructioned	s)	,00000000	yer (See Instructions) ot Employed	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/30/2018	Tahir Bhatti				\$2,500.00
	6. Contributor address;	City; State;	ZIP Code		
! 	10 Harbor View Dr Sugar Land, T				
8. Principal occu CEO	pation / Job title (See Instruction	s)		yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/10/2018	Gina Biondo				\$250.00
	6. Contributor address;	City; State;	ZIP Code		
	10315 Briar River Dr Houston, T	X 77042-2947			· •
	pation / Job title (See Instructions	s)	9 Employ	yer (See Instructions)	
Hines Securi	ties Inc.		Si	enior Compliance Manager	

#### SCHEDULE A1

The In	struction Guide explains how to complete this form.	Total pages Schedule A1:     not available
2. FILER NAME Lina M. Hidalg		3. Filer ID (Ethics Commission Filers)
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
06/29/2018	Blanca Blanco	\$100.00
	6. Contributor address; City; State; ZIP C	Code
	1839 Alta Vista St Houston, TX 77023-2503	
8. Principal occu Retired	upation / Job title (See Instructions) 9	Employer (See Instructions) Retired
4. Date	Full name of contributor	7. Amount of contribution (\$)
02/25/2018	William Bobrick	\$50.00
	6. Contributor address; City; State; ZIP C	Code
	744 Brooks St Apt 3107 Sugar Land, TX 77478-4609	
88886888	upation / Job title (See Instructions) 9	Employer (See Instructions)
Organizer		Ft. Bend American Federation of Teachers
4. Date	5 Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
01/28/2018	Gury Boerner	\$25.00
•	6. Contributor address; City; State ZIP C	Code
	27614 Esteban Point Ln Spring, TX 77386-3738	
8. Principal occu Accountant	upation / Job title (See Instructions)	Employer (See Instructions) EDP Renewables
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
02/11/2018	Hannah Bowles	\$100.00
	6. Contributor address; City, State; ZIP C	Code
	12 Old Meadow Rd Dover, MA 02030-2514	
8. Principal occu University le	· · · · · · · · · · · · · · · · · · ·	Employer (See Instructions)  Harvard U.
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
01/16/2018	Pete Bradley	\$5.00
	6. Contributor address; City; State; ZIP C	Code
	3097 Summit St Columbus, OH 43202-1314	
8. Principal occi	upation / Job title (See Instructions) . 9	Employer (See Instructions) State of Ohio

#### SCHEDULE A1

The Inc	struction Guide explains how	to complete this fo	rm.	Total pages Schedule A1: not available	
2. FILER NAME Lina M. Hidalge	0		·	3. Filer ID (Ethics Commission	Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
04/20/2018	Constance Britton	_			\$166.66
	6. Contributor address;	City; State;	ZIP Code		***************************************
,	1990 S Bundy Dr Ste 200 Los Ai	igeles, CA 90025-524	9		
8. Principal occu	pation / Job title (See Instruction	ns)		yer (See Instructions) eep blue productions	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	,
01/21/2018	Janice Brody				\$1,000.00
	6. Contributor address;	City; State;	ZIP Code		. ,
	820 Bear Gulch Rd Woodside, C	A 94062-4430			
8. Principal occu Not Employe	pation / Job title (See Instructioned	ns)	1 "3333333."	ver (See Instructions) ot Employed	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
03/25/2018	Janice Brody				\$10,000.00
	6. Contributor address;	City; State;	ZIP Code		
	820 Bear Gulch Rd Woodside, C	A 94062-4430			
8. Principal occu Not Employe	pation / Job title (See Instructioned	15)	1 .	yer (See Instructions) ot Employed	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
05/23/2018	Lisa Broock				\$200.00
	6. Contributor address;	City; State;	ZIP Code		
	11987 Foxboro Dr Los Angeles,	CA 90049-4110			
	pation / Job title (See Instruction nt, Corporate Communications, So			yer (See Instructions) ony Pictures Entertaainment	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
03/11/2018	Alison Brown				\$5.69
	6. Contributor address; 321 W 78th St Apt 6A New York	City; State;	ZIP Code		
8. Principal occu	pation / Job title (See Instruction		9 Employ	 yer (See Instructions)	
Psychologist		·-,		elf	

#### SCHEDULE A1

The Ins	struction Guide explains how	to complete this for	n,	Total pages Schedule A1:     not available	
2. FILER NAME Lina M. Hidalgo		•		3. Filer ID (Ethics Commission f	Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
05/23/2018	Ben Bruno				\$166.66
	6. Contributor address;	City; State;	ZIP Code		<b>0</b> 100.00
	9828 Easton Dr Beverly Hills, Ca	90210-1418			
8. Principal occur	oation / Job title (See Instruction	s)	9 Employ	yer (See Instructions)	
Trainer			Se	elf Employed	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
05/21/2018	Joanne Burrows				\$200.00
	6. Contributor address:	City; State;	ZIP Code		
	11411 Briar Rose Dr Houston, T	C 77077-6433			
	pation / Job title (See Instruction	s)		yer (See Instructions)	
Retired		<u> </u>	R	etired	
4. Date	Full name of contributor	Out-of-state PAC		7. Amount of contribution (\$)	
05/21/2018	Carol Burrus				\$30.00
	6. Contributor address;	City; State;	ZIP Code		
	3615 Sun Valley Dr Houston, TX	77025-4134			
	pation / Job title (See Instruction	s)	9 Employ	ver (See Instructions)	
	n Universalist Church	<u>`</u>	D	irector of Religious Education	
4. Date	5. Full name of contributor	out-of-state PAC	<del></del>	7. Amount of contribution (\$)	
03/29/2018	Sandra Bustamante				\$10.00
	6. Contributor address;	City; State;	ZIP Code		
	1701 Hermann Dr Houston, TX 7	7004-7452			
8. Principal occup Not Employe	pation / Job title (See Instruction d	s)		ver (See Instructions) ot Employed	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/20/2018	Sandra Bustamante	_			\$40.00
	6. Contributor address;	City; State;	ZIP Code		4,,,,,,
	1701 Hermann Dr Houston, TX 7	7004-7452			
	pation / Job title (See Instruction	s)		yer (See Instructions)	
Not Employe	d		N	ot Employed	

#### SCHEDULE A1

The In	struction Guide explains how	to complete this form	m,	Total pages Schedule A1:     not available	
2. FILER NAME Lina M. Hidalg	0	,		3. Filer ID (Ethics Commission Filers)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/03/2018	James Calaway			\$1,000.00	
	6. Contributor address;	City; State;	ZIP Code		
	2302 Persa St Houston, TX 7701	9-6422			
8. Principal occu Executive	pation / Job title (See Instruction	is)		yer (See Instructions) stributed Power Partners	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	_
02/26/2018	Carrie Cameron			\$50.00	
	6. Contributor address;	City; State;	ZIP Code		
	312 Knox St Houston, TX 77007	-7141			
8. Principal occu Professor	pation / Job title (See Instruction	ıs)		yer (See Instructions) ID Anderson	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
02/18/2018	Victor Cardenas  6. Contributor address;  2422 Blue Water Ln Houston, T2		ZIP Code	\$250.00	
8. Principal occu Attorney	pation / Job title (See Instruction		20000000000000000000000000000000000000	 yer (See Instructions) artline Dacus Barger Dreyer LLP	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
03/25/2018	Walta Carmichael			\$1.00	<i>.</i>
	6. Contributor address;	City; State;	ZIP Code		
	11 Coronet Ridge Ct The Woodle	ands, TX 77375-1073			#
8. Principal occu Not Employe	pation / Job title (See Instructioned	18)	1 '	yer (See Instructions) ot Employed	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
03/11/2018	Kate Catherall			\$25.00	
	6. Contributor address;	City; State;	ZIP Code		
	500 Stanyan St Apt 103 San Fran	cisco, CA 94117-1857			
Principal occu     Partner	pation / Job title (See Instruction	ıs)	<b>I</b>	yer (See Instructions) he Arena	

#### SCHEDULE A1

The Inc	struction Guide explains how to complete this form.	Total pages Schedule A1:     not available
2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
06/03/2018	Anne Chao	\$1,000.00
	6. Contributor address; City; State; ZIP Code	11,000
	3970 Inverness Dr Houston, TX 77019-1004	
, ,	· · · · · · · · · · · · · · · · · · ·	yer (See Instructions)
lecturer 4. Date	LE Pull name of acadella dec	ice University  7. Amount of contribution (\$)
	Out-of-state FAC	7. Amount of Contribution (4)
01/21/2018	Jennifer Childs	\$150.00
	6. Contributor address; City, State; ZIP Code	
	221 N Rengstorff Ave Mountain View, CA 94043-4254	
		yer (See Instructions)
Marketing		ntegrated Archive Systems
4. Date	5. Full name of contributor out-of-state PAC	7. Amount of contribution (\$)
06/28/2018	Chopra Imaging Center, Inc	\$5,000.00
	6. Contributor address; City; State; ZIP Code	
	8305-A Knight Road Houston, TX 77054 3905	(returned on July 9, 2018)
8. Principal occup	pation / Job title (See Instructions)  9 Employ	yer (See Instructions)
4. Date	5. Full name of contributor Out-of-state PAC	7. Amount of contribution (\$)
05/23/2018	Megan Clayton	\$5.00
	6. Contributor address; City; State; ZIP Code	
	263 Pleasant St Apt 2 Northampton, MA 01060-3955	
	pation / Job title (See Instructions) nunications Manager	yer (See Instructions)
4. Date	5. Full name of contributor Out-of-state PAC	7. Amount of contribution (\$)
05/23/2018	Darcy Cobb	\$60.00
	6. Contributor address; City; State; ZIP Code	
	1047 Moraga Dr Los Angeles, CA 90049-1620	
8. Principal occup		yer (See Instructions)
1 18		otted Line Communications

#### SCHEDULE A1

The	Instruction Guide explains how	to complete this form	n.	Total pages Schedule A1:     not available	
2. FILER NAM Lina M. Hida				3. Filer ID (Ethics Commission F	ilers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
03/31/2018	Frances Codispoti				\$250.00
	6. Contributor address;	City; State;	ZIP Code		
	14545 Manuella Rd Los Altos Hi	lls, CA 94022-2024			
8. Principal oc fundraiser	cupation / Job title (See Instruction	is)		yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/30/2018	Michael Cohen				\$1.30
	6. Contributor address;	City; State;	ZIP Code		• • • •
	970 Crane St Apt 4 Menlo Park, (	CA 940 <b>25-472</b> 5			
8. Principal occ Software E	cupation / Job title (See Instruction Engineer	is)		yer (See Instructions) lobality	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
05/16/2018	Jonathan Cole MD	<i>/</i>			\$250.00
	6. Contributor address;	City; State;	ZIP Code		
	9675 Brighton Way Ste 290 Beve	rly Hilts, CA 90210-514	16		
8. Principal oc Physician	cupation / Job title (See Instruction	(9)		yer (See Instructions) clf	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/30/2018	Jonathan Cole MD				\$250.00
	6. Contributor address;	City; State;	ZIP Code		
	9675 Brighton Way Ste 290 Beve	erly Hills, CA 90210-514	16		
8. Principal oci Physician	cupation / Job title (See Instruction	<b>(S)</b>	1 '	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/30/2018	David Collins				\$25.00
	6. Contributor address;	City; State;	ZIP Code		
	3560 Dixie Dr Apt 1111 Houston	, TX 77021-1264			
1000000	cupation / Job title (See Instruction	is)	1 '	yer (See Instructions)	
Instruction	al Technology Trainer		U	niversity of St. Thomas	

#### SCHEDULE A1

The I	nstruction Guide explains how to complete this form.		Total pages Schedule A1:     not available	
2. FILER NAMI Lina M. Hidal			3. Filer ID (Ethics Commission File	ers)
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)	
03/11/2018	Mary Collins			\$2.50
	6. Contributor address; City; State; Z	IP Code		<b>42</b> .50
	215 Athol Ave Apt C Oakland, CA 94606-1352			
8. Principal occ Not Emplo	pupation / Job title (See Instructions)	1	er (See Instructions) ot Employed	
4. Date	5. Full name of contributorout-of-state PAC	<u> </u>	7. Amount of contribution (\$)	
06/30/2018	Marian Cones 6. Contributor address; City; State; Z	IP Code		\$500.00
	1326 Moorhead Dr Houston, TX 77055-4110			
8. Principal occ	cupation / Job title (See Instructions)	, ,	er (See Instructions) ourthouseDirect.com	
4. Date	5. Full name of contributorout+of-state PAC	·	7. Amount of contribution (\$)	
06/30/2018	Jennifer Connatser			\$25.00
	6. Contributor address; City; State; Z	IP Code		
	5 Killarney Ct Houston, TX 77074-7841			
Principal occ     Social work	supation / Job title (See Instructions)	.000000	er (See Instructions) sylor College of Medicine	
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)	· · · · ·
05/23/2018	Kevin Conroy			\$500.00
	6. Contributor address; City; State; Z	IP Code		
	33 W67st Nyc, NY 10023			
8. Principal occ Actor	supation / Job title (See Instructions)	1	er (See Instructions)	
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)	
03/11/2018	Brendan Coots			\$2.27
	6. Contributor address; City; State; Z	IP Code		~ 4
	812 Prairie Creek Dr Pacifica, CA 94044-3825			
	supation / Job title (See Instructions)	1	er (See Instructions)	
3D Artist		1.1	eberman Productions	

#### SCHEDULE A1

The In	struction Guide explains how to complete this form	•	Total pages Schedule A1:     not available
2. FILER NAME Lina M. Hidalg	0		3. Filer ID (Ethics Commission Filers)
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
02/25/2018	Rosamund Coquillette		\$100.00
	6. Contributor address; City; State; Z	IP Code	• • • • • • • • • • • • • • • • • • • •
	12 Rutland St Cambridge, MA 02138-2503		
8. Principal occu administrato	pation / Job title (See Instructions)		ver (See Instructions)
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
05/23/2018	Ashley Cote		\$5.00
	6. Contributor address; City; State; Z	IP Code	
	20 Aberdeen Rd Methuen, MA 01844-6002		
8. Principal occu Admin assist	pation / Job title (See Instructions)	9 Employ	ver (See Instructions)
4. Date	5. Full name of contributor Jout-of-state PAC CODE	002089	7. Amount of contribution (\$)
04/24/2018	CWA - Cope PCC		\$2,500.00
	6. Contributor address; City; State; Z	IP Code	
	501 3rd St NW Washington, DC 20001-2760		
8. Principal occu	pation / Job title (See Instructions)	9 Employ	ver (See Instructions)
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
06/29/2018	Cy Fair Area Democratic Club		. \$50.00
	6. Contributor address; City; State; Z	IP Code	
	14119 Hillvale Dr Houston, TX 77077-1408		
8. Principal occu	pation / Job title (See Instructions)	9 Employ	ver (See Instructions)
4. Date	5. Full name of contributorout-of-state PAC	<u> </u>	7. Amount of contribution (\$)
04/19/2018	Laurie David		\$500.00
	6. Contributor address; City; State; Z	ZIP Code	
	11812 San Vicente Blvd Fl 4 Los Angeles, CA 90049-662.	5	
	pation / Job title (See Instructions)		yer (See Instructions)
Author and I	Producer	Н	ybrid Nation

#### SCHEDULE A1

The Ins	truction Guide explains how to	complete this form	n.	Total pages Schedule A1:     not available	
2. FILER NAME Lina M. Hidalgo				3. Filer ID (Ethics Commission	Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
01/28/2018	Mary Delaney				\$2,500.00
	6. Contributor address;	City; State;	ZIP Code		
	436 14th St Ste 1417 Oakland, CA	94612-2716			
8. Principal occup	pation / Job title (See Instructions	)	1 ' '	ver (See Instructions)	.,
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	·
05/09/2018	Kate Denton		***	·	\$125.00
	6. Contributor address;	City; State;	ZIP Code		·
	9046 Lucerne Ave Culver City, Ca	A 90232- <b>2515</b>			
	pation / Job title (See Instructions	3)	50000 <b>3</b> k	ver (See Instructions)	
Marketing	5. Full name of contributor	_	L	oudPack Inc	-
4. Date		out-of-state PAC		7. Amount of contribution (\$)	
06/30/2018	Timothy Detmering		**		\$1,000.00
	6. Contributor address;	City; State;	ZIP Code		
	2800 Post Oak Blvd Ste 225 Hous	ton, TX 77056-6169			
8. Principal occup Finance	pation / Job title (See Instructions	)		ver (See Instructions) entaurus	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
05/06/2018	Larry Diamond				\$100.00
	6. Contributor address;	City; State;	ZIP Code		
	837 Tolman Dr Stanford, CA 9430	)5-1025			
8. Principal occup professor	pation / Job title (See Instructions	)	9888	ver (See Instructions) anford Univresity	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
01/21/2018	Natasha Dolby		•		\$100.00
	6. Contributor address;	City; State;	ZIP Code		
	2115 Bush St San Francisco, CA 9	4115-3103			
	pation / Job title (See Instructions	3)	∭ I ` •	ver (See Instructions)	
Not employed	1		■ N	ot employed	

## <sup>5</sup>age - 21

#### **MONETARY POLITICAL CONTRIBUTIONS**

#### SCHEDULE A1

·				
The I	Instruction Guide explains how to complete this form	n.	Total pages Schedule A1:     not available	
2. FILER NAM Lina M. Hida	<del></del>		3. Filer ID (Ethics Commission	r Filers)
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)	
02/18/2018	Sheila Dotson			\$10.00
	6. Contributor address; City; State;	ZIP Code		
	4123 Surreydon Dr Houston, TX 77014-2148			
8. Principal occ Commercia	cupation / Job title (See Instructions)		yer (See Instructions) hell Oil	
4. Date	5. Full name of contributor out-of-state PAC		7. Amount of contribution (\$)	
06/30/2018	Sheila Dotson			\$25.00
	6. Contributor address; City; State;	ZIP Code		<b>4.</b> 0.42
	4123 Surreydon Dr Houston, TX 77014-2148			
8. Principal occ	cupation / Job title (See Instructions)		yer (See Instructions) hell Oil	
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)	
8. Principal occ	Minnie Driver 6. Contributor address; City: State; 2000 Avenue Of The Stars Los Angeles, CA 90067-4700 cupation / Job title (See Instructions)		yer (See Instructions)	\$500.00
Actor	,		elf	
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)	
06/30/2018	Gilbert Duran			\$100.00
	6. Contributor address; City; State;	ZIP Code		
	309 63rd St Apt A Oakland, CA 94618-1265			
8. Principal occ Self Emplo	cupation / Job title (See Instructions) oyed	·	yer (See Instructions)	
4. Date	Full name of contributorout-of-state PAC		7. Amount of contribution (\$)	
02/25/2018	Allison Edwards			\$100.00
	6. Contributor address; City; State;	ZIP Code		
	2500 Woodmont Ave Austin, TX 78703-3257			
8. Principal occ attorney	cupation / Job title (See Instructions)	9 Employ	yer (See Instructions)	

# ⊃age - *22*

#### MONETARY POLITICAL CONTRIBUTIONS

#### SCHEDULE A1

The In	estruction Guide explains how	to complete this form.	•	Total pages     not availab	Schedule A1:	
2. FILER NAME Lina M. Hidal				3. Filer ID (Ethi	cs Commission	n Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of c	ontribution (\$)	
01/12/2018	Michael Ehlers		_			\$25.00
!	6. Contributor address;	City; State; Z	IP Code			<b>4.0</b> 0.00
	1828 Columbine Ave Boulder, Co	O 80302-7917				
8. Principal occu Retired	upation / Job title (See Instruction	s)	1	rer (See Instruct	ons)	
4. Date	5. Full name of contributor	out-of-state PAC	·	7. Amount of c	ontribution (\$)	
05/21/2018	John Eldridge	_				\$100.00
ļ	6. Contributor address;	City; State; Z	IP Code			<b>\$1</b> 00.00
	2351 Blue Bonnet Blvd Houston,	TX 77030-3624				
8. Principal occu Haynes & B	upation / Job title (See Instruction	s)	1	/er (See Instruct	ons)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of co	ontribution (\$)	
06/10/2018	Bruce Evans					\$100.00
	6. Contributor address; 9506 Meadowbriar Ln Houston,	FX 77063-3813	IP Code			
	pation / Job title (See Instruction	5)	1	er (See Instruct	ons)	
insurance ag	5. Full name of contributor		se	7. Amount of c	antribution (C)	
06/30/2018	Bradley Falchuk	out-of-state PAC		7. Amount of C	ontribution (#)	
00/30/2016	6. Contributor address:	City State: 7	IID Cada			\$500.00
			IP Code			
O Deinsing Lage	8383 Wilshire Blvd Ste 400 Beve			(Ca a 1- at	\	
Writer / Pro-	upation / Job title (See Instruction ducer	s)		er (See Instruct) Oth Century Fox	ons)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of c	ontribution (\$)	
04/18/2018	Patricia Fallon					\$25.00
	6. Contributor address;	City; State; Z	IP Code			
	2901 Bammel Ln Apt 9 Houston,	TX 77098-1133				
1	upation / Job title (See Instruction	s)	9 Employ	rer (See Instruct	ons)	
Retired			R	etired		

#### SCHEDULE A1

The In	struction Guide explains how	to complete this form	1.	Total pages Schedule A1:     not available	
2. FILER NAME Lina M. Hidali				3. Filer ID (Ethics Commission I	ilers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
01/31/2018	Nancy Farese 6. Contributor address; PO Box 400 Carrollton, GA 3011	,	ZIP Code		\$1,000.00
i '	upation / Job title (See Instruction	s)	, ,	er (See Instructions)	
Board Chair			Pł	notoPhilanthropy	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
03/11/2018	Jimmy Ferguson				\$500.00
	6. Contributor address;	City; State;	ZIP Code		
	1508 Dessau Ridge Ln Apt 801 A	ustin, TX 78754-2123			
8. Principal occi McDonald's	upation / Job title (See Instruction Franchisee	s)		ver (See Instructions) elf-Employed	
4. Date	5. Full name of contributor	Out-of-state PAC		7. Amount of contribution (\$)	
01/21/2018	Susanna Finnell				\$25.00
	6. Contributor address;	City; State;	ZIP Code		
	676 Monte Rosa Drive, Apt 824	West Menlo Park, CA 94	1025-6913		
8. Principal occi not employe	upation / Job title (See Instructioned	s)	***************************************	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
04/22/2018	john Fisher				\$50.00
	6. Contributor address;	City; State;	ZIP Code		
	2000 North Loop W Houston, TX	77018-8124			
8. Principal occi RE mgr	upation / Job title (See Instruction	s)	***************************************	yer (See Instructions) CA	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
04/18/2018	Bobby Flay				\$1,666.67
	6. Contributor address;	City; State;	ZIP Code		
	1140 Broadway New York, NY 1		·		
	upation / Job title (See Instruction	18)	I .	yer (See Instructions)	
Chef			Se	elf Employed	

#### SCHEDULE A1

The In:	struction Guide explains how to complete this for	m.	Total pages Schedule A1:     not available	
2. FILER NAME Lina M. Hidalg	, o		3. Filer ID (Ethics Commission F	ilers)
4. Date	5. Full name of contributorout-of-state PAC _		7. Amount of contribution (\$)	
06/17/2018	Asucena Flores			\$50.00
	6. Contributor address; City; State;	ZIP Code	,	·
	1403 Bailey St Houston, TX 77019-5001			
8. Principal occu	pation / Job title (See Instructions)	9 Employ	er (See Instructions)	
Senior Mana	ger of Marketing and Communication	G	enesys Works	
4. Date	5. Full name of contributorout-of-state PAC _		7. Amount of contribution (\$)	
01/28/2018	William Forbath			\$100.00
	6. Contributor address; City; State;	ZIP Code		
	3206 Greenlee Dr Austin, TX 78703-1622			
	pation / Job title (See Instructions)		er (See Instructions)	
Professor of	· · · · · · · · · · · · · · · · · · ·	U	T Austin	
4. Date	5. Full name of contributorout-of-state PAC _	<del></del>	7. Amount of contribution (\$)	
05/09/2018	Mary Ford			\$500.00
	6. Contributor address; City; State;	ZIP Code		
	59 Wooster St New York, NY 10012-4349			
8. Principal occu self employe	pation / Job title (See Instructions)	A	ver (See Instructions) reedom for All	
4. Date	5. Full name of contributorout-of-state PAC _	4	7. Amount of contribution (\$)	
03/31/2018	Patrick Frank			\$1,00
	6. Contributor address; City; State;	ZIP Code		
	52 Botolph St Melrose, MA 02176-1147			
		1 .	yer (See Instructions) ctBlue	
4. Date	5. Full name of contributor Out-of-state PAC		7. Amount of contribution (\$)	
05/31/2018	Francis Fukuyama			\$200.00
	6. Contributor address; City; State;	ZIP Code		
	2662 South Ct Palo Alto, CA 94306-2433			
1	pation / Job title (See Instructions)		yer (See Instructions)	
Stanford Uni	versity	Pı	rofessor	

#### SCHEDULE A1

The Ins	struction Guide explains how t	to complete this form.	•	Total pages Schedule A1:     not available	
2. FILER NAME Lina M. Hidalgo				3. Filer ID (Ethics Commission I	Filers)
4. Date	5. Full name of contributor	out-of-state PAC	,	7. Amount of contribution (\$)	
03/11/2018	Pete Garcia				\$100.00
	6. Contributor address;	City, State; Z	IP Code		
	4614 Canford Ct # F Kingwood,	ΓX 77345-54 <b>20</b>			
8. Principal occup	pation / Job title (See Instruction	s)	1 .	yer (See Instructions) ete Garcia International	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
04/18/2018	Jen Garner	***			\$1,000.00
	6. Contributor address;	City; State; Z	IP Code		
	11693 San Vicente Blvd Los Ang	eles, CA 90049-5105			
8. Principal occup Actor	pation / Job title (See Instruction	s)		yer (See Instructions) elf Employed	
4. Date	5. Full name of contributor	Upul-of-state PAC		7. Amount of contribution (\$)	
04/08/2018	Caitlin Geaghan				\$1.00
	6. Contributor address;	City; State; Z	IP Code		
	7334 S Union Creek Way Apt 3T	Midvale, UT 84047-590	8		
8. Principal occul Interior Design	pation / Job title (See Instruction	s)		yer (See Instructions) arryl Carter Inc.	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
01/28/2018	Adam Genecov		,		\$50.00
	6. Contributor address;	City; State; 2	IP Code		
	1609 Amapola Ave Torrance, CA	90501-3102			
8. Principal occu Engineer	pation / Job title (See Instruction	is)	L	yer (See Instructions) paceX	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
03/11/2018	Adam Genecov				\$50.00
	6. Contributor address;	City; State; Z	IP Code		
	1609 Amapola Ave Torrance, CA	90501-3102			
8. Principal occu Engineer	pation / Job title (See Instruction	is)	000000	yer (See Instructions) paceX	

#### SCHEDULE A1

The ins	struction Guide explains how	to complete this fo	rm.	Total pages Schedule A1:     not available	
2. FILER NAME Lina M. Hidalgo	)			3. Filer ID (Ethics Commission )	Filers)
4. Date	5 Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/18/2018	Nancy George				\$100.00
	6. Contributor address;	City; State;	ZIP Code		<b>2133.33</b>
	4413 Coyle St Houston, TX 7703	23-3503			
	pation / Job title (See Instruction	ns)		yer (See Instructions)	
University of		_ <u>_</u>	0	ptometrist/ Clinical Associate Profes	ssor
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/30/2018	Alex Gonzalez				\$50.00
	6. Contributor address;	City; State;	ZIP Code		
	4428 Basswood Ln Bellaire, TX	77401-3202			
l .	pation / Job title (See Instruction	ns)	1	yer (See Instructions)	
Attorney			Pa	adilla & Rodriguez	
4. Date	5. Full name of contributor	Out-of-state PAC		7. Amount of contribution (\$)	
03/26/2018	Elizabeth Green				\$200.00
	6. Contributor address;	City; State;	ZIP Code		
	11002 Tupper Lake Dr Houston,	TX 77042-1319			_
Retired	pation / Job title (See Instruction	ns)		yer (See Instructions) etired	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
05/16/2018	Jamie Greenberg			,	\$33.34
	6. Contributor address;	City; State;	ZIP Code		
	16756 Addison St Encino, CA 9	1436-1056	***		
8. Principal occup makeup artist	pation / Job title (See Instruction 5339	าร)	4	yer (See Instructions) mie Makeup	
4. Date	5. Full name of contributor	out-of-state PAC	•	7. Amount of contribution (\$)	
05/23/2018	Robert Clark Gregg				\$250.00
	6. Contributor address;	City; State;	ZIP Code		
	2300 Greenfield Ave Los Angele	es, CA 90064-1908			
8. Principal occup Actor/Filmm	pation / Job title (See Instruction aker	18)	1 ' '	yer (See Instructions)	

#### SCHEDULE A1

The Instruction Guide explains how to complete this form.			Total pages Schedule A1:     not available		
2. FILER NAME Lina M. Hidalgo				3. Filer ID (Ethics Commission I	Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
05/20/2018	Joseph Grinstein				\$1,000.00
	6. Contributor address;	City; State;	ZIP Code		
	6416 Belmont St Houston, TX 7700	05-3802			<u></u>
Principal occup     Lawyer	eation / Job title (See Instructions)			ver (See Instructions) usman Godfrey LLP	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
02/25/2018	John B Gunn Jr				\$1,000.00
	6. Contributor address;	City; State;	ZIP Code		
	PO Box 720339 Dallas, TX 75372-	0339			
8. Principal occup Not Employed	pation / Job title (See Instructions)			ver (See Instructions) of Employed	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
03/25/2018	Elaine Hahn				\$300.00
	6. Contributor address;	City; State;	ZIP Code		
	465 Melville Ave Palo Alto, CA 94	301-3237			
Principal occup     Community V	pation / Job title (See Instructions) /olunteer		, , ,	yer (See Instructions) one	
4. Date	5. Full name of contributor	Quit-of-state PAC		7. Amount of contribution (\$)	
03/25/2018	Victoria Hall				\$19.61
	Contributor address;	City; State;	ZiP Code		
	1175 Park Ave # NYNY10128 Nev	York, NY 10128-	1211		
Principal occup     Not Employer	pation / Job (itle (See Instructions) d		I	yer (See Instructions) ot Employed	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
04/08/2018	Victoria Hall				\$12.99
	6. Contributor address;	City; State;	ZIP Code		
	1175 Park Ave # NYNY10128 New	v York, NY 10128-	1211		
8. Principal occur Not Employe	pation / Job title (See Instructions)	)	1	yer (See Instructions) lot Employed	

#### SCHEDULE A1

The	Instruction Guide explains how	to complete this for	m.	Total pages Schedule A1:     not available	
2. FILER NAM Lina M. Hida				3. Filer ID (Ethics Commission	Filers)
4. Date	5. Full name of contributor	out-of-state PAC	<u>-</u>	7. Amount of contribution (\$)	
05/06/2018	Victoria Hall	_			\$5.49
	6. Contributor address;	City; State;	ZIP Code		•
	1175 Park Ave # NYNY10128 N	New York, NY 10128-12	211		
8. Principal occ Not Emplo	cupation / Job title (See Instructio	ns)	·	yer (See Instructions) lot Employed	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/30/2018	Devney Hamilton	_			\$25.00
	6. Contributor address;	City; State;	ZIP Code		
	1419 S 14th St Ann Arbor, MI 4	8105			
8. Principal occ Software I	cupation / Job title (See Instructio Developer	ns)		yer (See Instructions) assafras Tech Collective	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/30/2018	Devney Hamilton				\$25.00
	6. Contributor address;	City; State;	ZIP Code		
	1419 S 14th St Ann Arbor, MI 4	8105			
8. Principal occ Software I	cupation / Job title (See Instructio Developer	ns)	1 '	yer (See Instructions) assafras Tech Collective	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
01/21/2018	John Haskell				\$200.00
	6. Contributor address;	City; State;	ZIP Code		
	1546 W Jackson Blvd Chicago,				
8. Principal occ	cupation / Job title (See Instructio	ns)	· · · · · · · · · · · · · · · · · · ·	yer (See Instructions) iggr health	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
02/04/2018	Caitlin Heising				\$2,700.00
	6. Contributor address;	City; State;	ZIP Code		
	383 Walsh Rd Atherton, CA 940	27-6456			
· · · · · · · · · · · · · · · · · · ·	cupation / Job title (See Instructio	ns)		yer (See Instructions) .rticle 3 Advisors	
L	<del> </del>				

#### SCHEDULE A1

The Ins	truction Guide explains how t	o complete this fo	orm.	Total pages Schedule A1:     not available	
2. FILER NAME Lina M. Hidalgo	,			3. Filer ID (Ethics Commission I	Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
05/27/2018	Pilar Hernandez				\$100.00
ì	6. Contributor address;	City; State;	ZIP Code		·
•	1827 W Main St Apt A Houston,	TX 77098-3592			
B. Principal occup Recipe develo	pation / Job title (See Instruction	s)	,	yer (See Instructions) elf employed	· · · · · · · · · · · · · · · · · · ·
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
04/29/2018	Eleanor B Hildreth				\$50.00
	6. Contributor address;	City; State;	ZIP Code		
	3939 Luca St Houston, TX 77021	-4021			
Serve	pation / Job title (See Instruction	s)	<u> </u>	yer (See Instructions)	
market garder			s		
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
16/24/2018	S.Bruce Hiran			8000	\$25.00
- annu	6. Contributor address;	City; State;	ZIP Code		
	PO Box 271053 Houston, TX 772				
8. Principal occup Finance	pation / Job title (See Instruction	s)		yer (See Instructions) Iiran & Streeter	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/17/2018	Corson Hirschfeld				\$10.00
	6. Contributor address;	City; State;	ZIP Code		
	8301 E Cedar Lane Rd Norman, C	OK 73026-5524			
<ol> <li>Principal occup author artist</li> </ol>	pation / Job title (See Instruction	s)	, ·	yer (See Instructions) elf	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
05/09/2018	Jason Hirschhorn				\$833.33
	6. Contributor address;	City; State;	ZIP Code		
	169 Hudson St New York, NY 10	0013-2153			
	pation / Job title (See Instruction	s)	<b>I</b>	yer (See Instructions)	
Media and To	en			REDEF	

#### SCHEDULE A1

The Ins	struction Guide explains how t	o complete	e this for	m.	1.	Total pages Schedule A1: not available	
2. FILER NAME Lina M. Hidalg	0		. (		3.	Filer ID (Ethics Commission Fi	lers)
4. Date	5. Full name of contributor	out-of-st	tate PAC		7.	Amount of contribution (\$)	
03/25/2018	Krista Hoffman			****			\$150.00
	6. Contributor address;	City;	State;	ZIP Code			
	30 La Loma Dr Menlo Park, CA 9	4025-6621					
8. Principal occu Interior Desi	pation / Job title (See Instructions	s)		1	•	(See Instructions) Employed Krista Hoffman Design	
4. Date	5. Full name of contributor	out-of-st	tate PAC _		7.	Amount of contribution (\$)	
02/20/2018	Nicholas Hope						\$150.00
	6. Contributor address;	City;	State;	ZIP Code			
	864 Seminole Way Redwood City	, CA 94062	-3423				
8. Principal occu Lecturer	pation / Job title (See Instruction	s)			•	(See Instructions) ford University	
4. Date	5. Full name of contributor	out-of-s	late PAC		7.	Amount of contribution (\$)	
02/25/2018	Sholeh Huber						\$100.00
	6. Contributor address;	City;	State;	ZIP Code		·	
	422 Rancho Bauer Dr Houston, T	X 77079-68	18				
8. Principal occu Not Employe	pation / Job title (See Instruction	s)	*		-	(See Instructions) Employed	
4. Date	5. Full name of contributor	aut-of-s	tate PAC		7.	Amount of contribution (\$)	
05/23/2018	Cade Hudson						\$40.00
	6. Contributor address;	City;	State;	ZIP Code			
	2000 Avenue of the Stars Laton, C	CA 90967					
8. Principal occu Talent agent	pation / Job title (See Instruction	s)		1 '	yer CA/	(See Instructions)	
4. Date	5. Full name of contributor	Out-of-6	tate PAC	<u>'</u>	7.	. Amount of contribution (\$)	
06/17/2018	L Humphrey						\$1.00
	6. Contributor address;	City;	State;	ZIP Code			
	11400 W Olympic Blvd Ste 590 I	os Angeles	, CA 9006	4-1574			
8. Principal occu Not Employ	upation / Job title (See Instruction ed	B)		1	•	r (See Instructions) Employed	

#### SCHEDULE A1

The In	struction Guide explains how	to complete this fo	orm.	Total pages Schedule A1: not available	and describe
2. FILER NAME Lina M. Hidalg				3. Filer ID (Ethics Commission	Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
01/28/2018	Shannon Hunt-Scott				\$1,000.00
	6. Contributor address;	City; State;	ZIP Code		
	16348 Aztec Ridge Dr Los Gatos	, CA 95030-7500	***************************************		
	3. Principal occupation / Job title (See Instructions)  Not employed  Not employed				
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	<del></del>
05/23/2018	Anna Hunter				\$50.00
	6. Contributor address;	City; State;	ZIP Code		
	1336 Quintero St Los Angeles, C	A 90026-3416			
8. Principal occu writer	pation / Job title (See Instruction	s)	9 Employ se	ver (See Instructions) If	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
04/08/2018	Joel Isaacson		about.		\$100.00
	6. Contributor address;	City; State;	ZIP Code		
	1417 Spruce St Apt G Berkeley,	CA 94709-1478			
8. Principal occu Not employe	upation / Job title (See Instructioned	s)		ver (See Instructions) ot employed	
4. Date	5. Full name of contributor	Out-of-state PAC		7. Amount of contribution (\$)	
06/17/2018	Nadeem Ishaque				\$100.00
	6. Contributor address;	City; State;	ZIP Code		
	3653 Meadow Lake Ln Houston,	TX 77027-4110			
	pation / Job title (See Instruction	s)		er (See Instructions)	
IT Consultar	5. Full name of contributor	_ <u>_</u>	0	ctia Corporation	
4. Date		out-of-state PAC		7. Amount of contribution (\$)	
02/25/2018	Barbara Jackson		710.0		\$25.00
	6. Contributor address;	City, State;	ZIP Code		
0. 5: .: .	1205 Berthea St Houston, TX 776		la = :		
8. Principal occu Artist/Arts I	ipation / Job title (See Instruction Educator	is)		ver (See Instructions) elf	

## SCHEDULE A1

The Ins	struction Guide explains how to complete this form.	Total pages Schedule A1:     not available
2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
02/26/2018	Barbara Jackson	\$100.00
	6. Contributor address; City; State; ZIP Code	
	1205 Berthea St Houston, TX 77006-6411	
8. Principal occup Artist/Arts Ed	·	yer (See Instructions)
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
05/09/2018	Craig Jacobson	\$833.33
	6. Contributor address; City; State; ZIP Code	
	820 Woodacres Rd Santa Monica, CA 90402-2108	
8. Principal occup Attorney		yer (See Instructions) JTH
4. Date	5. Full name of contributor Out-of-state PAC	7. Amount of contribution (\$)
06/29/2018	Joseph Jamail	\$2,500.00
	6. Contributor address; City; State; ZIP Code	
	500 Dallas St Ste 3434 Houston, TX 77002-4802	
Principal occup     Lawyer		yer (See Instructions) amail & Kolius
4. Date	Full name of contributor	7. Amount of contribution (\$)
05/16/2018	Nader Jandaghi	\$2,000.00
	6. Contributor address: City; State; ZIP Code	,
	1417 S Westgate Ave Apt 205 Los Angeles, CA 90025-5278	
	· · · · · · · · · · · · · · · · · · ·	yer (See Instructions)
		JTU Energy Solutions
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
06/29/2018	Muhammed Javed	\$5,000.00
	6. Contributor address; City; State; ZIP Code	
	2710 S 11th St Beaumont, TX 77701-7601	
1999		yer (See Instructions)
CEO	The second secon	Riceland Healthcare Systems

#### SCHEDULE A1

Tha	instruction Guide explains how to comple	te this form.	Total pages Schedule A1: not available	
2. FILER NAM Lina M. Flida			3. Filer ID (Ethics Commission F	ilers)
4. Date	5 Full name of contributorout-of-t	state PAC	7. Amount of contribution (\$)	
06/20/2018	Maria Jimenez		-	\$60.00
*	6. Contributor address; City; 7105 Sherman St Houston, TX 77011-3747	State; ZIP Code		
8. Principal oc	cupation / Job title (See Instructions)	9 Empl	oyer (See Instructions)	•
Research A			UT Health School of Public Health	
4. Date	5. Full name of contributorout-of-	state PAC	7. Amount of contribution (\$)	
06/17/2018	Gregory Johnson			\$25.00
	6. Contributor address; City;	State; ZIP Code		
	100 E Thousand Oaks Blvd Ste 229 Thousan	d Oaks, CA 91360-8163	3	
8. Principal oc Attorney	cupation / Job title (See Instructions)	· · · · · · · · · · · · · · · · · · ·	oyer (See Instructions) Self	
4. Date	5. Full name of contributor	state PAC	7. Amount of contribution (\$)	
05/23/2018	Martha Johnson			\$25.00
	6. Contributor address; City;	State; ZIP Code		
	2046 Saint Johns Ave Apt 3C Highland Park	, IL 60035-2449	<u>š</u>	
	cupation / Job title (See Instructions) Financial Services		øyer (See Instructions) IT Project Manager	
4. Date	5. Full name of contributorout-of-	state PAC	7. Amount of contribution (\$)	
06/03/2018	Polty Johnson			\$25.00
	6. Contributor address; City;	State; ZIP Code	<i>y</i>	
	3600 Montrose Blvd Houston, TX 77006-46	58		
	cupation / Job title (See Instructions)		loyer (See Instructions)	· · · · ·
Retired	E Pull ages of application and		Retired	
4. Date		state PAC	7. Amount of contribution (\$)	
04/18/2018	Ashley Judd			\$166.66
	6. Contributor address; City;	State; ZIP Code		
	10960 Wilshire Blvd Ste 1900 Los Angeles,	CA 90024-3805		
	ecupation / Job title (See Instructions)	4	loyer (See Instructions)	
ACTRESS	S		Self Employed	

#### SCHEDULE A1

The Ins	struction Guide explains how to complete this form.	Total pages Schedule A1:     not available
2. FILER NAME Lina M. Hidalgo	0	3. Filer ID (Ethics Commission Filers)
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
05/16/2018	Adam Kawalek	\$333.33
	6. Contributor address; City; State; ZIP Code	9
	8012 Happy Ln Los Angeles, CA 90046-2013	
8. Principal occu Physician	pation / Job title (See Instructions) 9 Emp	oloyer (See Instructions) Cedars Sinai
4. Date	5 Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
05/23/2018	Kasey Kearley  6. Contributor address; City; State; ZIP Code	\$5.00
	1128 Hollow Creek Dr Apt 2 Austin, TX 78704-1989	
8. Principal occu Registered N		oloyer (See Instructions) Seton
4. Date	5. Full name of contributor Out-of-state PAC	7. Amount of contribution (\$)
01/07/2018	Angelina Keeley	\$200.00
	6. Contributor address; City: State; ZIP Code	,
	1003 Via Presa San Clemente, CA 92672-9449	
8. Principal occu Senior Consu		ployer (See Instructions) Deloite Consulting LLP
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
02/26/2018	Hugh Kelly	\$250.00
	6. Contributor address; City; State; ZIP Code	
	1210 Berthea St Houston, TX 77006-6412	
8. Principal occu Retired	pation / Job title (See Instructions) 9 Em	ployer (See Instructions) Retired
4. Date	Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
05/09/2018	Rory Kennedy	\$166.66
	6. Contributor address; City; State; ZIP Code	
	29169 Heathercliff Rd Ste 204 Malibu, CA 90265-4283	
Principal occu Filmmaker	pation / Job title (See Instructions) 9 Em	ployer (See Instructions)  Moxie Firecracker Films
i iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii		trivite i decidenci i mits

#### SCHEDULE A1

	truction Guide explains how to complete this form.	Total pages Schedule A1:     not available
2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
06/30/2018	Shelley Kennedy	\$100.00
	6. Contributor address; City; State; ZIP Code	413333
	706 Sue Barnett Dr Houston, TX 77018-5412	
1		yer (See Instructions)
Healthcare Co		ennedy Benefits Group
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
06/17/2018	Carol Kern	\$50.00
·	6. Contributor address; City, State; ZIP Code	
	904 Reid St Houston, TX 77022-5900	
	· · · · · · · · · · · · · · · · · · ·	yer (See Instructions)
Not Employee		lot Employed
4. Date	5. Full name of contributor out-of-state PAC	7. Amount of contribution (\$)
02/04/2018	Kyle Kern	\$10.00
	6. Contributor address; City; State, ZIP Code	
	43 Cedar Dunes Dr New Smyrna Beach, FL 32169-3862	
		ver (See Instructions) elf
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
03/04/2018	Kyle Kern	\$10.00
	6. Contributor address; City; State; ZIP Code	
	43 Cedar Dunes Dr New Smyrna Beach, FL 32169-3862	
		yer (See Instructions) elf
4. Date	5. Full name of contributor Out-of-state PAC	7. Amount of contribution (\$)
03/31/2018	Kyle Kern	\$10.00
	6. Contributor address; City; State; ZIP Code	
	43 Cedar Dunes Dr New Smyrna Beach, FL 32169-3862	
	·	yer (See Instructions)

#### SCHEDULE A1

The Ins	struction Guide explains how t	to complete this fo	rm.	1.	Total pages Schedule A1: not available	
2. FILER NAME Lina M. Hidalgo	)			3.	Filer ID (Ethics Commission F	ilers)
4. Date	<ol><li>Full name of contributor</li></ol>	out-of-state PAC		7.	Amount of contribution (\$)	
05/06/2018	Kyle Kern	//				\$10.00
	6. Contributor address;	City; State;	ZIP Code			•••
	43 Cedar Dunes Dr New Smyrna	Beach, FL 32169-380	52			
	pation / Job title (See Instruction wner and operator	s)	1 '	yer elf	(See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7.	Amount of contribution (\$)	
06/03/2018	Kyle Kern					\$10.00
	6. Contributor address;	City; State;	ZIP Code			******
	43 Cedar Dunes Dr New Smyrna	Beach, FL 32169-386	i2			
	pation / Job title (See Instruction	s)	9 Emplo	yer	(See Instructions)	
	wner and operator		S	elf		
4. Date	5. Full name of contributor	out-of-state PAC		7.	Amount of contribution (\$)	
06/30/2018	Kyle Kern					\$10.00
	6. Contributor address;	City; State;	ZIP Code			
	43 Cedar Dunes Dr New Smyrna	Beach, FL 32169-386	52			
8. Principal occup	pation / Job title (See Instruction	3)	9 Emplo	yer	(See Instructions)	
Food Truck o	wner and operator		S	elf		
4. Date	5. Full name of contributor	out-of-state PAC		7.	Amount of contribution (\$)	
05/09/2018	Aleen Keshishiun				:	\$5.00
	<ol><li>Contributor address;</li></ol>	City; State;	ZIP Code			
	160 S Norton Ave Los Angeles, (	CA 90004-3917				
8. Principal occup Talent Manag	pation / Job title (See Instruction ger	s)	<b> </b>	•	(See Instructions) Employed	
4. Date	5. Full name of contributor	Quit-of-state PAC		7.	Amount of contribution (\$)	
05/02/2018	Alek Keshishian					\$167.00
	6. Contributor address;	City; State;	ZIP Code			
	450 N Rossmore Ave Los Angele	es, CA 90004-2406				
, ,	pation / Job title (See Instruction	s)	ı		(See Instructions)	
Film		***************************************	] S	elf		

#### SCHEDULE A1

The	Instruction Guide explains how	to complete this form	1.	Total pages Schedule A1:     not available
2. FILER NAM Lina M. Hida				3. Filer ID (Ethics Commission Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)
02/25/2018	Sharareh Khatami			\$250.00
	6. Contributor address;	City; State; 2	ZIP Code	<b>4.0</b> 5.15
	12303 Longworth Ln Houston, T	'X 77024-6123		
8. Principal oc Not Emple	cupation / Job title (See Instruction	ns)		yer (See Instructions) ot Employed
4. Date	5. Full name of contributor	out-of-state PAC	,	7. Amount of contribution (\$)
02/25/2018	Tina Kingshill			\$5.00
	6. Contributor address;	City; State; 2	ZIP Code	
	11315 Wickersham Ln Houston,	TX 77077-6825		
8. Principal oc	cupation / Job title (See Instruction	ns)	1 ' '	yer (See Instructions) one
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)
06/10/2018	Tina Kingshill			\$25.00
	6. Contributor address;	City; State;	ZIP Code	
	11315 Wickersham Ln Houston,	TX 77077-6825		
8. Principal oc none	cupation / Job title (See Instructio	n <b>s</b> )		yer (See Instructions) one
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)
06/17/2018	Tina Kingshill			\$25.00
	6. Contributor address;	City; State;	ZIP Code	
	11315 Wickersham Ln Houston.	TX 77077-6825		
8. Principal oc	cupation / Job title (See Instructio	ns)	I .	yer (See Instructions)
none	E Full passe of contributes		n <sub>1</sub>	one
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)
04/15/2018	Sam Kohn	<b></b>		\$20.00
	6. Contributor address;	<b>,</b> ,,	ZIP Code	
	1327 Martin Luther King Junior		4	
'	cupation / Job title (See Instructio Student Research Assistant	ns)		yer (See Instructions) Iniversity of California Berkeley
Graduate	Gradom isoscaron Assistant			interesty of Camorina Derkeley

# SCHEDULE A1

The Ins	truction Guide explains how to complete this form.		Total pages Schedule A1:     not available
2. FILER NAME Lina M. Hidalgo	,		3. Filer ID (Ethics Commission Filers)
4. Date	5. Full name of contributor Out-of-state PAC		7. Amount of contribution (\$)
06/29/2018	Louise Lamphere		\$100.00
	6. Contributor address; City; State; ZI	P Code	
:	1 Sutton Pl S Apt 1A New York, NY 10022-2493		
3. Principal occup Self Employe			er (See Instructions) rtist
4. Date	5. Full name of contributor out-of-state PAC		7. Amount of contribution (\$)
03/11/2018	Eric Lane		\$1.00
	6. Contributor address; City; State; ZI	P Code	
	2345 Merton Ave Apt 121 Los Angeles, CA 90041-1970		
		, , ,	er (See Instructions)
Sr. Project M 4. Date	7 20 20 20 20 20 20 20 20 20 20 20 20 20	ra	7. Amount of contribution (\$)
06/26/2018	Tracy Larner	P Code	\$500.00
	3737 Ella Lee Ln Houston, TX 77027-4018		
8. Principal occup Chair	pation / Job title (See Instructions)		ver (See Instructions) ne Orange Show Center
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
06/29/2018	Latino Democratic PAC		\$2,500.00
	6. Contributor address; City; State; ZI	P Code	
	4101 Washington Ave Houston, TX 77007-5635		
8. Principal occup	pation / Job title (See Instructions)	9 Employ	er (See Instructions)
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
06/10/2018	Barbara Lauterbach		\$100.00
	6. Contributor address; City; State; ZI	P Code	
	418 wilcrest houston texas 77042 Houston, TX 77042		
8. Principal occup	pation / Job title (See Instructions)		ver (See Instructions)
		l	

# SCHEDULE A1

The In	estruction Guide explains how to complete this form.	Total pages Schedule A1:     not available
2. FILER NAME Lina M. Hidal		3. Filer ID (Ethics Commission Filers)
4. Date	5. Full name of contributor out-of-state PAC	7. Amount of contribution (\$)
01/21/2018	Leah Lax	\$100.00
	6. Contributor address: City; State; ZIP Code	
	1970 Vermont St Houston, TX 77019-6187	
8. Principal occi Not Employ		oloyer (See Instructions) Not Employed
4. Date	5. Full name of contributor out-of-state PAC	7. Amount of contribution (\$)
05/23/2018	Amy Lederman	\$20.00
	6. Contributor address; City; State; ZIP Code	
	759 N Orange Dr Los Angeles, CA 90038-3309	
8. Principal occi None	upation / Job title (See Instructions) 9 Emp	oloyer (See Instructions)
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
02/18/2018	Jessica Audrey Lee	\$50.00
	6. Contributor address; City; State, ZIP Code	
	3021 Hacienda St San Mateo, CA 94403-3321	
8. Principal occi microbiolog		aloyer (See Instructions) University of Idaho
4. Date	5. Full name of contributor Out-of-state PAC	7. Amount of contribution (\$)
01/14/2018	Karen Lee	\$100.00
	6. Contributor address; City; State; ZIP Code	
	PO Box 152 Ross, CA 94957-0152	
1	upation / Job title (See Instructions) 9 Emp	ployer (See Instructions)
sales		aperio group
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
01/14/2018	Joy Lenz	\$100.00
	6. Contributor address; City; State; ZIP Code	
	5938 Country Club Pkwy San Jose, CA 95138-2302	
8. Principal occi	upation / Job title (See Instructions) 9 Emp	oloyer (See Instructions) Nest
8111241		

# SCHEDULE A1

The ins	struction Guide explains how t	o complete this fo	rm,	Total pages Schedule A1:     not available	
2. FILER NAME Lina M. Hidalgo	)			3. Filer ID (Ethics Commission	Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/03/2018	Sydney Levine				\$5.00
	6. Contributor address;	City; State;	ZIP Code	·	
	545 Somerville Ave Apt IA Some	erville, MA 02143-32	<b>48</b>		
8. Principal occup Scientist	pation / Job title (See Instruction	s)	1	yer (See Instructions) arvard University	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
05/21/2018	Susan Lieberman				\$100.00
	6. Contributor address;	City; State;	ZIP Code		
	1605 Driscoll St Houston, TX 770	)19-5303			
8. Principal occu Retired	pation / Job title (See Instruction	s)		yer (See Instructions) etired	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
02/08/2018	Sergio Lira			,	\$50.00
	6. Contributor address;	City; State;	ZIP Code		
	7001 Sloan St Houston, TX 7708	7-3538			
8. Principal occup Trustee	pation / Job title (See Instruction	s)	1 ' '	ver (See Instructions) ISD	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
04/08/2018	Selina Lo	*			\$2,000.00
	6. Contributor address;	City; State;	ZIP Code		
	301 Santa Rita Ave Palo Alto, CA	\ 94301- <mark>3942</mark>			
Principal occul     Not Employe	pation / Job title (See Instruction	S)	999999	yer (See Instructions) ot Employed	•
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
03/25/2018	Pam Loebig				\$1.00
	6. Contributor address;	City; State;	ZIP Code		
	426 High Pkwy Golden, CO 8040	03-1554			
8. Principal occu Consultant	pation / Job title (See Instruction	s)	9000000	yer (See Instructions) IcKinsey & Co	

#### SCHEDULE A1

The Ins	nstruction Guide explains how to complete this form.  1. Total pages Sc not available.	hedule A1:
2. FILER NAME Lina M. Hidalge		Commission Filers)
4. Date	5. Full name of contributorout-of-state PAC 7. Amount of cont	ribution (\$)
01/28/2018	Teresa Luchsinger	\$25.00
	6. Contributor address; City; State; ZIP Code	<b>4.10</b> 1-20
	35 Palmer Ln Portola Valley, CA 94028-7917	•
8. Principal occur	upation / Job title (See Instructions)  9 Employer (See Instruction none	s)
4. Date	5. Full name of contributor	ribution (\$)
01/21/2018	Wei Luo	\$5.00
	6. Contributor address; City; State; ZIP Code	
	5934 Sanctuary St Lisle, 1L 60532-0694	
8. Principal occul Consultant	upation / Job title (See Instructions)  9 Employer (See Instruction  QRM	s)
4. Date	5. Full name of contributorout-of-state PAC7. Amount of cont	ribution (\$)
02/18/2018	Wei Luo	\$5.00
	6. Contributor address; City; State; ZIP Code	
	5934 Sanctuary St Lisle, IL 60532-0694	
8. Principal occul Consultant	upation / Job title (See Instructions) 9 Employer (See Instruction QRM	s)
4. Date	5. Full name of contributor []out-of-state PAC7. Amount of cont	ribution (\$)
04/15/2018	Wei Luo	\$5.00
	6. Contributor address; City; State; ZIP Code	
,	5934 Sanctuary St Lisle, IL 60532-0694	
8. Principal occur Consultant	upation / Job title (See Instructions)  9 Employer (See Instruction QRM	s)
4. Date	5. Full name of contributor Out-of-state PAC 7. Amount of cont	ribution (\$)
06/24/2018	Wei Luo	\$5.00
	6. Contributor address; City; State; ZIP Code	•
	5934 Sanctuary St Lisle, 1L 60532-0694	
l .	upation / Job title (See Instructions) 9 Employer (See Instruction	s)
Consultant	QRM	

# SCHEDULE A1

The Instruction Guide explains how to complete this form.			Total pages Schedule A1:     not available	
2. FILER NAME Lina M. Hidalgo			3. Filer ID (Ethics Commission Filers)	
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)	
02/25/2018	Piper Madland			510.00
	6. Contributor address; City; State; Z	IP Code		
	3618 Wickersham Ln Houston, TX 77027-4138			
8. Principal occup Not Employe	pation / Job title (See Instructions) d		rer (See Instructions) ot Employed	
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)	
06/29/2018	Qaisar Mahdi		\$1	00.00
	6. Contributor address; City; State; Z	P Code	**	
	83 Twin Valley Dr Sugar Land, TX 77479-5650			
8. Principal occup	pation / Job title (See Instructions)	9 Employ	er (See Instructions)	
4. Date	5. Full name of contributorout-of-state PAC	•	7. Amount of contribution (\$)	
02/25/2018	Timothy Maher .			\$50.00
	6. Contributor address; City; State; Z	IP Code		!
	6016 Burgoyne Rd Houston, TX 77057-2904	<i></i>		
8. Principal occup Investor	pation / Job title (See Instructions)	9 Employ Se	er (See Instructions) elf	
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)	
01/21/2018	Joseph Manganiello		9	\$15.00
	6. Contributor address; City; State; Z	IP Code		
	84 Brattle St # 222 Cambridge, MA 02138-3452			
Principal occup     Analyst	pation / Job title (See Instructions)		rer (See Instructions) S Govt	
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)	
04/20/2018	Mitra Mansouri			883.34
	6. Contributor address; City; State; Z	IP Code		
	163 S Barrington Pl Los Angeles, CA 90049-3305			
.000000	pation / Job title (See Instructions)	1	ver (See Instructions)	
Esthetician			est Tout	

#### SCHEDULE A1

. The Ins	truction Guide explains how	to complete thi	s form.	Total pages Schedule A1: not available	
2. FILER NAME Lina M. Hidalgo			-	3. Filer ID (Ethics Commission	Filers)
4. Date	5. Full name of contributor	Qui-of-state P.	AC	7. Amount of contribution (\$)	
04/20/2018	Ashlee Margolis	***			\$250.00
	6. Contributor address;	City; Ste	ite; ZIP Code		
	9292 Civic Center Dr Beverly H	ills, CA 90210-37	14		
Principal occup Founder	pation / Job title (See Instruction	ns)	9 Emp	loyer (See Instructions) The A List	
4. Date	5. Full name of contributor	out-of-state P.	AC	7. Amount of contribution (\$)	
04/19/2018	Julianna Marguties		****		\$333.33
	6. Contributor address;	City; Sta	ate, ZIP Code		
	200 Park Ave S Fl 8 New York,	NY 10003-1526			
8. Principal occup Actor	pation / Job title (See Instruction	ns)	9 Emp	loyer (See Instructions) AMC	
4. Date	5. Full name of contributor	out-of-state P	AC	7. Amount of contribution (\$)	
01/21/2018	Bruce Martin				\$5.00
	6. Contributor address;	City; Sta	ate; ZIP Code		
	5406 Oaklynn Dr. Spring TX 77	373 US Spring, T	X 77373		
8. Principal occup Professor	pation / Job title (See Instruction	ns)	9 Emp	loyer (See Instructions) Lone Star College	
4. Date	5. Full name of contributor	out-of-state P	AC	7. Amount of contribution (\$)	
01/28/2018	Bruce Martin				\$15.00
	6. Contributor address;	City; Sta	ate; ZIP Code		
	5406 Oaklynn Dr. Spring TX 77	373 US Spring, T.	X 77373		
8. Principal occur Professor	pation / Job title (See Instructio	ns)	9 Emp	foyer (See Instructions) Lone Star College	
4. Date	5. Full name of contributor	out-of-state P	AC	7. Amount of contribution (\$)	
05/09/2018	GKP Martin				\$250.00
	6. Contributor address;	City; Sta	ate; ZIP Code		
	1301 Avenue Of The Americas I	Fl 10 New York,	Y 10019-6036		
Principal occup     artist	pation / Job title (See Instructio	ns)	9 Emp	loyer (See Instructions) Harmony House	

# SCHEDULE A1

The Instruction Guide explains how to complete this form.			Total pages Schedule A1:     not available		
2. FILER NAM Lina M. Hida				3. Filer ID (Ethics Commission F	ilers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
01/21/2018	Lonne Martinec				\$5.00
	6. Contributor address;	City; State;	ZIP Code		
	505 Joyce St Houston, TX 77009	<b>)-2733</b>		,	
8. Principal oce Trainer/Se	cupation / Job title (See Instruction	ns)	1 .	yer (See Instructions) loode Company Seafood	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
04/19/2018	Esther Martinez	_			\$50.00
	6. Contributor address;	City; State;	ZIP Code		
	802 Avenue Of Oaks St Houston	,TX 77009-1418			
8. Principal oc Harris Cou	cupation / Job title (See Instruction unty	ns)		yer (See Instructions) (ammography Case Manager	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
03/11/2018	Shaniqua McClendon				\$50.00
	6. Contributor address;	City; State;	ZIP Code	**	
	54 Foster St Cambridge, MA 02	138-4817			
8. Principal oc Not Emplo	cupation / Job title (See Instruction byed	18)		yer (See Instructions) lot Employed	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
01/04/2018	Mark McClung	v			\$250.00
	6. Contributor address;	City; State;	ZIP Code		
	4156 Kite Meadow Dr Plano, TX	75074-7778			
8. Principal oc Electrical	cupation / Job title (See Instruction Engineer	าร)	1 '	yer (See Instructions) exas Instrument	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
01/21/2018	Andy McGarrahan				\$3.00
	6. Contributor address;	City; State;	ZIP Code		
	7110 Canongate Dr Dallas, TX 7	25248-1505			
	cupation / Job title (See Instruction	ns)	1 '	yer (See Instructions)	
Psycholog	ist		S	elf	

# SCHEDULE A1

The Instruction Guide explains how to complete this form.			Total pages Schedule A1: not available		
2. FILER NAMI Lina M. Hida				3. Filer ID (Ethics Commission	n Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
03/25/2018	Linda McGeever				\$2,700.00
	6. Contributor address;	City; State; Z	ZIP Code		
	191 Durazno Way Portola Valley	, CA 94028-7408			
8. Principal occ Not Emplo	cupation / Job title (See Instruction yed	s)	1	ver (See Instructions) ot Employed	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/18/2018	Sherri McGinty				\$50.00
	6. Contributor address;	City; State; Z	ZIP Code		
	2771 Essex Ter Houston, TX 770	27-5211			
	cupation / Job title (See Instruction	ns)	-xxx00000x	ver (See Instructions)	
KPFT 90.1				o-Host and Producer	
4. Date	5. Full name of contributor	out-of-state PAC	<del></del>	7. Amount of contribution (\$)	
06/17/2018	Sylvia Medina				\$50.00
	6. Contributor address;	City; State, 2	ZIP Code		
	1209 Elliston St Houston, TX 77	023-3607	<b>*</b>		
8. Principal occ Events	cupation / Job title (See Instruction	15)	1	ver (See Instructions) rown Castle	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
04/08/2018	Evelyn Merz				\$100.00
	6. Contributor address;	City, State; 2	ZIP Code		
	7095 Santa Fe Dr Houston, TX 7	7061-2619			
	cupation / Job title (See Instruction	ns)		er (See Instructions)	
Not Emplo	<u> </u>		N	ot Employed	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
05/01/2018	Rozita Mesbah				\$2,500.00
	6. Contributor address;	City; State; 2	ZIP Code		
	701 Shepherd Dr Ste 200 Housto	n, TX 77007-5593			
	supation / Job title (See Instruction	ns)	1 '	yer (See Instructions)	
Anesthesic	logist		j M	lemorial Hospital	

# Page - 46

#### MONETARY POLITICAL CONTRIBUTIONS

#### SCHEDULE A1

The ins	truction Guide explains how to complete this form.	Total pages Schedule A1:     not available
2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)
I. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
5/09/2018	Kelly Meyer	\$166.66
	6. Contributor address; City; State; ZIP C	
	15821 Ventura Blvd Ste 270 Encino, CA 91436-4775	
B. Principal occup	pation / Job title (See Instructions) 9 8	Employer (See Instructions)
1. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
02/04/2018	Christina Michaelis	\$200.00
	6. Contributor address; City; State; ZIP C	Code
	1525 Nashua St Houston, TX 77008-3749	
250000-	pation / Job title (See Instructions) 9 I	Employer (See Instructions)
physician		the endocrine center
1. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
11/21/2018	Thomas Miller	\$100.00
	6. Contributor address; City; State; ZIP C	ode
	725 Washington St # 300 Oakland, CA 94607-3924	
3. Principal occup Lawyer	pation / Job title (See Instructions) 9 6	Employer (See Instructions) Miller Washington & Kim
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
02/11/2018	Thomas Miller	\$100.00
	6. Contributor address; City; State; ZIP C	Code
	725 Washington St # 300 Oakland, CA 94607-3924	
	pation / Job title (See Instructions) 9 I	Employer (See Instructions)
Lawyer		Miller Washington & Kim
1. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
02/25/2018	Thomas Miller	\$100.00
	6. Contributor address; City; State; ZIP C	Code
<u></u>	725 Washington St # 300 Oakland, CA 94607-3924	
	pation / Job title (See Instructions) 9 I	Employer (See Instructions)
Lawyer		Miller Washington & Kim

#### SCHEDULE A1

The Instruction Guide explains how to complete this form.			Total pages Schedule A1:     not available		
2. FILER NAM Lina M. Hida				3. Filer ID (Ethics Commission	Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
03/11/2018	Thomas Miller				\$100.00
	6. Contributor address;	City; State;	ZIP Code		
	725 Washington St # 300 Oaklan	d, CA 94607-3924			
8. Principal oc Lawyer	cupation / Job title (See Instruction	ns)		yer (See Instructions) filler Washington & Kim	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/03/2018	Thomas Miller				\$100.00
	6. Contributor address;	City; State;	ZIP Code		
	725 Washington St # 300 Oaklan	d, CA 94607-3924		<b>*</b>	
8. Principal oc Lawyer	cupation / Job title (See Instruction	ns)	A00000000000	yer (See Instructions) filler Washington & Kim	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
03/01/2018	Silvia Mintz				\$250.00
	6. Contributor address;	City; State;	ZIP Code		
!	4703 Brady St Houston, TX 770	11-3101			
8. Principal oc Lawyer	cupation / Job title (See Instruction	ns)	***	yer (See Instructions) aw Office of Silvia Mintz	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/30/2018	Amir Mireskandari				\$2,500.00
	6. Contributor address;	City, State;	ZIP Code		
	331 Pinchaven Dr Houston, TX	77024-3722			
8. Principal oc CEO	cupation / Job title (See Instruction	15)		yer (See Instructions) feres Rand Clark & Assoc	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
02/25/2018	Jimena Molina				\$50.00
	6. Contributor address;	City; State;	ZIP Code		
	2614 Silent Spring Creek Dr Kat	y, TX 77450-5729			
. ***	cupation / Job title (See Instruction	าร)	1 '	yer (See Instructions)	
Not Empl	oyed		N	lot Employed	

# SCHEDULE A1

The In	estruction Guide explains how to complete this form.	Total pages Schedule A1:     not available
2. FILER NAME Lina M. Hidalg		3. Filer ID (Ethics Commission Filers)
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
01/28/2018	Sandy Monteko-Sherman	\$100.00
	6. Contributor address; City; State; ZIP C	l ·
	937 Ashbury St San Francisco, CA 94117-4408	
8. Principal occu Not Employ		Employer (See Instructions)  Not Employed
4. Date	5. Full name of contributor out-of-state PAC	7. Amount of contribution (\$)
05/27/2018	Margarita Montoya	\$10.00
	6. Contributor address; City, State; ZIP C	ode
	20450 Purple Sunset Ct Katy, TX 77449-3690	
8. Principal occu Logistic	upation / Job title (See Instructions) 9 E	Employer (See Instructions) . Penco Group Inc.
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
06/18/2018	Gloria Moreno	\$100.00
	6. Contributor address; City; State; ZIP C	ode
,	236 N Nagle St Houston, TX 77003-1558	
8. Principal occu Assistant Di		Employer (See Instructions) City of Houston
4. Date	5. Full name of contributor Out-of-state PAC	7. Amount of contribution (\$)
06/18/2018	Lucy Moreno	\$50.00
	6. Contributor address; City; State; ZIP C	øde
	615 Spell St Houston, TX 77022-2531	
8. Principal occu Retired	upation / Job title (See Instructions) 9 1	Employer (See Instructions) Retired
4. Date	5. Full name of contributorout-ot-state PAC	7. Amount of contribution (\$)
06/18/2018	Susan Moreno	\$75.00
	6. Contributor address; City; State; ZIP C	code
•	1831 Viking Dr Houston, TX 77018-1719	
ĺ	·	Employer (See Instructions)
University o	f Houston	Manager

# SCHEDULE A1

The In	struction Guide explains how to comple	te this forr	m,	Total pages Sched not available	ule A1:
2. FILER NAME Lina M. Hidalg	0			3. Filer ID (Ethics Cor	nmission Filers)
4. Date	5. Full name of contributorout-of-	state PAC		7. Amount of contribu	tion (\$)
01/14/2018	Ken Morris				\$1,000.00
	6. Contributor address; City;	State;	ZIP Code		41,000,000
	PO Box 81 Ross, CA 94957-0081				
8. Principal occu Writer/autho	pation / Job title (See Instructions)		9 Employ	yer (See Instructions)	
4. Date	5. Full name of contributorout-of-	state PAC		7. Amount of contribu	tion (\$)
04/19/2018	Mary Morrison				\$20.00
	6. Contributor address; City;	State;	ZIP Code		
	5823 Doliver Dr Houston, TX 77057-2455				
Principal occu     HR manager	pation / Job title (See Instructions)			ver (See Instructions) BS	
4. Date	5. Full name of contributorout-of-	state PAC		7. Amount of contribu	tion (\$)
06/30/2018	Anne Moses				\$50.00
	6. Contributor address; City;	State;	ZIP Code		
	251 28th St San Francisco, CA 94131-2303			<del>3"</del>	
Principal occu     adjunct facul	pation / Job title (See Instructions) ty			yer (See Instructions) lills College	
4. Date	5 Full name of contributorout-of-	state PAC	·	7. Amount of contribu	tion (\$)
02/25/2018	Main Mosse				\$10.00
	6. Contributor address; City;	State;	ZIP Code		
	160 Comstock Cir # N3403B Stanford, CA 9	4305-7111			
8. Principal occu Student	pation / Job title (See Instructions)			yer (See Instructions) anford Medicine	
4. Date	5. Full name of contributorout-of-	state PAC		7. Amount of contribu	tion (\$)
06/30/2018	Sambar Mukerji				\$250.00
	6. Contributor address; City;	State:	ZIP Code		
	2405 Smith St Houston, TX 77006-2315				
8. Principal occu Attorney	pation / Job title (See Instructions)		, ,	ver (See Instructions) lukerji Law Firm	

# SCHEDULE A1

The In	struction Guide explains how	to complete this fo	rm.	Total pages Schedule A1:     not available	
2. FILER NAME Lina M. Hidalş				3. Filer ID (Ethics Commission	Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
02/25/2018	Edward Munoz				\$200.00
	6. Contributor address;	City; State;	ZIP Code		
	806 Oakley St Houston, TX 7700	6-5920	No.		
8. Principal occu Not Employ	upation / Job title (See Instruction ed	s)		ver (See Instructions) ot Employed	**
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
01/07/2018	Oren Murphy				\$25.00
•	6. Contributor address;	City; State;	ZIP Code		
i	71 Cliff Rd Portsmouth, NH 0386	01-5523			
8. Principal occu Consultant	upation / Job title (See Instruction	s)	000000000000000000000000000000000000000	yer (See Instructions) elf-Employed	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	-
06/30/2018	Kevin Murray		4/		\$500.00
	6. Contributor address;	City; State;	ZIP Code	·	
	5075 Westheimer Rd Houston, T.	X 77056-5643			
8. Principal occu Attorney	upation / Job title (See Instruction	s)	1	yer (See Instructions) evin A. Murray LLC	
4. Date	5. Full name of contributor	out-of-state PAC	<u> </u>	7. Amount of contribution (\$)	
05/16/2018	Max Mutchnick				\$1,000.00
	6. Contributor address;	City; State;	ZIP Code		
	10990 Wilshire Blvd Fl 8 Los An	geles, CA 90024-391	8		
,	upation / Job title (See Instruction roducer of Witl & Grace	s)		yer (See Instructions) BC/Universal	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
01/28/2018	Wallis Nader		•		\$500.00
	6. Contributor address;	City; State;	ZIP Code		
	2001 Westheimer Rd Apt 326 Ho	uston, TX 77098-158	5		
	upation / Job title (See Instruction	s)		yer (See Instructions)	<del> </del>
Attorney			Т	exas Civil Rights Project	· · · · · · · · · · · · · · · · · · ·

# SCHEDULE A1

The Instruction Guide explains how to complete this form.			Total pages Schedule A1:     not available	
2. FILER NAME Lina M. Hidalgo			3. Filer ID (Ethics Commission Filers)	_
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)	_
06/30/2018	Catherine Navarro		\$1.00	
	6. Contributor address; City; State;	ZIP Code		
	3399 Bennett Dr Apt 28 Los Angeles, CA 90068-1764			
Principal occup     Paralegal	pation / Job title (See Instructions)		yer (See Instructions) MNSGZ LLP	<b>*</b>
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)	Ĭ
05/16/2018	Abdi Nazemian		\$33.34	***
	6. Contributor address; City; State;	ZIP Code		
	8045 Selma Ave Los Angeles, CA 90046-2508			
Principal occup     Writer	pation / Job title (See Instructions)		/er (See Instructions) elf-Employed	
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)	
03/11/2018	Michael Nichols		\$100.00	
	6. Contributor address; City; State;	ZIP Code		
	2122 Dunstan Rd Houston, TX 77005-1624			
8. Principal occup Not Employe	pation / Job title (See Instructions)		ver (See Instructions) ot Employed	
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)	
06/18/2018	Anna Nunez		\$50.00	
	6. Contributor address; City; State;	ZIP Code		
	729 E 10th 1/2 St Houston, TX 77008-7107			
D. 900000, "9000000000000.	pation / Job title (See Instructions)		ver (See Instructions)	
UT Health 4. Date	5. Full name of contributor Quitof-state PAC	C	oordinator, Special Programs  7. Amount of contribution (\$)	_
06/18/2018	Alicia Jean Nuzzie		7. Amount of contribution (\$)	
00/18/2018		ZID Codo	\$50.00	
	,	ZIP Code		
9 Principal control	1510 Wakefield Dr Houston, TX 77018-5132	O Smale	ver (See Instructions)	_
	pation / Job title (See Instructions) y District Attorney's Office		yer (See Instructions) onsultant	

# SCHEDULE A1

l <del></del>					
The Ins	struction Guide explains how to	o complete this for	rm.	Total pages Schedule A1:     not available	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
2. FILER NAME Lina M. Hidalgo	)			3. Filer ID (Ethics Commission	Filers)
4. Date	5. Full name of contributor	out-of-state PAC _		7. Amount of contribution (\$)	
05/06/2018	Dominic Orr				\$500.00
	6. Contributor address;	City; State;	ZIP Code		
	2001 Junipero Serra Blvd Ste 550	Daly City, CA 94014	-3889		
8. Principal occupation / Job title (See Instructions)  Not employed  9 Employer (See Instructions)  Not employed					
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
02/05/2018	Stephanie Osbourne		<b>I</b>		\$5.00
	6. Contributor address;	City; State;	ZIP Code		
	85 Roberta Dr Woodside, CA 940	62-2524			
8. Principal occup  Educator	pation / Job title (See Instructions	3)		yer (See Instructions) elf Employed	
4. Date	5. Full name of contributor	Out-of-state PAC	3.	7. Amount of contribution (\$)	
01/21/2018	Miles Osgood				\$15.00
	6. Contributor address;	City; State;	ZIP Code		\$13.00
	303 Summer St # 2 Somerville, M	A 02144-3113			
8. Principal occuj Graduate Stu	pation / Job title (See Instructions dent	3)	1 ' '	yer (See Instructions) avard University	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
03/04/2018	Laura J. Ostapenko	2000000			\$25.00
	6. Contributor address;	City; State;	ZIP Code		
	64 Linnaean St Cambridge, MA 0	2138-1502	8		
	pation / Job title (See Instructions	3)	1	yer (See Instructions)	
physician 4. Date	5. Full name of contributor	, , , , , , , , , , , , , , , , , , ,		righam and Women's Hospital  7. Amount of contribution (\$)	
03/11/2018		out-of-state PAC _		7. Amount or contribution (4)	
03/11/2018	Benjamin Ostrower		710.0-4-		\$2.50
	6. Contributor address;	City, State;	ZIP Code		
	1913 12th St NW Apt B Washingt				
8. Principal occup Self Employe	pation / Job title (See Instructions	5)		yer (See Instructions) /ide Eye Creative	
L	· · · · · · · · · · · · · · · · · · ·			The Life Clemite	

# SCHEDULE A1

The t	nstruction Guide explains how t	to complete this for	rm.	Total pages Schedule A1:     not available	
2. FILER NAM Lina M. Hida				3 Filer ID (Ethics Commission I	Filers)
4. Date	5. Full name of contributor	out-of-state PAC	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	7. Amount of contribution (\$)	
03/11/2018	Michelle Palmer			138888	\$25.00
	6. Contributor address;	City; State;	ZIP Code		
	2300 Lazy Hollow Dr Houston, T	X 77063-2500			•
8. Principal occ Teacher	cupation / Job title (See Instruction	s)	1	yer (See Instructions) ouston ISD	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/17/2018	Michelle Palmer				\$5.00
	6. Contributor address;	City; State;	ZIP Code		
	2300 Lazy Hollow Dr Houston, T	X 77063-2500			
8. Principal occ Teacher	cupation / Job title (See Instruction	s)		yer (See Instructions) ouston ISD	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
05/16/2018	Shekar Panbehchi				\$2,000.00
	6. Contributor address;	City; State;	ZIP Code		
	1417 S Westgate Ave Apt 205 Lo	os Angeles, CA 90025-	5278		
8. Principal occ Wellness C	cupation / Job title (See Instruction Consultant	s)	· _ ·	yer (See Instructions) elf Employed	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
03/11/2018	Susan Phipps Carr				\$5.00
	6. Contributor address;	City; State;	ZIP Code		
	14603 Morningside View Dr Hou	iston, TX 77047-3267			
8. Principal occ Not Emplo	cupation / Job title (See Instruction yed	s)	1	yer (See Instructions) ot Employed	
4. Date	5. Full name of contributor	Dut-of-state PAC		7. Amount of contribution (\$)	
06/20/2018	Ann Pinchak				\$40.00
	6. Contributor address;	City; State;	ZIP Code		
	4503 Park Dr Houston, TX 77023	3-1104			
8. Principal occ Not Emplo	cupation / Job title (See Instruction lyed	s)		yer (See Instructions) ot Employed	

# SCHEDULE A1

The Ins	truction Guide explains how to complete this form.		Total pages Schedule A1:     not available
2. FILER NAME Lina M. Hidalgo	)		3. Filer ID (Ethics Commission Filers)
4. Date	5. Full name of contributor out-of-state PAC		7. Amount of contribution (\$)
06/24/2018	Ann Pinchak		\$5.00
	6. Contributor address; City; State; ZI	P Code	
	4503 Park Dr Houston, TX 77023-1104		
8. Principal occur Not Employe	· · · · · · · · · · · · · · · · · · ·		er (See Instructions) of Employed
4. Date	5. Full name of contributoraut-of-state PAC		7. Amount of contribution (\$)
01/22/2018	Cathy Podell		\$2,000.00
	6. Contributor address; City; State; Zi	P Code	
	2200 Ralston Ave Hillsborough, CA 94010-6462		
8. Principal occup Retired	pation / Job title (See Instructions)		er (See Instructions) tired
4. Date	5. Full name of contributoroul-of-state PAC		7. Amount of contribution (\$)
06/10/2018	1000 Uptown Park Blvd Apt 242 Houston, TX 77056-3243	P Code	\$\$00.00
Principal occup     Retired	pation / Job title (See Instructions)		er (See Instructions)
4. Date	5. Full name of contributor Out-of-state PAC		7. Amount of contribution (\$)
05/02/2018	Emily Procter		\$333.33
,	6. Contributor address; City; State; ZI	P Code	
	9461 Charleville Blvd # 139 Beverly Hills, CA 90212-3017	·	
8. Principal occup	pation / Job title (See Instructions)	9 Employ	er (See Instructions)
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
06/30/2018	Asaf Qadeen		\$250.00
	6. Contributor address; City; State; Zi	P Code	
	8660 Memorial Dr Houston, TX 77024-7014		
Principal occup     Physician	pation / Job title (See Instructions)	9 Employ Se	er (See Instructions) If

#### SCHEDULE A1

The I	Instruction Guide explains how	to complete this fo	rm,	Total pages Schedule A1: not available	
2. FILER NAM Lina M. Hida	<del></del>	,		3. Filer ID (Ethics Commission	Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	<u> </u>
06/18/2018	Eamonn Quigley				\$250.00
	6. Contributor address;	City; State;	ZIP Code		<b>*</b>
	3110 Sunset Blvd Houston, TX 7	7005-2152			
8. Principal occ Houston M	cupation / Job title (See Instruction lethodist	s)		yer (See Instructions) hysician	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
05/21/2018	Robert Randall				\$200.00
	6. Contributor address;	City; State;	ZIP Code		****
	1060) Bassoon Dr Houston, TX	77025-5703			
8. Principal occ	cupation / Job title (See Instruction	s)	9 Emplo	yer (See Instructions)	
Retired			R	etired	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
01/14/2018	Amy Rao				\$2,500.00
	6. Contributor address;	City; State;	ZIP Code	i i	
	228 Seale Ave Palo Alto, CA 943	101-3731			
8. Principal oco CEO	cupation / Job title (See Instruction	s)	88888 .88	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
03/25/2018	Amy Rao				\$2,500.00
	6. Contributor address;	City; State;	ZIP Code		
	228 Seale Ave Palo Alto, CA 943	301-3731		****	
8. Principal oci CEO	cupation / Job title (See Instruction	ıs)	1 '	yer (See Instructions) AS	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
05/16/2018	Annabel Raymond				\$100.00
	6. Contributor address;	City; State;	ZIP Code		
	5444 Red Oak Dr Los Angeles, C	CA 90068-2549			
	cupation / Job title (See Instruction & Family Therapist	is)		yer (See Instructions) elf Employed	
			l		

# SCHEDULE A1

The (	Instruction Guide explains how t	to complete this form	n.	Total pages Schedule A1:     not available	
2. FILER NAM Lina M. Hida	<del></del>			3. Filer ID (Ethics Commission	Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/30/2018	Arif Rehmatulla				\$5,000.00
	6. Contributor address;	City; State;	ZIP Code		***,
	208 Kinkaid School Dr Piney Poi	nt Village, TX 77024-7	500	•	
8. Principal occ business	cupation / Job title (See Instruction	s)		yer (See Instructions) elf employed	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	<del></del> :
03/11/2018	Otis Reid				\$25.00
	6. Contributor address;	City; State;	ZIP Code		
	60 Bishop Richard Allen Dr Cam	bridge, MA 02139-3418	8		
8 Principal oci MIT	cupation / Job title (See Instruction	s)		yer (See Instructions) tudent	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/17/2018	Otis Reid		*		\$25.00
	6. Contributor address;	City; State;	ZIP Code		
	1310 U St NW Apt 315 Washing	ton, DC 20009-6462			
8. Principal occ Data Scien	cupation / Job title (See Instruction	s)		ver (See Instructions) fuel abs	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
05/09/2018	Michele Reiner				\$375.00
	6. Contributor address;	City; State;	ZIP Code	***************************************	**
	10474 Santa Monica Blvd Ste 40.	5 Los Angeles, CA 9002	25-6932		
	cupation / Job title (See Instruction	s)	1 .	yer (See Instructions)	
Photograph			S	elf Employed	
4. Date	5. Full name of contributor	out-of-state PAC CO	00829154	7. Amount of contribution (\$)	
03/29/2018	Resurgent Left				\$1,000.00
	6. Contributor address;	City; State;	ZIP Code		
	770 S Grand Ave Apt 6102 Los A	ingeles, CA 90017-395	7		
8. Principal oc	cupation / Job title (See Instruction	s)	9 Emplo	yer (See Instructions)	<del></del>

# SCHEDULE A1

The	Instruction Guide explains how t	to complete this fo	rm.	Total pages Schedule A1:     not available	
2. FILER NAM Lina M. Hida				3. Filer ID (Ethics Commission (	ilers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/01/2018	Cindy Rice			900-n	\$20.00
	6. Contributor address;	City; State;	ZIP Code		
	3510 Westridge St Houston, TX 7	77025-4141			
8. Principal oc Retired	cupation / Job title (See Instruction	s)		yer (See Instructions) etired	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/30/2018	Catherine Rivera		:		\$250.00
	6. Contributor address;	City; State;	ZIP Code		
	1638 Woodcrest Dr Houston, TX	77018-5807			
8. Principal oc Office Ma	ccupation / Job title (See Instruction	s)		yer (See Instructions) angrand	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
05/09/2018	Erica Rivinoja	Second Second			\$50.00
	6. Contributor address;	City; State;	ZIP Code		
:	937 S Longwood Ave Los Angel	es, CA 90019-1753			
8. Principal oc Writer	ccupation / Job title (See Instruction	s)		yer (See Instructions) Oth Century Fox	
4. Date	5. Full name of contributor	ut-of-state PAC		7. Amount of contribution (\$)	
05/30/2018	Monica Rodman		*		\$50.00
	6. Contributor address;	City; State;	ZIP Code		
	11668 Kiowa Ave Apt 308 Los A	ingeles, CA 90049-62	99		
Principal occupation / Job title (See Instructions)     Not Employed			yer (See Instructions) ot Employed	<del></del>	
4. Date	5. Full name of contributor	ut-of-state PAC		7. Amount of contribution (\$)	
03/01/2018	James Rodriguez				\$1,000.00
	6. Contributor address;	City; State;	ZIP Code		
	768 Sue Barnett Dr Houston, TX	77018-5412			
	ccupation / Job title (See Instruction	is)		yer (See Instructions)	
Attorney		****	P	adilla & Rodriguez	

#### SCHEDULE A1

The Ir	nstruction Guide explains how t	o complete this form	٦.	Total pages Schedule A1:     not available	
2. FILER NAME Lina M. Hidal				3. Filer ID (Ethics Commission	Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
02/08/2018	Matt Rogers 6. Contributor address; 65 Montelair Ter San Francisco, 0		ZIP Code		\$20,000.00
8. Principal occ Engineer	upation / Job title (See Instruction	s)		er (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
05/23/2018	Shari Rohan	_			\$10.00
	6. Contributor address;	City; State;	ZIP Code		<b>\$.0</b> .00
	213 8th Ave Watervliet, NY 1218	9-3511			
8. Principal occ Registered i	upation / Job title (See Instruction	s)	9 Employ	er (See Instructions)	
4. Date	5. Full name of contributor	Dut-of-state PAC	· · · · · · · · · · · · · · · · · · ·	7. Amount of contribution (\$)	
06/10/2018	Robert N Romero		`		\$100.00
	Contributor address;	City; State;	ZIP Code		
	9910 Emnora Ln Houston, TX 77	080-5102			
8. Principal occ Retired	upation / Job title (See Instruction	s) .	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	er (See Instructions)	
4. Date	5. Full name of contributor	Out-of-state PAC		7. Amount of contribution (\$)	
06/18/2018	Sarah Rothenberg				\$100.00
	6. Contributor address;	City; State;	ZIP Code		
	1230 Harvard St Houston, TX 776	008-6941			
	upation / Job title (See Instruction ector/Pianist	s)	'988888' "	rer (See Instructions) A Camera of Houston	
4. Date	5. Full name of contributor	out-of-state PAC	-4	7. Amount of contribution (\$)	
02/04/2018	Jozef Ruck				\$2,700.00
	6. Contributor address;	City; State;	ZIP Code		
	780 Ringwood Ave Menlo Park,				
8. Principal occ Not Employ	upation / Job title (See Instruction	s)	1 ' '	ver (See Instructions)	
rior Employ	, v			or isinprojes	

#### SCHEDULE A1

The I	nstruction Guide explains how to complete this form.		Total pages Schedule A1:     not available
2. FILER NAME Lina M. Hidal			3. Filer ID (Ethics Commission Filers)
4. Date	Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
03/26/2018	Jozef Ruck		\$3,000.00
	6. Contributor address; City; State; Z	IP Code	
	780 Ringwood Ave Menlo Park, CA 94025-2237		
8. Principal occ Not Emplo	cupation / Job title (See Instructions) yed	1 ' '	yer (See Instructions) ot Employed
4. Date	5. Full name of contributorout-of-state PAC	·····	7. Amount of contribution (\$)
04/24/2018	Joyce Salhoot		\$500.00
	6. Contributor address; City; State; Z	IP Code	
	3716 Farber St Houston, TX 77005-3714		
~000000000P0000000 8000000	cupation / Job title (See Instructions) althore Executive	1 .	yer (See Instructions) etired
4. Date	5. Full name of contributor out-of-state PAC		7. Amount of contribution (\$)
01/21/2018	Ramzi Salti		\$5.00
	6. Contributor address; City; State, Z	IP Code	
	Mailcode 2006 Stanford University Stanford, CA 94305		•
8. Principal occ Teacher	cupation / Job title (See Instructions)	04	yer (See Instructions) tanford University
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)
06/03/2018	Ramzi Salti		\$5.00
	6. Contributor address; City; State; Z	IP Code	
	Mailcode 2006 Stanford University Stanford, CA 94305		
8. Principal occ Teacher	cupation / Job title (See Instructions)	, ,	yer (See Instructions) tanford University
4. Date	5. Full name of contributorout-of-state PAC	<u>'</u>	7. Amount of contribution (\$)
02/25/2018	Sudy Samandari		\$100.00
	6. Contributor address; City; State; Z	IP Code	
	5122 Morningside Dr Apt 1019 Houston, TX 77005-2571		
	cupation / Job title (See Instructions)	1 '	yer (See Instructions)
President		C	Om Sunset Boulevard Inc.

# SCHEDULE A1

The Ins	struction Guide explains how to complete this form.		Total pages Schedule A1:     not available	
2. FILER NAME Lina M. Hidalgo	)		3. Filer ID (Ethics Commission Filers)	
4. Date	Full name of contributor		7. Amount of contribution (\$)	
05/16/2018	Kat Samick		\$100.	.00
	6. Contributor address; City; State; Zi	IP Code		
	14320 Ventura Blvd Ste 438 Sherman Oaks, CA 91423-271	17		
8. Principal occup Producer	pation / Job title (See Instructions)	, ,	ver (See Instructions) elf Employed	<u> </u>
4. Date	Full name of contributorout-of-state PAC		7. Amount of contribution (\$)	
02/26/2018	Jeff Santori		\$50	.00
	6. Contributor address; City; State; Zi	IP Code		
	16803 Steinhagen Rd Cypress, TX 77429-7170			
	pation / Job title (See Instructions)		ver (See Instructions)	<u></u>
Market Repre		LI	UNA Midwest Region Organizing	
4. Date 05/23/2018	5. Full name of contributor out-of-state PAC  Dianna Santos  6. Contributor address; City; State; Zi  53 York Ave Port Monmouth, NJ 07758-1236	IP Code	7. Amount of contribution (\$)	.00
<ol> <li>Principal occup Recruiter</li> </ol>	pation / Job title (See Instructions)	9 Employ	ver (See Instructions)	
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)	
05/09/2018	Taylor Schilling		\$333.	.33
	6. Contributor address; City; State; Zi	IP Code		
	8383 Wilshire Blvd Ste 1000 Beverly Hills, CA 90211-243	9		
8. Principal occur Actress	pation / Job title (See Instructions)		ver (See Instructions) elf Employed	
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)	
01/28/2018	Wendy Schmidt		\$2,700	.00
•	6. Contributor address; City; State; Zi	IP Code		
	555 Bryant St # 347 Palo Alto, CA 94301-1704		. ,	
8. Principal occup President	pation / Job title (See Instructions)	1	ver (See Instructions) ne Schmidt Family Foundation	
		<del></del> _		

# SCHEDULE A1

The	Instruction Guide explains how	to complete this for	 n.	Total pages Schedule A1:     not available	
2. FILER NAM Lina M. Hida	E			3. Filer ID (Ethics Commission	Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
01/21/2018	Amy Schoening				\$1,000.00
	6. Contributor address;	City; State;	ZIP Code		\$1,000.00
!	2307 Scott St San Francisco, CA	•			
8. Principal occ	cupation / Job title (See Instruction	ns)		J yer (See Instructions) elf	
4. Date	5. Full name of contributor	out-of-state PAC	ŀ	7. Amount of contribution (\$)	
06/17/2018	Robert Schultz				\$500.00
	6. Contributor address;	City; State;	ZIP Code		
	1 Spring Hollow St Houston, TX	77024-5601			
	cupation / Job title (See Instruction	าร)		yer (See Instructions)	
Real Estate		<del></del>		HS Interests LLC	· Abbay
4. Date	5. Full name of contributor	Out-of-state PAC		7. Amount of contribution (\$)	
04/22/2018	Deidre Scott				\$5.00
	6. Contributor address;	City; State;	ZIP Code		
	212 Tabor St Houston, TX 7700	9-6144			
8. Principal occ Not Emplo	cupation / Job title (See Instruction byed	15)		yer (See Instructions) lot Employed	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/30/2018	David Segal				\$10.00
	6. Contributor address;	City; State;	ZIP Code		
	290) Sunset Blvd Houston, TX	77005-2349			
8 Principal oci Organizer	cupation / Job title (See Instruction	18)		yer (See Instructions) eligious Action Center	
4. Date	5. Full name of contributor	out-of-state PAC	<del></del>	7. Amount of contribution (\$)	
06/30/2018	Evan J. Segal	_			\$12.99
	6. Contributor address;	City; State;	ZIP Code		Ψ.2.>>
	14 Philips Ln Rye, NY 10580-32	_			
8. Principal occ President	cupation / Job title (See Instruction		1 '	yer (See Instructions)	
· · · · · · · · · · · · · · · · · · ·				·	

# SCHEDULE A1

The	Instruction Guide explains how	to complete this for	rm.	Total pages Schedule A1:     not available	
2. FILER NAM Lina M. Hida				3. Filer ID (Ethics Commission	Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
03/11/2018	Maya Selber				\$1.13
	6. Contributor address;	City; State;	ZIP Code		
·	747 Ralph McGill Blvd NE Unit	1263 Atlanta, GA 303	12-1136		
8. Principal oc Educator	cupation / Job title (See Instruction	ns)		yer (See Instructions) wish Kids Groups	
4. Date	5. Full name of contributor	out-of-state PAC	•	7. Amount of contribution (\$)	
05/16/2018	Kosha Shah				\$50.00
	6. Contributor address;	City; State;	ZIP Code		
	851 N San Vicente Blvd Apt 124	West Hollywood, CA	90069-4544		
8. Principal oc Agent	cupation / Job title (See Instruction	ns)	W100000W	yer (See Instructions) nited Talent Agency	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/17/2018	Wesley Shea				\$5.00
	6. Contributor address;	City; State;	ZIP Code		
<u> </u> 	5514 Griggs Rd Apt 2523 Houst	on, TX 77021-3771			
8. Principal oc CPA	cupation / Job title (See Instruction	ns)	Alle.	yer (See Instructions) rant Thornton	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
05/23/2018	Jeff Shell				\$1,000.00
	6. Contributor address;	City, State;	ZIP Code		
	622 N Hillcrest Rd Beverly Hills	, CA 90210-3515			
8. Principal oc	cupation / Job title (See Instruction universal	ns)	i	yer (See Instructions) Iniversal Film	-
4. Date	5. Full name of contributor	out-of-state PAC _		7. Amount of contribution (\$)	
04/08/2018	Karin Shipman				\$25.00
	6. Contributor address;	City; State;	ZIP Code		
	1400 Hermann Dr Houston, TX	77004-7590			
8. Principal oc	cupation / Job title (See Instruction	18)	9 Employ	yer (See Instructions)	
Not emple	yed		N	lot employed	

# SCHEDULE A1

The Ins	truction Guide explains how to complete this form.	Total pages Schedule A1:     not available
2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
06/29/2018	Karen Silverman	\$250.00
	6. Contributor address, City; State; ZI	P Code
	505 Montgomery St Ste 2000 San Francisco, CA 94111-653	8
8. Principal occup Attorney	pation / Job title (See Instructions)	9 Employer (See Instructions)  Latham & Watkins
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
05/09/2018	Sarah Silverman	\$200.00
	6. Contributor address; City; State; ZI	P Code
	9301 Wilshire Blvd Beverly Hills, CA 90210-5424	
8. Principal occup Entertainmen		9 Employer (See Instructions) Self
4. Date	5. Full name of contributor out-of-state PAC	7. Amount of contribution (\$)
06/30/2018	Michael Skelly	\$500.00
	6. Contributor address; City; State Zi	P Code
	317 Sampson St Houston, TX 77003-2411	
Principal occup     energy exec	pation / Job title (See Instructions)	9 Employer (See Instructions) clean line energy
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
01/21/2018	Alice Smith	\$15.00
	6. Contributor address; City; State; Žl	P Code
·	4284 Los Palos Cir Palo Alto, CA 94306-4310	
· '	pation / Job title (See Instructions)	9 Employer (See Instructions)
Not employed 4. Date		Not employed  7. Amount of contribution (\$)
02/25/2018	Mariane Smith	
U & F & J & U 1 O		S250.00 P Code
	6. Contributor address; City; State; ZI 818 Highland St Houston, TX 77009-6511	
8. Principal occur	pation / Job title (See Instructions)	9 Employer (See Instructions)
Trainer	,	Self-employeed

# SCHEDULE A1

The I	nstruction Guide explains how to complete this form.	Total pages Schedule A1:     not available
2. FILER NAMI Lina M. Hida		3. Filer ID (Ethics Commission Filers)
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
06/03/2018	Marianne Smith	\$50.00
	6. Contributor address; City; State; ZIP Co	ode
	818 Highland St Houston, TX 77009-6511	
8. Principal occ HR Consul	·	mployer (See Instructions)  Mayer Smith Consulting
4. Date	Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
06/18/2018	Marianne Smith	\$500.00
	6. Contributor address; City; State; ZIP Co	ode .
	818 Highland St Houston, TX 77009-6511	
8. Principal occ HR Consul	· ·	mployer (See Instructions) Mayer Smith Consulting
4. Date	5. Full name of contributor Out-of-state PAC	7. Amount of contribution (\$)
02/08/2018	Jennifer Soros	\$250.00
	6. Contributor address; City; State; ZIP Co	ode
	70A Greenwich Ave New York, NY 10011-8300	
8. Principal occ Founder	supation / Job title (See Instructions)	mployer (See Instructions) Give Lively
4. Date	5. Full name of contributor Jout-of-state PAC 209013	7. Amount of contribution (\$)
02/27/2018	Southwest Laborers District Council	\$500.00
	6. Contributor address; City, State; ZIP Co	ode
	11720 E 21st St Ste D Tulsa, OK 74129-1824	
8. Principal occ	cupation / Job title (See Instructions) 9 E	mployer (See Instructions)
4. Date	5. Full name of contributor Jout-of-state PAC 209013	7. Amount of contribution (\$)
05/10/2018	Southwest Laborers District Council	\$500.00
	6. Contributor address; City; State; ZIP Co	ode
	11720 E 21st St Ste D Tulsa, OK 74129-1824	
8. Principal occ	cupation / Job title (See Instructions) 9 E	mployer (See Instructions)

# SCHEDULE A1

The Inc	struction Guide explains how to con	plete this form	•	Total pages Schedule A1:     not available	
2. FILER NAME Lina M. Hidalg	0			3. Filer ID (Ethics Commission F	Filers)
4. Date	5. Full name of contributor	ut-of-state PAC		7. Amount of contribution (\$)	
04/22/2018	Sandy Spears				\$500.00
	6. Contributor address; Cit	y; State; 2	IP Code		
	4108 University Blvd Houston, TX 7700	5-2714			
8. Principal occu teacher	pation / Job title (See Instructions)			rer (See Instructions) nes Preschool	
4. Date	5. Full name of contributor	ut-of-state PAC		7. Amount of contribution (\$)	
05/23/2018	Estee Stanley				\$166.66
	6. Contributor address; Cit	y; State; Z	IP Code	*	•
	8714 Santa Monica Blvd West Hollywoo	od, CA 90069-450	8		
	pation / Job title (See Instructions)			rer (See Instructions)	
interior desig	I c College of a set of the college		700000	ancock Design	
4. Date	5. Full name of contributor	ut-of-state PAC	<del></del>	7. Amount of contribution (\$)	
03/14/2018	Barbra Streisand	1		<b>7</b>	\$500.00
	6. Contributor address; Cit	y; State; Z	IP Code		
	6838 Zumirez Dr Malibu, CA 90265-43	17			
8. Principal occu Philanthroph	pation / Job title (See Instructions) ist		<b>⋘</b>	rer (See Instructions) elf Employed	
4. Date	5. Full name of contributor	ul-of-state PAC		7. Amount of contribution (\$)	
01/21/2018	Jill Suttie				\$1,000.00
	6. Contributor address; Cit	y; State; Z	ZIP Code		
	988 Creston Rd Berkeley, CA 94708-15	44 💸			
8. Principal occu writer/editor	pation / Job title (See Instructions)		9 Employ se	ver (See Instructions)	
4. Date	5. Full name of contributor	ut-of-state PAC		7. Amount of contribution (\$)	
04/08/2018	Tyrone Taitano				\$1.00
	6. Contributor address; Cit	ty; State; 2	ZIP Code		
	PO Box 3373 Hagatna, 96932-3373				
· ·	pation / Job title (See Instructions)		1	er (See Instructions)	<del></del>
Not Employe	ed		N	ot Employed	

#### SCHEDULE A1

The Instruction Guide explains how to complete this form.			Total pages Schedule A1:     not available	
2. FILER NAME Lina M. Hidalgo			3. Filer ID (Ethics Commission	r Filers)
4. Date	Full name of contributor		7. Amount of contribution (\$)	
04/22/2018	Jennifer Tanner			\$50.00
	6. Contributor address; City; State; ZIP	Code		
	PO Box 2265 Sedona, AZ 86339-2265			•
8. Principal occup	pation / Job title (See Instructions) 9	Employ se	er (See Instructions)	
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)	
06/28/2018	Texans For Fairness			\$2,500.00
	6. Contributor address; City; State; ZIP	Code		
	16335 Lasting Light Ln Houston, TX 77095-3282			
8. Principal occup	pation / Job title (See Instructions) 9	Employ	er (See Instructions)	
4. Date	5. Full name of contributorout-of-state PAC	:	7. Amount of contribution (\$)	
02/20/2018	The Hughes Law Firm			\$250.00
	6. Contributor address; City; State, ZIP	Code		
	8876 Gulf Fwy Ste 565 Houston, TX 77017-6593			
	pation / Job title (See Instructions) 9	Employ	rer (See Instructions)	
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)	
05/09/2018	Charlize Theron			\$1,333.34
	6. Contributor address; City; State; ZIP	Code		
	9100 Wilshire Blvd Ste 1000W Beverly Hills, CA 90212-3463	3		
Principal occup     actor	pation / Job title (See Instructions)		ver (See Instructions)	
4. Date	5. Full name of contributor Out-of-state PAC		7. Amount of contribution (\$)	
06/30/2018	Mark Thiessen			\$300.00
	6. Contributor address; City; State; ZIP	Code		
	733 E 12th 1/2 St Houston, TX 77008-7119			
8. Principal occup Attorney	pation / Job title (See Instructions)		ver (See Instructions) hiessen Law Firm	

#### SCHEDULE A1

The In	struction Guide explains how to complete this form.	Total pages Schedule A1:     not available
<ol> <li>FILER NAME Lina M. Hidalg</li> </ol>	о	3. Filer ID (Ethics Commission Filers)
4. Date	Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
01/14/2018	Jeffrey Tiell	\$54.00
	6. Contributor address; City; State; ZIP Code	
	30 Echo Ln Piedmont, CA 94618-2618	
8. Principal occu Program Off		oyer (See Instructions) im Joseph Poundation
4. Date	Full name of contributor	7. Amount of contribution (\$)
05/23/2018	Sarah Tobin	\$50.00
	6. Contributor address; City; State; ZIP Code	
	1410 Sue Barnett Dr Houston, TX 77018-4437	
	A CONTRACTOR OF THE CONTRACTOR	oyer (See Instructions)
Lawyer 4. Date		Direct Energy  7. Amount of contribution (\$)
01/14/2018	5. Full name of contributor out-of-state PAC Susie Tompkins Buell	
01/14/2016		. \$5,000.00
	PO Box 29921 San Francisco, CA 94129-0921	
8. Principal occu Not Employe		oyer (See Instructions) Not Employed
4. Date	Full name of contributor	7. Amount of contribution (\$)
01/28/2018	Martha Claire Tompkins	\$100.00
	6. Contributor address; City State; ZIP Code	
	6 Waverly Ct Houston, TX 77005-1842	
<ol> <li>Principal occu Not Employ</li> </ol>	• • • • • • • • • • • • • • • • • • • •	oyer (See Instructions) Not Employed
4. Date	5. Full name of contributor Out-of-state PAC	7. Amount of contribution (\$)
05/23/2018	Juany Torres	\$5.00
	6. Contributor address; City; State; ZIP Code	
	678 Stonewall St San Antonio, TX 78214-1908	
* *************************************		oyer (See Instructions)
Campaign N	fanager 1	Lina Hidalgo for Harris County

# SCHEDULE A1

The I	nstruction Guide explains how	to complete this for	m.	Total pages Schedule A1:     not available	
2. FILER NAM Lina M. Hida				3. Filer ID (Ethics Commission	Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
02/04/2018	Herman Ulmer				\$100.00
	6. Contributor address;	City; State;	ZIP Code		
	15902 Diana Ln Houston, TX 77	062-4405			
8. Principal occ Program M	cupation / Job title (See Instruction lanager	ns)	·	yer (See Instructions) larris County Sheriff Office	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
05/01/2018	David Veiseh				\$2,500.00
	6. Contributor address;	City; State;	ZIP Code		
	407 Hunterwood Dr Houston, TX	X 77024-6902			
8. Principal occ CEO	cupation / Job title (See Instruction	ns)	_di.	yer (See Instructions) expo Energy	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/28/2018	David Veiseh				\$3,000.00
	6. Contributor address;	City; State;	ZIP Code		
	407 Hunterwood Dr Houston, TX	X 77024-6902			
8. Principal oco CEO	cupation / Job title (See Instruction	ns)	I	yer (See Instructions) expo Energy	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
01/14/2018	Maxime Veron				\$500.00
	6. Contributor address;	City; State;	ZIP Code		
	1242 Heritage Ct Los Altos, CA	94024-5718			
8. Principal occ Director	cupation / Job title (See Instruction	ns)	1	yer (See Instructions) lest Labs	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/17/2018	Jessica Vickery				\$100.00
	6. Contributor address;	City; State;	ZIP Code		
	5221 Lillian St Houston, TX 770	007-5226			
*	cupation / Job title (See Instructio	ns)	9 Emplo	yer (See Instructions)	
N/a .			n	one	

# SCHEDULE A1

The Ir	nstruction Guide explains how to	o complete this for	m.	Total pages Schedule A1:     not available	
2. FILER NAME Lina M. Hidal				3. Filer ID (Ethics Commission I	Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	•
01/21/2018	Kimberly B Vogel				\$500.00
	6. Contributor address;	City; State;	ZIP Code		
	1730 Holly Ave Menlo Park, CA	94025-5726			
8. Principal occ Not Employ	upation / Job title (See Instructions	5)	1 .	ver (See Instructions) ot Employed	
4. Date	5. Full name of contributor	out-of-state PAC	l e	7. Amount of contribution (\$)	
02/18/2018	Sameen Wajid				\$100.00
	6. Contributor address;	City; State;	ZIP Code		
	7024 Snowy Owl St Arlington, TX	76002-3378			
	upation / Job title (See Instructions	s)		/er (See Instructions)	
Not Employ	<del></del>		N	ot Employed	····
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
01/29/2018	Anna Waring				\$100.00
	6. Contributor address;	City; State;	ZIP Code		
	2110 Salas Ct East Palo Alto, CA	94303-1 <b>90</b> 0			
8. Principal occ Educator	upation / Job title (See Instructions	3)		ver (See Instructions) oundation for a College Education	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
04/22/2018	Zachary Warma				\$25.00
	6. Contributor address;	City; State;	ZIP Code		
	417 S Hill St Apt 700 Los Angele	s, CA 90013-2369			
8. Principal occ Associate	upation / Job title (See Instructions	3)	1 .	ver (See Instructions) L	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
03/11/2018	Claire Webster				\$1.25
1	6. Contributor address;	City; State;	ZIP Code		
	Postfach 65 03 10 Berlin, 13303				
	upation / Job title (See Instruction: ffice manager	3)	, ,	yer (See Instructions) pstream-agile GmbH	
I art-unic o	irice manager	*****	u	acteani-agne Omort	

# SCHEDULE A1

The In	struction Guide explains how	to complete this form		Total pages Schedule A1:     not available	
2. FILER NAME Lina M. Hidalg				3. Filer ID (Ethics Commission File	ers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
01/21/2018	Candace Weinstein				\$25.00
***	6. Contributor address;	City; State; 2	ZIP Code		
	235 Hanna Way Mento Park, CA	94025-3583			
8. Principal occu	pation / Job title (See Instruction	ns)	9 Employ	yer (See Instructions)	
Not employe	ed		N	ot employed	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/30/2018	Dianne Wells			'	\$5.00
	6. Contributor address;	City; State; 2	ZIP Code		
	3804 Coleridge St Houston, TX	77005-2834			
8. Principal occu	pation / Job title (See Instruction	ns)	9 Employ	yer (See Instructions)	
Not Employe	ed		N	ot Employed	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/01/2018	Maria Elena Wer				\$20.00
	6. Contributor address;	City; State;	ZIP Code		
	9202 Kapri Ln Houston, TX 770	25-4204			
8. Principal occu Counselor	upation / Job title (See Instruction	ns)	~~~~~~	yer (See Instructions) elf Employed	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
03/11/2018	Carol Wetterauer				\$10.00
	6. Contributor address;	City; State;	ZIP Code		
	11423 Inwood Dr Houston, TX	77077-6439			
8. Principal occu	upation / Job title (See Instructio	ns)	***************************************	yer (See Instructions)	
Not employe	ed		\ N	ot employed	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
04/08/2018	Carey White				\$1.30
	6. Contributor address;	City; State;	ZIP Code		
	522 47th Ave San Francisco, CA	. 94121-2425			
· ·	upation / Job title (See Instructio	ns)	i	yer (See Instructions)	
Systems are	hitect		P	ositive Arts LLC	

#### SCHEDULE A1

The Ins	truction Guide explains how to complete this form.	Total pages Schedule A1:     not available
2. FILER NAME Lina M. Hidalgo		3. Filer ID (Ethics Commission Filers)
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
05/23/2018	Bradley Whitford	\$833.34
	6. Contributor address; City; State; ZIP Code	
	10866 Wilshire Blvd Los Angeles, CA 90024-4300	
Principal occur     Actor		oyer (See Instructions) Self
4. Date	5. Full name of contributor Out-of-state PAC	7. Amount of contribution (\$)
03/11/2018	Drew Willey	\$100.00
	6. Contributor address; City; State; ZIP Code	-
	3402 Delhi St Houston, TX 77022-5138	
8. Principal occup Attorney	pation / Job title (See Instructions) 9 Emp	oyer (See Instructions)
4. Date	5. Full name of contributor Out-of-state PAC	7 Amount of contribution (\$)
05/16/2018	Clark Williams	\$100.00
	6. Contributor address; City; State; ZIP Code	
	13840 Valley Vista Blvd Sherman Oaks, CA 91423-4651	
Principal occup     Social Worker	· · · · · · · · · · · · · · · · · · ·	loyer (See Instructions) self employed
4. Date	5. Full name of contributor Out-of-state PAC	7. Amount of contribution (\$)
05/16/2018	Reese Witherspoon	\$2,700.00
	6. Contributor address; City; State; ZIP Code	
	11444 W Olympic Blvd FI 11 Los Angeles, CA 90064-1500	
	pation / Job title (See Instructions) 9 Emp	loyer (See Instructions)
Actress 4. Date	5. Full name of contributor Quit-of-state PAC	7. Amount of contribution (\$)
06/30/2018	Alex Wolchansky	-
007,501 <b>2</b> 018	6. Contributor address; City; State; ZIP Code	\$15.00
	5159 Braesvalley Dr Houston, TX 77096-2609	
8. Principal occu	pation / Job title (See Instructions) 9 Emp	loyer (See Instructions)
Not employe	d ·	Not employed

# SCHEDULE A1

	- · · · · - · · · · · · · · · · · · · ·			
The Inc	struction Guide explains how to complete this form.	1, 7	otal pages Schedule A1: not available	
2. FILER NAME Lina M. Hidalg	0	3. F	Filer ID (Ethics Commission Filers)	
4. Date	5. Full name of contributorout-of-state PAC	7. /	Amount of contribution (\$)	
06/30/2018	Ann Wolf		\$500.00	
	6. Contributor address; City; State; ZIP C	ode		
	711 Louisiana St Ste 1660 Houston, TX 77002-2291			
8. Principal occu Designer	pation / Job title (See Instructions) 9	Employer (S Self	See Instructions)	
4. Date	5. Full name of contributorout-of-state PAC	7. /	Amount of contribution (\$)	
03/04/2018	Kathleen Yazbak		\$25.00	
	6. Contributor address; City; State; ZIP (	Code		
	42 Glen St Dover, MA 02030-2317			
8. Principal occu consultant	pation / Job title (See Instructions) 9		See Instructions) rest Advisors	
4. Date	5. Full name of contributorout-of-state PAC	7. /	Amount of contribution (\$)	
05/09/2018	Susan Yeagley		\$500.00	
	6. Contributor address; City; State; ZIP ( 9100 Wilshire Blvd Beverly Hills, CA 90212-3415	Oode	COD	
	·		See Instructions)	,
mother, actre	1 1		nployed Amount of contribution (\$)	
01/28/2018	5. Full name of contributorout-of-state PAC	'` <i>`</i>		
01/20/2010		, oda	\$500.00	
	6. Contributor address; City; State; ZIP 0 2020 Stockton St San Francisco, CA 94133-2005	,oue		
8 Principal occu	<u> </u>	Employer /	See Instructions)	
Not Employe			nployed	
4. Date	5. Full name of contributorout-of-state PAC	7. /	Amount of contribution (\$)	
03/26/2018	Cindy Yeglin		\$100.00	
	6. Contributor address; City; State; ZIP 6	Code		
	3202 Shadowwalk Dr Houston, TX 77082-2326			
8. Principal occu Retired	pation / Job title (See Instructions) 9	Employer (	See Instructions) I	

## Page - 73

#### MONETARY POLITICAL CONTRIBUTIONS

### SCHEDULE A1

The In	struction Guide explains how to complete t	his form.	Total pages Schedule A1: not available	,
2. FILER NAME Lina M. Hidalg	go		3. Filer ID (Ethics Commission I	Filers)
4. Date	5. Full name of contributorout-of-state	PAC	7. Amount of contribution (\$)	
02/18/2018	Michael Zilkha			\$500.00
	6. Contributor address; City; S	State; ZIP Code		
	1001 McKinney St Houston, TX 77002-6417			
8 Principal occu Energy	upation / Job title (See Instructions)	,	oyer (See Instructions) Zilkha Biomass Energy	
4. Date	5. Full name of contributorout-of-state	PAC	7. Amount of contribution (\$)	
02/25/2018	Michael Zilkha			\$500.00
	6. Contributor address; City; S	State; ZIP Code		
	1001 McKinney St Houston, TX 77002-6417			
8. Principal occu	upation / Job title (See Instructions)	9 Emplo	oyer (See Instructions)	
Energy			Zilkha Biomass Energy	
4. Date	5. Full name of contributorout-of-state	PAC	7. Amount of contribution (\$)	
03/29/2018	Michael Zilkha			\$2,000.00
***************************************	6. Contributor address; City; S	State; ZIP Code		
	1001 McKinney St Houston, TX 77002-6417			
8. Principal occu	upation / Job title (See Instructions)	9 Emplo	oyer (See Instructions)	
Energy			Zilkha Biomass Energy	
4. Date	5. Full name of contributorout-of-state	PAC	7. Amount of contribution (\$)	andonies.
06/18/2018	Michael Zilkha			\$2,000.00
	6. Contributor address; City; S	State; ZIP Code		
•	1001 McKinney St Houston, TX 77002-6417			
_ '	upation / Job title (See Instructions)	·	oyer (See Instructions)	
Energy			Zilkha Biomass Energy	
4. Date	5. Full name of contributorout-of-state	PAC	7. Amount of contribution (\$)	
06/30/2018	Michael Zilkha			\$1,000.00
	6. Contributor address; City; S	State; ZIP Code		
	1001 McKinney St Houston, TX 77002-6417			
*	upation / Job title (See Instructions)	· · · · · · · · · · · · · · · · · · ·	oyer (See Instructions)	
Energy		[ 7	Zilkha Biomass Energy	

## Page - 74

#### MONETARY POLITICAL CONTRIBUTIONS

#### SCHEDULE A1

The	Instruction Guide explains how to complete this form.	Total pages Schedule A1:     not available
2. FILER NAM Lina M. Hida	· <del>-</del>	3. Filer ID (Ethics Commission Filers)
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
02/26/2018	Nina O'Leary Zilkha	\$1,000.00
	6. Contributor address; City; State; ZIP Code	
	1001 McKinney St Houston, TX 77002-6417	
8. Principal oc Owner	ccupation / Job title (See Instructions) 9 Emp	ployer (See Instructions) Self Employed
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
05/21/2018	Elizabeth Zivley	\$200.00
	6. Contributor address; City; State; ZIP Code	e l
	3606 Durhill St Houston, TX 77025-4108	
8. Principal oc Retired	cupation / Job title (See Instructions) 9 Emp	ployer (See Instructions) Retired



#### SCHEDULE A2

The Instruction Guide explains how to complete this form.		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 CONTRIBUTION	ONS			\$0.00	
5 Date 03/30/2018	6 Full name of contributorout-of-	Carol-Marc 1710			In-Kind contribution     description  In-kind of monthly rent	
	7 Contributor address; City; State; Zip Code 331 Pinchaven Dr Houston, TX 77024-3722			\$800.00		
10 Principal occ	upation / Job Title (FOR NON-JUDICIAL) (See Instructions)	11 Employer (FOR Meres Rand Clar		UDICIAL) (See Instructi	400000	
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's jot	title (F	OR JUDICIAL) (See Ins	structions)	
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of cont	ntributor's spouse (if any) (FOR JUDICIAL)			
16 If contributor	is a child, law firm of parents (if any) (FOR JUDICIAL)	*				
5 Date 04/30/2018	6 Full name of contributor  Amir Mireskandari  7 Contributor address; City; State; Zip Code  331 Pinehaven Dr Houston, TX 77024-3722	state PAC		8 Amount of contribution (\$) \$800.00	In-Kind contribution     description  In-kind of monthly rent	
					de of Texas, complete Schedule T	
10 Principal occupation / Job Title (FOR NON-JUDICIAL) (See Instructions)  CEO Mercs Rand Cla		OR NON-JUDICIAL) (See Instructions)  Clark & Assoc				
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job	title (F	OR JUDICIAL) (See Ins	structions)	
	employer/law firm (FOR JUDICIAL)	15 Law firm of cont	tributor'	s spouse (if any) (FOR .	JUDICIAL)	
16 If contributor	is a child, law firm of parents (if any) (FOR JUDICIAL)					

#### SCHEDULE A2

The	Instruction Guide explains how to complete this	s form.	1	al pages Schedule ot available	e A2;
2. FILER NAM Lina M. Hid			3. File	r ID (Ethics Comn	nission Filers)
4. TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIBUTIO	INS			\$0.00
5 Date 05/31/2018	6 Full name of contributor  Amir Mireskandari  7 Contributor address; City; State; Zip Code  331 Pinehaven Dr Houston, TX 77024-3722			8 Amount of contribution (\$) \$800.00	9 In-Kind contribution description In-kind of monthly rent le of Texas, complete Schedule T
10 Principal occu CEO	pation / Job Title (FOR NON-JUDICIAL) (See Instructions)	11 Employer (FOR Meres Rand Clari		DICIAL) (See Instructi	
12 Contributor's p	principal occupation (FOR JUDIC(AL)	13 Contributor's job	title (FO	R JUDICIAL) (See Ins	structions)
14 Contributor's e	employer/law firm (FOR JUDICIAL)	15 Law firm of conti	ributor's :	spouse (if any) (FOR J	IUDICIAL)
16 If contributor is	s a child, law firm of parents (if any) (FOR JUDICIAL)				
5 Date 06/30/2018	6 Full name of contributor out-of-s Amir Mireskandari  7 Contributor address; City; State; Zip Code 331 Pinehaven Dr Houston, TX 77024-3722	ate PAC		8 Amount of contribution (\$): \$800.00	In-Kind contribution     description  In-kind of monthly rent  te of Texas, complete Schedule T
10 Principal occu CEO	pation / Job Title (FOR NON-JUDICIAL) (See Instructions)	11 Employer (FOR Meres Rand Clar		DICIAL) (See Instructi	
,	principal occupation (FOR JUDICIAL)	33 Contributor's job	title (FO	R JUDICIAL) (See Ins	structions)
	employer/law firm (FOR JUDICIAL)	15 Law firm of conti	ributor's :	spouse (if any) (FOR J	JUDICIAL)
16 If contributor is	s a child, law firm of parents (if any) (FOR JUDICIAL)				

#### SCHEDULE A2

The I	Instruction Guide explains how to complete thi	s form.	1. T	otal pages Schedule not available	A2:	
P. FILER NAM Lina M. Hid			3. F	iler ID (Ethics Comm	nission Filers)	
I. TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIBUTION	ONS		·	\$0.00	
5 Date	6 Full name of contributor out-of-s	state PAC		8 Amount of	9 In-Kind contribution	
	F. Carter Smith			contribution (\$)	description	
02/24/2018	Z Contributor address; City; State; Zip Code				Photos and post-	
				\$550.00	production	
	2000 Edwards St Ste 203 Houston, TX 77007-4433					
10 Principal occur	pation / Job Title (FOR NON-JUDICIAL) (See Instructions)	11 Employer (EOR	NON-	JUDICIAL) (See Instruction	e of Texas, complete Schedule T	
Photographer	The state of the s	1		SODICIAL) (See Mandon	ona)	
	rinsipal occupation (FOR JUDICIAL)	Self employed	h title /	FOR JUDICIAL) (See Ins	tructione	
TE GOTTE BELOW & P	American designation (1 Sec 30 protect)	13 Contabator \$ jo	D LIGHT (	ON JUDICIAL) (GGB IIIS	(Idealons)	
14 Contributor's e	mployer/law firm (FOR JUDICIAL)	15 Law firm of con	tributor	's spouse (if any) (FOR J	UDICIAL)	
		<u> </u>				
16 If contributor is	a child, law firm of parents (if any) (FOR JUDICIAL)					
5 Date	6 Full name of contributor	state PAC		8 Amount of	9 In-Kind contribution	
	F. Carter Smith			contribution (\$)	description	
06/14/2018	7 Contributor address; City; State; Zip Code			-	Photos and post-	
	2000 Edwards St Ste 203 Houston, TX 77007-4433			\$550.00	production	
	2000 Edwards St Ste 203 Houston, 17/1007-433			Check if travel outside of Texas, complete Schedule T		
10 Principal occur	pation / Job Title (FOR NON-JUDICIAL) (See Instructions)	11 Employer (FOR	NON-	JUDICIAL) (See Instruction		
Photographer	, , , , , , , , , , , , , , , , , , , ,	Self employed		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,	
12 Contributor's p	rincipal occupation (FOR JUDICIAL)	13 Contributor's jo	b title (	FOR JUDICIAL) (See Ins	tructions)	
				*		
14 Contributor's e	mployer/law firm (FOR JUDICIAL)	15 Law firm of con	tributor	's spouse (if any) (FOR J	UDICIAL)	
			.486.			
16 If contributor is	a child, law firm of parents (if any) (FOR JUDICIAL)	•			<i>\( \)</i>	
					•	

#### SCHEDULE A2

The	Instruction Guide explains hov	v to complete this form.	<ol> <li>Total pages Schedule not available</li> </ol>	A2:
2. FILER NAI Lina M. Hi	****		3. Filer ID (Ethics Comm	nission Filers)
4. TOTAL OF	UNITEMIZED IN-KIND POLITICA	AL CONTRIBUTIONS		\$0.00
5 Date 04/20/2018	8 Full name of contributor Texas Democratic Party	Out-of-state PAC	8 Amount of contribution (\$)	9 In-Kind contribution description
04/20/2018	7 Contributor address; City; State; Zip 1106 Lavaca St Ste 100 Austin, T.		\$4,510.00	Voter File Access
10 Principal occ	 upation / Job Title (FOR NON-JUDICIAL)	(See Instructions) 11 Employer (FOR I	Check if travel outsid	e of Texas, complete Schedule T ons)
12 Contributor's	principal occupation (FOR JUDICIAL)	-13 Contributor's job	title (FOR JUDICIAL) (See Ins	tructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contri	ibutor's spouse (if any) (FOR J	UDICIAL)
18 If contributor	is a child, law firm of parents (if any) (FOR	TUDICIAL)		

	EXPENDIT	TURE CATEGORIES	FOR BOX 8	3(a)	
Advertising Expense	Event Expense	Office Overhead/Renta	nl	Solicitation/Funda	
Accounting/Banking Consulting Expense	Fees Food/Beverage Expense	Polling Expense Printing Expense		Transportation Ed Expense	quipment & Related
Contributions/Donations Made B	ly Gift/Awards/Memorials Expense	Salaries/Wages/Contra	nct Labor	Travel In District	
Candidate/Officeholder/Political	Legal Services	•		Travel Out of Dis	****
Committee Credit Card Payment	The Instruction Gui	de explains how to co	mnlata thic f		tegory not listed above)
1. Total pages Schedule F1	2. FILER NAME	ad explains now to co			mmission Filers)
1. Foliai pagos concadie i 1	Lina M. Hidalgo	•	3. 1111	er ib (Ettilos Co	minission i ners)
4 Date	5 Payee name				
01/07/2018	ActBlue Technical Services, In	ıc.			
6 Amount	7 Payee address;	City;	State:		Zip Code
\$8.89					•
	14 Arrow St Ste 11 Cambridge	, MA 02138-5106			
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descrip	otion	
PURPOSE			==		of Texas, complete Schedule T
OF EXPENDITURE	Fees		. —	Processing Fee	iceholder living expense
			Credit Card	Trocessing ree	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t	Office held
expenditure to denent C/OH					
4 Date	5 Payee name				
01/14/2018	ActBlue Technical Services, In	<b>c.</b>			
6 Amount	7 Payee address;	City;	State:		Zip Code
\$365.54			<b>\</b>		
	14 Arrow St Ste 11 Cambridge	, MA 02138-5106			
<u> </u>					
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Descrip	otion neck if travel outside o	f Texas, complete Schedule T
OF	Fees		<b>**</b> 1		iceholder living expense
EXPENDITURE			Credit Card	Processing Fee	
9 Complete ONLY if direct	Candidate/Officeholder name		Office sought		Office held
expenditure to benefit C/OH	Candidate/Onicerloider name	****	Onice sough	1	Office field
4 Date	F. Douge				
01/21/2018	5 Payee name ActBlue Technical Services, In	_			
6 Amount	7 Payee address;	City;	State:	<del></del>	Zip Code
\$168.63	rayee address,	City,	State.	4	zip Code
4700.00	14 Arrow St Ste 11 Cambridge	MA 02138-5106			
	i di bio i d	, 1111 0211/0 1/100			
8	(a) Category of		(b) Danada		<u> </u>
PURPOSE	(a) Category (See categories listed	at the top of this schedule)		ICION neck if travel outside o	f Texas, complete Schedule T
OF	Fees			neck if Austin, TX, offi	ceholder living expense
EXPENDITURE			Credit Card	Processing Fee	
9 Complete ONLY if direct	Candidate/Officeholder name		Office sought		Office held
expenditure to benefit C/OH			J		
	J				
	ATTACH ADDITIONAL COP	IES OF THIS SCH	EDULE AS	NEEDED	

	EXPENDIT	URE CATEGORIES	FOR BOX 8(	a) .	,
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee	Event Expense Fees Food/Beverage Expense / Gift/Awards/Memorials Expense Legal Services	Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra	nct Labor 1	Solicitation/Fundraising Expense Fransportation Equipment & Relate Expense Fravel In District Fravel Out of District Other (enter a category not listed at	
Credit Card Payment	The Instruction Guid	de explains how to co			Jove)
1. Total pages Schedule F1:	2. FILER NAME	<u> </u>		r ID (Ethics Commission Filers)	)
· · · · ·	Lina M. Hidalgo			· .	
4 Date 01/28/2018	5 Payee name ActBlue Technical Services, In-	c.			
6 Amount \$302.99	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) Fees	at the top of this schedule)	Chi	tion ack if travel outside of Texas, complete Sch ack if Austin, TX, officeholder living expen Processing Fee	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	
4 Date 02/04/2018	5 Payee name ActBlue Technical Services, In	с.			
6 Amount \$265.05	7 Payee address; 14 Arrow St Ste 11 Cambridge	City; , MA 02138-5106	State:	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Fees	at the top of this schedule)	☐ch	tion ack if travel outside of Texas, complete Sch ack if Austin, TX, officeholder living exper Processing Fee	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	
4 Date 02/11/2018	5 Payee name ActBlue Technical Services, In				
6 Amount \$7.90	7 Payee address; 14 Arrow St Ste 11 Cambridge.	City; , MA 02138-5106	State:	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Fees	at the top of this schedule)	Credit Card	cion eck if travel outside of Texas, complete Sch ack if Austin, TX, officeholder living expen Processing Fee	nedule T nse
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	
	4				

EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B	Event Expense Fees Food/Beverage Expense y Giff/Awards/Memorials Expense	Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District	
Candidate/Officeholder/Political.	Legal Services	Odianos viagos Contra	ici caboi	Travel Out of District	
Committee				Other (enter a category not listed above)	
Credit Card Payment	The Instruction Gui	de explains how to co	mplete this t	form.	
1. Total pages Schedule F1	2. FILER NAME		3. File	er ID (Ethics Commission Filers)	
	Lina M. Hidalgo				
4 Date	5 Payee name				
02/18/2018	ActBlue Technical Services, Ir	ıc.			
6 Amount	7 Payee address;	City;	State:	Zip Code	
\$36.16				a.p 0000	
	14 Arrow St Ste 11 Cambridge	. MA 02138-5106			
		1 1111 02130 0100			
		·		****	
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Descrip	otion heck if travel outside of Texas, complete Schedule T	
OF	Fees		_ =	heck if Austin, TX, officeholder living expense	
EXPENDITURE			Credit Card	Processing Fee	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held	
expenditure to benefit C/OA					
4 Date	5 Payee name				
02/25/2018	ActBlue Technical Services, In				
6 Amount	7 Payee address;	City;	State:	Zip Code	
\$115.78	,				
	14 Arrow St Ste 11 Cambridge	. MA 02138-5106			
8	(-) 6-1		1		
PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Descrip	Dtion heck if travel outside of Texas, complete Schedule T	
OF	Fees	*	*** <b>=</b>	heck if Austin, TX, officeholder living expense	
EXPENDITURE			Credit Card	Processing Fee	
		<u> </u>			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	t Office held	
- CAPENGIGATE TO BEHEIR COOFT					
4 Date	5 Payee name				
03/04/2018	ActBlue Technical Services, In	c.			
6 Amount	7 Payee address;	City;	State:	Zip Code	
\$2.46		•			
	14 Arrow St Ste 11 Cambridge	, MA 02138-5106		*	
	_		N.		
8	(0) 0-1		10.5		
PURPOSE		at the top of this schedule)	(b) Descrip	Otion neck if travel outside of Texas, complete Schedule T	
OF	, Fees		☐ cr	neck if Austin, TX, officehelder living expense	
EXPENDITURE			Credit Card	Processing Fee	
O. Complete Oblivition	0. 111. 1011		1		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	1	Office sought	Office held	
<del></del>	· · · · · · · · · · · · · · · · · · ·				
ı	ATTACH ADDITIONAL COR	PIES OF THIS SCHE	EDULE AS	NEEDED	

	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	-	T E Labor T T	olicitation/Fundraisi ransportation Equip xpense ravel In District ravel Out of District lther (enter a catego	ment & Relate	
		de explains how to com	·			
Total pages Schedule F1:	2. FILER NAME Lina M. Hidalgo		3. Filer	ID (Ethics Comm	nission Filers	)
4 Date	5 Payee name					
03/11/2018	ActBlue Technical Services, In					
6 Amount \$43.74	7 Payee address; 14 Arrow St Ste 11 Cambridge	City; , MA 02138-5106	State:	Zip	Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed	at the top of this schedule)	(b) Descripti Che Che Credit Card P	ion ck if travel outside of Te ck If Austin, TX, officeh rocessing Fee	xas, complete Sc older living expe	hedule T
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	O	ffice sought		Office held	
4 Date 03/25/2018 6 Amount	5 Payee name ActBlue Technical Services, In 7 Payee address;	c.	State:	Zip	Code	
\$620.03	14 Arrow St Ste 11 Cambridge					
PURPOSE OF EXPENDITURE	(a) Category (See categories listed Fees	at the top of this schedule)	=	ck if travel outside of Te ck if Austin, TX, officeh		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	O:	ffice sought		Office held	
4 Date 03/31/2018	5 Payee name ActBlue Technical Services, In	c.				,
6 Amount \$117.06	7 Payee address;	City;	State:	Zip	Code	
·	14 Arrow St Ste 11 Cambridge	, MA 02138-5106				•
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Descripti	On ck if travel outside of Te	vas complete Sc	hedule T
OF	Fees		<b></b>	ck if Austin, TX, officeh	-	
EXPENDITURE	,		Credit Card P	rocessing Fee		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	O	ffice sought		Office held	
	ATTACH ADDITIONAL CO	PIES OF THIS SCHEE	DULE AS N	NEEDED	-	

		••••		
	EXPENDIT	URE CATEGORIES F	OR BOX 8(a	a)
Advertising Expense	Event Expense	Office Overhead/Rental	s	olicitation/Fundraising Expense
Accounting/Banking	Fees	Polling Expense		ransportation Equipment & Related
Consulting Expense Contributions/Donations Made By	Food/Beverage Expense Gift/Awards/Memorials Expense	Printing Expense Salaries/Wages/Contract		xpense ravel In District
Candidate/Officeholder/Political	Legal Services			ravel Out of District
Committee				Other (enter a category not listed above)
Credit Card Payment		de explains how to com	· · · · · · · · · · · · · · · · · · ·	
Total pages Schedule F1:	2. FILER NAME		3. Filer	D (Ethics Commission Filers)
7.5.7	Lina M. Hidalgo			
4 Date	5 Payee name			
04/08/2018	ActBlue Technical Services, In		Ctoto	7io Codo
6 Amount \$90.53	7 Payee address;	City;	State:	Zip Code
190.53	14 A C4 C4 - 11 C	NAA 02120 5106		
	14 Arrow St Ste 11 Cambridge	, MA 02138-3100		
	No.		,	
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Descript	On ck if travel outside of Texas, complete Schedule T
OF	Fees		. =	ck if Austin, TX, officeholder living expense
EXPENDITURE			Credit Card P	rocessing Fee
0.0.1.1.0.11.1.1.1.1.1.1.1.1.1.1.1.1.1.			275	0.00
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	_	Office sought	Office held
	``````````````````````````````````````			
4 Date	5 Payee name			
04/15/2018	ActBlue Technical Services, In			
6 Amount \$4.94	7 Payee address;	Olty;	State:	Zip Code
<b>34.94</b>	14 4 6: 6: 11 6:	244 02120 5107		
	14 Arrow St Ste 11 Cambridge	, MIA 02138-3100		
			· · · · · · · · · · · · · · · · · · ·	
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Descript	ion ck if traval outside of Texas, complete Schedule T
OF	Fees		. =	ock if Austin, TX, officeholder living expense
EXPENDITURE			Credit Card P	rocessing Fee
		NAC 1 AND 1 AND 1		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
experience to benefit of of t		***		
4 Date	5 Payee name			
04/22/2018	ActBlue Technical Services, Ir			
6 Amount	7 Payee address;	City;	State:	Zip Code
\$24.90				at .
	14 Arrow St Ste 11 Cambridge	, MA 02138-5106		
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descript	iOn ck If Iravel outside of Texas, complete Schedule T
PURPOSE OF	Fees			ack if Austin, TX, officeholder living expense
EXPENDITURE	1003		I **** —	Professing Fee
9 Complete ONLY if direct	Candidate/Officeholder name	C	Office sought	Office held
expenditure to benefit C/OH			<u> </u>	
	ATTACH ADDITIONAL CO	PIES OF THIS SCHE	DULE AS	NEEDED

	EXPENDIT	URE 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	ct Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District Other (enter a category not listed above)
Total pages Schedule F1:	2. FILER NAME	· ·		r ID (Ethics Commission Filers)
i. Total pages octionals 1 1.	Lina M. Hidalgo			
4 Date	5 Payee name		<del></del>	
04/29/2018	ActBlue Technical Services, In	c.	*	
6 Amount \$1.98	7 Payee address; 14 Arrow St Ste 11 Cambridge	City;	State:	Zip Code
		ф.		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed	at the top of this schedule)	Сн	tion ack if travel outside of Texas, complete Schedule T ack if Austin, TX, officeholder living expense Processing Fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
4 Date 05/06/2018	5 Payee name ActBlue Technical Services, In			
6 Amount \$24.36	7 Payee address; 14 Arrow St Ste 11 Cambridge	City; , MA 02138-5106	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed	at the top of this schedule)	☐ C+	tion eck if travel outside of Texas, complete Schedule T eck if Austin, TX, officeholder living expense Processing Fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
4 Date 05/13/2018	5 Payee name ActBlue Technical Services, Ir	ic.		
6 Amount \$0.20	7 Payee address; 14 Arrow St Ste 11 Cambridge	City; , MA 02138-5106	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed	at the top of this schedule)	<u> </u>	tion leck if travel outside of Texas, complete Schedule T leck if Austin, TX, officeholder living expense Processing Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held

· · · · · · · · · · · · · · · · · · ·	EXPENDIT	URE CATEGORIES I	FOR BOX 8	(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee	Legal Services	•	et Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above)
Credit Card Payment		de explains how to con	<del></del>	
1. Total pages Schedule F1:	2. FILER NAME Lina M. Hidalgo		3. File	er ID (Ethics Commission Filers)
4 Date	5 Payee name	<del></del>	<del></del>	
05/20/2018	ActBlue Technical Services, In	c.		
6 Amount \$39,50	7 Payee address; 14 Arrow St Ste 11 Cambridge	City; , MA 02138-5106	State:	Zip Code
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descrip	otion neck if travel outside of Texas, complete Schedule T
PURPOSE *** OF	Fees		. =	neck if Austin, TX, officeholder living expense
EXPENDITURE			Credit Card	Processing Fee
9 Complete ONLY if direct	Candidate/Officeholder name		 Office sought	Office held
expenditure to benefit C/OH	Candidate/Onice rolling harrie		omec seagm	
4 Date	5 Payee name			
05/27/2018	ActBlue Technical Services, Ir			
6 Amount \$4.35	7 Payee address; 14 Arrow St Ste 11 Cambridge	City: , MA 02138-5106	State:	Zip Code
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Descrip	otion neck if travel outside of Texas, complete Schedule T
OF	Fees			neck if Austin, TX, officeholder living expense
EXPENDITURE			Credit Card	Processing Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	l	Office sough	Office held
4 Date	5 Payee name			
06/03/2018	ActBlue Technical Services, In			
6 Amount \$86.84	7 Payee address; 14 Arrow St Ste 11 Cambridge	City; , MA 02138-5106	State:	Zip Code
8	(a) Category (See categories listed	at the ten of this sehed it.	(b) Descrip	otion
PURPOSE		at the top of this schedule)		neck if travel outside of Texas, complete Schedule T
OF EXPENDITURE	Fees		. –	heck if Austin, TX, officeholder living expense Processing Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	(	) Office sough	t Office held
	ATTACH ADDITIONAL CO	PIES OF THIS SCHE	DULE AS	NEEDED

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 y Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contral de explains how to co	Transpo Expense ct Labor Travel II Travel C Other (e	ion/Fundraising Expense ortation Equipment & Related a n District Out of District onter a category not listed above)
Total pages Schedule F1:				thics Commission Filers)
	Lina M. Hidalgo			,
4 Date	5 Payee name			· · · · · · · · · · · · · · · · · · ·
06/10/2018	ActBlue Technical Services, Ir	ic.		
6 Amount \$42.47	7 Payee address;	City;	State:	Zip Code
	14 Arrow St Ste 11 Cambridge	, MA 02138-5106		
8	(a) Category (See categories listed	at the lon of this echadules	(b) Description	
PURPOSE		at the top of one echouses	Check if trav	rel outside of Texas, complete Schedule T
OF EXPENDITURE	Fees	\$35000000000000000000000000000000000000	Credit Card Processi	stin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
4 Date	5 Payee name			
06/17/2018	ActBlue Technical Services, Ir	***************************************		
6 Amount	7 Payee address;	City;	State:	Zip Code
\$45.30	14 Arrow St Ste 11 Cambridge	e, MA 02138-5106		
8 DUDDOCE	(a) Category (See categories listed	et the top of this schedule)	(b) Description	el outside of Texas, complete Schedule T
PURPOSE	Fees			stin, TX, officeholder living expense
EXPENDITURE			Credit Card Processi	ng Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
4 Date	5 Payee name			
06/24/2018	ActBlue Technical Services, In	ıc.		
6 Amount \$1.99	7 Payee address;	City;	State:	Zip Code
φ1.29	14 Arrow St Ste 11 Cambridge	e, MA 02138-5106		
8 BHBBBB	(a) Category (See categories listed	at the top of this schedule)	(b) Description	vel outside of Texas, complete Schedule T
PURPOSE OF	Facs		1 🛏	stin, TX, officeholder living expense
EXPENDITURE		•	Credit Card Processi	ng Fec
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
	ATTACH ADDITIONAL CO	PIES OF THIS SCH	EDULE AS NEED	ED

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 The Instruction Gui	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contracted explains how to con		Solicitation/Fundralsi Transportation Equip Expense Travel In District Travel Out of District Other (enter a catego form.	oment & Related
1. Total pages Schedule F1:			3. File	er ID (Ethics Comm	nission Filers)
	Lina M. Hidalgo			·	
4 Date 06/30/2018	5 Payee name ActBlue Technical Services, In	r			
6 Amount	7 Payee address;	City;	State:	Zip	Code
\$689.57	14 Arrow St Ste 11 Cambridge	·			
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Descrip	ption heck if travel outside of Te	xas, complete Schedule T
OF	Fees		. ==	heck if Austin, TX, officeh	
EXPENDITURE			Credit Card	Processing Fee	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	ıt	Office held
4 Date	5 Payee name				
02/06/2018	Administrative Business Service	es, LLC			
6 Amount \$3,255.00	7 Payee address;	City;	State:	Zip	Code
,	10205 Atkins Ridge Dr Charlo	ne, NC 28213-4290			
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Descrip	ption heck if travel outside of Te	uxas, complete Schedule T
OF	Accounting/Banking		∰. <del></del>	heck if Austin, TX, officeh	older living expense
EXPENDITURE			Accounting	; Services	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	d .	Office held
4 Date	5 Payee name				
03/06/2018	Administrative Business Service				
6 Amount	7 Payee address;	City;	State:	Zip	Code
\$555.00	10205 Atkins Ridge Dr Charlo	ne, NC 28213-4290			
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Descri	ption heck if travel outside of Te	exes, complete Schedule T
OF	Accounting/Banking			Check if Austin, TX, officeh	
EXPENDITURE			Accounting	g Services	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	nt .	Office held
	ATTACH ADDITIONAL CO	PIES OF THIS SCHE	EDULE AS	NEEDED	

	EXPENDITURE CATEGORIES FOR BOX 8(a)				
Candidate/Officeholder/Political Committee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	-		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above)	
Credit Card Payment		de explains how to com			
Total pages Schedule F1:	2. FILER NAME Lina M. Hidalgo		3. File	er ID (Ethics Commission Filers)	
4 Date 05/07/2018	5 Payee name Administrative Business Service	es, LLC	118/8/		
6 Amount \$430.00	7 Payee address;	City;	State:	Zip Code	
	10205 Atkins Ridge Dr Charlo	tte, NC 28213-4290			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Accounting/Banking	at the top of this schedule)		heck if travel outside of Texas, complete Schedule T heck if Austin, TX. officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough		
4 Date 05/07/2018	5 Payee name Administrative Business Service	ces, LLC			
6 Amount \$630.00	7 Payee address; 10205 Aikins Ridge Dr Charlo	City tue, NC 28213-4290	State:	Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed	at the top of this schedule)		heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense	
Gomplete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	C	Office sough	t Office held	
4 Date 06/11/2018	5 Payee name Administrative Business Servi	ces, LLC			
6 Amount \$1,505.00	7 Payee address; 10205 Atkins Ridge Dr Charlo	City; ttc, NC 28213-4290	State:	Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed Accounting/Banking	at the top of this schedule)	ı <u></u>	heck if travel outside of Texas, complete Schedule T hack if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	it Office held	
	ATTACH ADDITIONAL CO	PIES OF THIS SCHE	DULE AS	NEEDED	

	W				
		EXPENDIT	URE CATEGORIES F	FOR BOX 8(a	)
A	dvertising Expense	Event Expense	Office Overhead/Rental	So	olicitation/Fundraising Expense
	ccounting/Banking	"Fees	Polling Expense	Tr	ansportation Equipment & Related
č	onsulting Expense	Food/Beverage Expense	Printing Expense		rpense
	ontributions/Donations Made By andidate/Officeholder/Political		Salaries/Wages/Contrac		avel In District avel Out of District
	andidate/Onicenoider/Political ommittee	Legal Services			
_	redit Card Payment	The Instruction Guid	de explains how to con		ther (enter a category not listed above) m.
		2. FILER NAME	ao explaine tion to con		ID (Ethics Commission Filers)
١.	Total pages ochedule 11.	Lina M. Hidalgo		J. 1 1101	ID (Elinos Commission Fracio)
4	Date				<del></del>
-	<del>-</del>	5 Payee name			
	06/29/2018	ADP, Inc.	<b>0</b> 11		7'. 01-
6	Amount	7 Payee address;	City;	State:	Zip Code
	\$2,151.59				
		504 Clinton Center Dr Ste 4400	0 Clinton, MS 39056-561	10	
8		(a) Category (See categories listed	at the top of this schedule)	(b) Description	on
	PURPOSE	(and categories nated	at the top of this solidation	) 'Chec	k if travel outside of Texas, complete Schedule T
	OF	Salaries/Wages/Contract Labor		Chec	ck if Austin, TX, officeholder living expense
	EXPENDITURE			Payroll Taxes	
ň	One-late ONLY if disease	0 - 4:4 - 4-10# - 4-14-4		Cffice sought	Office held
ש	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	,	Office sought	Office field
	experience to belieff Groff		-A		
4	Date	5 Payee name			
	05/14/2018	American Airlines			
6	Amount	7 Payee address;	City;	State:	Zip Code
	\$137.20	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
	·	4255 Amon Center Blvd Ft Wo	onth TX 76155		
		Value Control Biva IV VI	, , , , , , , , , , , , , , , , , , ,		
8		(a) Category (See categories listed	at the top of this schedule)	(b) Description	ON ix if travel outside of Texas, complete Schedule T
	PURPOSE OF	Town One Of Division		**** =	ck if Austin, TX, officeholder living expense
	EXPENDITURE	Travel Out Of District		L	or il the city of
	EXPERIENCE			Airfare	
9	Complete ONLY if direct	Candidate/Officeholder name		Office sought	Office held
	expenditure to benefit C/OH				
4	Data	5 Dayso same			
	Date	5 Payee name	C11		
	02/09/2018	Baptist Ministers Association of			7: 0-1
6	Amount	7 Payee address;	City;	State:	Zip Code
	\$150.00				
		7817 Calhoun Rd Houston, TX	77033-3500		
8		(a) Category (See categories listed	I at the ten of this pahedula.	(b) Description	on.
•	PURPOSE	(See categories listed	at the top of this schedule)	Chec	k if travel outside of Texas, complete Schedule T
	OF	Advertising Expense		Chec	ck if Austin, TX, officeholder living expense
	EXPENDITURE			Advertising &	Marketing
_	Complete ONEW II disease	0		Office equals	Office hold
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	•	Office sought	Office held
	THE STREET OF SOLIDING OF OTHER		_		
_					
		ATTACH ADDITIONAL CO	PIES OF THIS SCHE	EDULE AS N	IEED <b>ED</b>
					**************************************

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee	Legal Services	·		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above)
Credit Card Payment	<del></del>	de explains how to con	<del>`</del>	
Total pages Schedule F1:	2. FILER NAME Lina M. Hidalgo		3. File	er ID (Ethics Commission Filers)
4 Date	5 Payee name			
05/04/2018	Change Research			
6 Amount \$0.44	7 Payee address; 2040 Bancroft Way Berkeley, 0	City; CA 94704-1495	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Polling Expense	at the top of this schedule)	ı <u>≔</u>	otion neck if travel outside of Texas, complete Schedule T neck if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	C	Office sough	t Office held
4 Date 05/04/2018 6 Amount \$2,018.00	5 Payee name Change Research 7 Payee address; 2040 Bancroft Way Berkeley,	City:	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed		. ≔	otion neck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	(	l Office sough	t Office held
4 Date 05/22/2018	5 Payee name Change Research			
6 Amount \$1,600.00	7 Payee address; 2040 Bancroft Way Berkeley,	City; CA 94704-1495	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Polling Expense	at the top of this schedule)		Otion neck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	(	Office sough	t Office held
	ATTACH ADDITIONAL COI	PIES OF THIS SCHE	DULE AS	NEEDED

	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 The Instruction Guid	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contract de explains how to com	I E Labor 1	Solicitation/Fundraising Expense Fransportation Equipment & Related Expense Fravel In District Fravel Out of District Other (enter a category not listed above)	
*	2. FILER NAME	o explaine from 10 con	<u> </u>	r ID (Ethics Commission Filers)	
i. Total pages collectule 1 1.	Lina M. Hidalgo		J. 1 116	TID (Etimes Commission Fracts)	
4 Date					
06/14/2018	5 Payee name Kathleen Da Silva				
		City	State:	Zip Code	
6 Amount \$37.50	7 Payee address; 109 Mockingbird Dr North Kin	City; gstown, RI 02852-6436	State:	Zip Code	
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descript	tion eck if travel outside of Texas, complete Schedule T	
PURPOSE OF	Salaries/Wages/Contract Labor		: 🖃	eck if Austin, TX, officeholder living expense	
EXPENDITURE	Salaries wages Collitate Labor		Contract Lab		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	
4 Date	5 Payee name				
04/25/2018	Democracy Engine LLC				
6 Amount \$250.75	7 Payee address; 416 Florida Ave NW Unit 2641	City.	State: 11-0516	Zip Code	
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Descrip	tion eck if travel outside of Texas, complete Schedule T	
OF	Fces		. ≌	eck if Austin, TX, officeholder living expense	
EXPENDITURE			Credit card p	processing fees	
				000	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	(	Office sought	Office held	
4 Date	5 Payee name				
05/02/2018	Democracy Engine LLC				
6 Amount	7 Payee address;	City;	State:	Zip Code	
\$30.19	416 Florida Ave NW Unit 264	18 Washington, DC 2000	01-0516		
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descrip	tion	
PURPOSE OF	Para .		. =	eck if travel outside of Texas, complete Schedule T eck if Austin, TX, officeholder living expense	
EXPENDITURE	Fees		—	processing fees	
				07.11	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	
	ATTACH ADDITIONAL CO	PIES OF THIS SCHE	DULE AS	NEEDED	

EXPENDITURE CATEGORIES FOR BOX 8(a)					
Candidate/Officeholder/Political	Fees	ffice Overhead/Rental olling Expense rinting Expense alaries/Wages/Contract I	Trans Exper Trave Trave	I In District I Out of District	
Committee Credit Card Payment	The Instruction Guide	explains how to comp		(enter a category not listed above)	
1. Total pages Schedule F1:	2. FILER NAME Lina M. Hidalgo		3. Filer ID	(Ethics Commission Filers)	
4 Date	5 Payee name				
05/09/2018	Democracy Engine LLC				
6 Amount \$347.71	7 Payee address;	City;	State:	Zip Code	
	416 Florida Ave NW Unit 26418	Washington, DC 20001	-0516		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at Fees			ravel outside of Texas, complete Schedule T Austin, TX, officeholder living expense sing fees	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Of	fice sought	Office held	
4 Date	5 Payee name				
05/16/2018	Democracy Engine LLC				
6 Amount \$574.65	7 Payee address; 416 Florida Ave NW Unit 26418	City; Washington, DC 20001	State: -0516	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at Fees		<b>=</b>	travel outside of Texas, complete Schedule T Austin, TX, officeholder living expense sing fees	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Ö	fice sought	Office held	
4 Date 05/23/2018	5 Payee name Democracy Engine LLC		,		
6 Amount \$251.77	7 Payee address; 416 Florida Ave NW Unit 26418	City: Washington, DC 20001	State: -0516	Zip Code	
8 PURPOSE	(a) Category (See categories listed at	the top of this schedule)	b) Description	Iravel outside of Texas, complete Schedule T	
OF EXPENDITURE	Fees		Credit card proces	Austin, TX, officeholder living expense sing fees	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Ol	fice sought	Office held	
	ATTACH ADDITIONAL COPI	ES OF THIS SCHEE	DULE AS NEE	EDED	

*******	EXPENDIT	TURE 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 y Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contral de explains how to con	ct Labor	Transportation E Expense Travel In Distric Travel Out of Di Other (enter a c	
1. Total pages Schedule F1:	2. FILER NAME		3. Fi	ler ID (Ethics C	ommission Filers)
	Lina M. Hidalgo				
4 Date	5 Payee name				
05/30/2018	Democracy Engine LLC				<u> </u>
6 Amount \$3.10	7 Payee address; 416 Florida Ave NW Unit 264	City; 18 Washington, DC 200	State: 01-0516		Zip Code
8 BURDOCE	(a) Category (See categories listed	at the top of this schedule)	(b) Descri	ption	of Texas, complete Schedule T
PURPOSE OF	Fees			Check if Austin, TX, o	fficeholder living expense
EXPENDITURE			**************************************	I processing fees	
9 Complete ONLY if direct	Candidate/Officeholder name		Office sough	ht .	Office held
expenditure to benefit C/OH	Candidate/Officerolder frame		J60 6625.	•	
4 Date	5 Payee name	<del>(                                    </del>			
06/30/2018	Democracy Engine LLC				
6 Amount \$15.05	7 Payee address; 416 Florida Ave NW Unit 264	City, 18 Washington, DC 200	State: 01-0516		Zip Code
		<u>//                                   </u>	T		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed	at the top of this schedule)		Chack if travel outside	of Texas, complete Schedule T officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	ht	Office held
4 Date	5 Payee name				
03/26/2018	Enterprise Rent A Car				
6 Amount \$114.14	7 Payee address; 600 Corporate Park Dr Saint L	City; ouis, MO 63105-4204	State:		Zip Code
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Descri	iption	of Texas, complete Schedule T
PURPOSE OF	Solicitation/Fundraising Expense		1 ===		officeholder living expense
EXPENDITURE			Rental Car	for CA fundraiser	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	nt	Office held
	ATTACH ADDITIONAL COI	PIES OF THIS SCHI	EDULE AS	S NEEDED	

	EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contraction	ct Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above)	
•		te explains now to cor	<del></del>		
Total pages Schedule F1:	2. FILER NAME Lina M. Hidalgo		3, File	er ID (Ethics Commission Filers)	
4 Date	5 Payee name				
05/17/2018	Enterprise Rent A Car				
6 Amount \$60.65	7 Payee address; 600 Corporate Park Dr Saint Lo	City; ouis, MO 63105-4204	State:	Zip Code	
			<del></del>		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed: Solicitation/Fundraising Expense	at the top of this schedule)		otion heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense for CA fundraiser	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held	
4 Date	5 Payee name				
05/17/2018	Enterprise Rent A Car				
6 Amount \$61.85	7 Payee address; 600 Corporate Park Dr Saint Lc		State:	Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed Solicitation/Fundraising Expense	at the top of this schedule)	<u> </u> c	otion heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense for CA fundraiser	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held	
4 Date	5 Payee name				
01/01/2018	Facebook				
6 Amount \$120.00	7 Payee address; 1 Hacker Way Menlo Park, CA	City; 94025-1456	State:	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Advertising Expense	at the top of this schedule)	□°	DtiON heck if travel outside of Texas, complete Schedule T theck if Austin, TX, officeholder living expense g and Marketing	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	nt Office held	
	ATTACH ADDITIONAL COF	PIES OF THIS SCHI	EDULE AS	NEEDED	

EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Legal Services	Office Overhead/Rental Polling Expense Printing Expense Expense Salaries/Wages/Contra-	Trans Expe ct Labor Trave Trave Other	tation/Fundraising Expense sportation Equipment & Related nse If In District If Out of District r (enter a category not listed above)	
Total pages Schedule F1:	2. FILER NAME Lina M. Hidalgo		3. Filer ID	(Ethics Commission Filers)	
4 Date	5 Payee name		<del></del>		
02/08/2018	Facebook				
6 Amount \$3.52	7 Payee address;	City;	State:	Zip Code	
	I Hacker Way Mento	Park, CA 94025-1456			
8 PURPOSE OF EXPENDITURE	(a) Category (See category Advertising Expense	ories listed at the top of this schedule)	· =	travel outside of Texas, complete Schedule T Austin, TX, officeholder living expense urketing	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholde	er name	Office sought	Office held	
4 Date	5 Payee name				
02/08/2018	Facebook				
6 Amount \$21.48	7 Payee address; 1 Hacker Way Mento	City; Park, CA 94025-1456	State:	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See category Advertising Expense	gories listed at the top of this schedule)	l 1555	travel outside of Texas, complete Schedule T Austin, TX, officeholder living expense arketing	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholde	er name	Office sought	Office held	
4 Date	5 Payee name				
02/14/2018	Facebook				
6 Amount \$8.79	7 Payee address; 1 Hacker Way Menlo	City; Park, CA 94025-1456	State:	Zíp Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See category Advertising Expense	gories listed at the top of this schedule)	1 ==	travel outside of Texes, complete Schedule T Austin, TX, officeholder living expense arketing	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholde	er name	Office sought	Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

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	EXPENDIT	URE CATEGORIES	FOR BOX	3(a)
Candidate/Officeholder/Political Committee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contrac		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above)
Credit Card Payment	The Instruction Gui	de explains how to co	mplete this	form.
Total pages Schedule F1:	2. FILER NAME Lina M. Hidalgo		3. Fil	er ID (Ethics Commission Filers)
4 Date	5 Payee name			
02/14/2018	Facebook			
6 Amount \$41.21	7 Payee address;	City;	State:	Zip Code
	l Hacker Way Menlo Park, CA	94025-1456		
PURPOSE  OF	(a) Category (See categories listed  Advertising Expense	at the top of this schedule)	. =	DtiON heck if travel outside of Texas, camplete Schedule T theck if Austin, TX, officeholder living expense
EXPENDITURE	3000cc		Advertising	g & Marketing
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	nt Office held
4 Date 02/22/2018	5 Payee name Facebook			
6 Amount \$3.86	7 Payee address; 1 Hacker Way Menlo Park, CA	City; 4 94025-1456	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Advertising Expense	at the top of this schedule)		ption Theck if travel outside of Texas, complete Schedule T Theck if Austin, TX, officeholder living expense g & Marketing
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	nt Office held
4 Date	5 Payee name			
02/22/2018	Facebook			
6 Amount \$24.46	7 Payee address; 1 Hacker Way Menlo Park, CA	City; \ 94025-1456	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Advertising Expense	at the top of this schedule)		ption heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense g & Marketing
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	nt Office held
	ATTACH ADDITIONAL CO	PIES OF THIS SCHI	EDULE AS	SNEEDED

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## POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

				· · · · · · · · · · · · · · · · · · ·
	EXPENDIT	TURE CATEGORIES F	OR BOX 8	i(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee	Legal Services	_		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above)
Credit Card Payment		de explains how to con		
Total pages Schedule F1:	2. FILER NAME Lina M. Hidalgo		3. Fil	er ID (Ethics Commission Filers)
4 Date	5 Payee name			
03/22/2018	Facebook			
6 Amount \$1.48	7 Payee address; I Hacker Way Menlo Park, CA	City; , 94025-1456 .	State:	Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See categories listed Advertising Expense	at the top of this schedule)		heck if travel outside of Texas, complete Schedule 1 heck if Austin, TX, officeholder living expense & Marketing
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held
4 Date 03/22/2018	5 Payee name Facebook			
6 Amount \$12.20	7 Payee address; 1 Hacker Way Menlo Park, CA	City; 4 94025-1456	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Advertising Expense	at the top of this schedule)	🗖 :	otion heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense ; & Marketing
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	(	I Office sough	d Office held
4 Date 04/30/2018	5 Payee name Facebook			
6 Amount \$56.28	7 Payee address; I Hacker Way Menlo Park, CA	City: \ 94025-1456	State:	Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See categories listed Advertising Expense	at the top of this schedule)		ption heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense g & Marketing
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	nt Office held
	ATTACH ADDITIONAL COI	PIES OF THIS SCHE	DULE AS	NEEDED

	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 The Instruction Gui	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contract de explains how to cor	Tran Expo Trav Trav Othe	citation/Fundraising Expense isportation Equipment & Related ense ivel In District er (enter a category not listed above)	
Total pages Schedule F1:	2. FILER NAME Lina M. Hidalgo		3. Filer IC	(Ethics Commission Filers)	
4 Date	5 Payee name		1.	<del></del>	
06/01/2018	Facebook	4	*	<b>"</b>	
6 Amount	7 Payee address;	City;	State:	Zip Code	
\$29.71	1 Hacker Way Menlo Park, CA	Mari			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Advertising Expense	f at the top of this schedule)	1 ///// 🔙	f travel outside of Texas, complete Schedule T if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	
4 Date	5 Payee name				
06/19/2018	G&A Outsourcing, Inc				
6 Amount \$970.00	7 Payee address; 17220 Katy Fwy Ste 350 Hous	City; ston, TX 77094-1485	State:	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Salaries/Wages/Contract Labor	d at the top of this schedule)	. =	f travel outside of Texas, complete Schedule T if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	
4 Date	5 Payee name				
01/01/2018	Google				
6 Amount \$42.64	7 Payee address; 1600 Amphitheatre Pkwy Mou	City; untain View, CA 94043-1	State: 1351	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Office Overhead/Rental Expense	d at the top of this schedule)		if travel outside of Texes, complete Schedule T if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	
	ATTACH ADDITIONAL CO	PIES OF THIS SCHI	EDULE AS NE	EDED	

# <sup>5</sup>age - 99

## POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

	EXPENDIT	URE CATEGORIES	FOR BOX 8(	a)	
Candidate/Officeholder/Political Committee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	•	T Et Labor T T	Fransportation E Expense Frave! In District Frave! Out of Dis Other (enter a ca	
Credit Card Payment	<del>, </del>	de explains how to cor			***
Total pages Schedule F1:	2. FILER NAME Lina M. Hidalgo		3. File	r ID (Ethics Co	ommission Filers)
4 Date	5 Payee name	······································			
02/02/2018	Google				
6 Amount \$42.64	7 Payee address; 1600 Amphitheatre Pkwy Mou	City; ntain View, CA 94043-1	State:		Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)	· ==	eck if travel outside eck if Austin, TX, of	of Texas, complete Schedule T fficeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	жимие	Office held
4 Date 03/02/2018 6 Amount \$35.01	5 Payee name Google 7 Payee address	City,	State:		Zip Code
8 PURPOSE OF EXPENDITURE	1600 Amphitheatre Pkwy Mou  (a) Category (See categories listed  Office Overhead/Rental Expense		(b) Descrip	eck if travel outside eck If Austin, TX, o	of Texas, complete Schedule T
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought		Office held
4 Date	5 Payee name			-	
04/02/2018	Google				
6 Amount \$41.41	7 Payee address; 1600 Amphitheatre Pkwy Mou	City; intain View, CA 94043-	State:		Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See categories listed Office Overhead/Rental Expense		Campaign E	eck if travel outside eck if Austin, TX, o mail	of Texas, complete Schedule T fficeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought		Office held
	ATTACH ADDITIONAL CO	PIES OF THIS SCH	EDULE AS	NEEDED	

	EXPENDIT	URE CATEGORIES	FOR BOX	B(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 The Instruction Guid	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contract	ct Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
1. Total pages Schedule F1:	2. FILER NAME		3. Fil	er ID (Ethics Commission Filers)
, •	Lina M. Hidalgo			`
4 Date	5 Payee name			
05/02/2018	Google			
6 Amount	7 Payee address;	City;	State:	Zip Code
\$42.64	, , , , , , , , , , , , , , , , , , , ,	•		·
	1600 Amphitheatre Pkwy Mou	ntain View, CA 94043-1	351	
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descri	ption heck if travel outside of Texas, complete Schedule T
PURPOSE OF	Office Overhead/Rental Expense			Check if Austin, TX, officeholder living expense
EXPENDITURE	Ottoe Overheadstenia izapense		Campaign	Email
9 Complete ONLY if direct	Candidate/Officeholder name		I Office sough	nt Office held
expenditure to benefit C/OH	Candidate/Officerrojuer frame			
4 Date	5 Payee name			
06/04/2018	Google			
6 Amount \$47.61	7 Payee address; 1600 Amphitheatre Pkwy Mou	City:	State:	Zíp Code
8	(a) Catagon		I(h) Dogori	ntian
PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Descri	heck if travel outside of Texas, complete Schedule T
OF	Office Overhead/Rental Expense			Check if Austin, TX, officeholder living expense
EXPENDITURE			Campaign	Email
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	ı	Office sough	nt Office held
4 Date	5 Payee name			
01/26/2018	Jason Haas			
6 Amount	7 Payee address;	City;	State:	Zip Code
\$100.00	6711 Stearns St Houston, TX 7	7021-2419		
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descri	ption heck if travel outside of Texas, complete Schedule T
PURPOSE OF	Salaries/Wages/Contract Labor			Check if travel outside of Lexas, complete Scriedule 1 Check if Austin, TX, officeholder living expense
EXPENDITURE	Salaries wages/Conflact Labor		Contract L	•
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	nt Office held
	ATTACH ADDITIONAL COI	PIES OF THIS SCHI	EDULE AS	S NEEDED

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Candidate/Officeholder/Political Committee	Event Expense Fees Food/Beverage, Expense Gift/Awards/Memorials Expense Legal Services		Tr. Ex t Labor Tr. Tr. Ot	olicitation/Fundraising Expense ansportation Equipment & Related spense avel in District avel Out of District ther (enter a category not listed above)
Credit Card Payment	The Instruction Gui	de explains how to con	nplete this for	m.
Total pages Schedule F1:	2. FILER NAME Lina M. Hidalgo		3. Filer	ID (Ethics Commission Filers)
4 Date	5 Payee name			
04/19/2018	Jason Haas			
6 Amount \$125.00	7 Payee address;	City;	State:	Zip Code
	6711 Stearns St Houston, TX 7	7021-2419		
8	(a) Category (See categories listed	at the top of this schedule)	(b) Description	ON k if travel outside of Texas, complete Schedule T
PURPOSE OF	Salaries/Wages/Contract Labor	^	1	k if Austin, TX, officeholder living expense
EXPENDITURE			Contract Labor	r
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
4 Date	5 Payee name	\ \ \		
01/17/2018	Harris County Democratic Part	ıy		
6 Amount \$1,000.00	7 Payee address;	City;	State:	Zip Code
	1445 North Loop W Ste 110 H	ouston, TX 77008-1654		
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Description	ON k if travel outside of Texas, complete Schedule T
OF EXPENDITURE	Office Overhead/Rental Expense		. =	k if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
4 Date	5 Payee name			
01/30/2018	Harris County Democratic Part	ty		
6 Amount	7 Payee address;	City;	State:	Zip Code
\$35.00	1445 North Loop W Ste 110 H	ouston, TX 77008-1654		
8 PUDBOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Description	in A if travel outside of Texas, complete Schedule T
PURPOSE OF	Office Overhead/Rental Expense			ck if Austin, TX, officeholder living expense
EXPENDITURE	Office Overhead Nemai Expense		Registration F	- ·
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
	ATTACH ADDITIONAL CO	PIES OF THIS SCHE	DULE AS N	EEDED

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	EXPEN	IDITURE CATEGORIES	FOR BOX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Legal Services	Office Overhead/Rental Polling Expense Printing Expense nse Salaries/Wages/Contra	Transpoi Expense ct Labor Travel In Travel O Other (ei	
		duide explains now to co	<u> </u>	hi- Oinia Filana
Total pages Schedule F1:	2. FILER NAME Lina M. Hidalgo		3. FIIETID (Et	hics Commission Filers)
4 Date	5 Payee name			
01/30/2018	Harris County Democratic	Party		
6 Amount \$250.00	7 Payee address;	City;	State:	Zip Code
<b>Q</b>	1445 North Loop W Ste 11	0 Houston, TX 77008-1654	ļ	
8	(a) Category (See categories	listed at the top of this schedule)	(b) Description	ei outside of Texas, complete Schedule T
PURPOSE OF EXPENDITURE	Office Overhead/Rental Exper	nse		tin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	me	Office sought	Office held
4 Date	5 Payee name			
04/23/2018	Harris County Democratic	Party		
6 Amount	7 Payee address;	City;	State:	Zip Code
\$10.00	1445 North Loop W Ste 11	10 Houston, TX 77008-1654		
8 PURPOSE	(a) Category (See categories	listed at the top of this schedule)	(b) Description	el outside of Texas, complete Schedule T
OF EXPENDITURE	Office Overhead/Rental Exper	nse	. ⊨	tlin, TX, afficeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	me	Office sought	Office held
4 Date	5 Payee name			
04/25/2018	Hotel Zaza Houston			
6 Amount \$29.98	7 Payee address;	City;	State:	Zip Code
	5701 Main St Houston, Tメ	C 77005-1824		
8 BUDDOOF	(a) Category (See categories	listed at the top of this schedule)	(b) Description	el outside of Texas, complete Schedule T
PURPOSE OF EXPENDITURE	Food/Beverage Expense		ı <u>≔</u>	itin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	me	Office sought	Office held
	ATTACH ADDITIONAL	COPIES OF THIS SCH	EDULE AS NEED	ED

	EXPENDIT	TURE CATEGORIES F	FOR BOX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contrac	Tra Ex ct Labor Tra Tra	licitation/Fundraising Expense ansportation Equipment & Related pense avel in District avel Out of District her (enter a category not listed above)
Credit Card Payment	The Instruction Gui	de explains how to con	nplete this for	n.
Total pages Schedule F1:	2. FILER NAME Lina M. Hidalgo		3. Filer I	D (Ethics Commission Filers)
4 Date	5 Payee name			
05/17/2018	HotelTonight			
6 Amount \$106.00	7 Payee address.	City;	State:	Zip Code
	901 Market St Ste 310 San Fra	ncisco, CA 94103-1752		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Solicitation/Fundraising Expense	at the top of this schedule)	. =	cif travel outside of Texas, complete Schedule T kilf Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
4 Date	5 Payee name			
01/01/2018	Houston Chronicle		<u> </u>	
6 Amount \$20.00	7 Payee address; 4747 Southwest Fwy Houston,	City; TX 77027-6901	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)	. =	k if travel outside of Texas, complete Schedule 1 k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
4 Date	5 Payee name			
01/30/2018	Houston Chronicle			
6 Amount \$20.00	7 Payee address; 4747 Southwest Fwy Houston	City; ,TX 77027-6901	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Office Overhead/Rental Expense	d at the top of this schedule)		OT k if travel outside of Texas, complete Schedule T k If Austin, TX, officeholder living expense cription
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
	ATTACH ADDITIONAL CO	PIES OF THIS SCHE	EDULE AS N	EEDED

				<u> </u>
	EXPENDIT	TURE CATEGORIES F	FOR BOX 8(a)	· · · · · · · · · · · · · · · · · · ·
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Politicat Committee Credit Card Payment	Legal Services	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contrac de explains how to con	Transpo Expense I Labor Travel In Travel O Other (e	
,	2. FILER NAME	шо олр.шо тот то оо		thics Commission Filers)
Tr. Total pages conlectate Tr.	Lina M. Hidalgo		0. 7 1107 115 (12.	, noo commission i nore;
4 Date	5 Payee name			
03/02/2018	Houston Chronicle			
6 Amount \$20.00	7 Payee address; 4747 Southwest Fwy Houston,	City;	State:	Zip Code
8	(a) Category (See categories listed	at the top of this schedule)	(b) Description	
PURPOSE		at the top of the content, of	Check if trave	el outside of Texas, complete Schedule T stin, TX, officeholder living expense
OF EXPENDITURE	Office Overhead/Rental Expense		Dues and Subscriptio	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	(	Office sought	Office held
4 Date 03/26/2018	5 Payee name Houston Chronicle			
6 Amount \$20.00	7 Payee address; 4747 Southwest Fwy Houston,	City,	State:	Zip Code
8	(a) Category (See categories listed	at the top of this schedule)	(b) Description	el outside of Texas, complete Schedule T
PURPOSE OF	Office Overhead/Rental Expense		ı <b>⊭</b>	stin, TX, officeholder living expense
EXPENDITURE	5,500 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5		Dues and Subscriptio	π
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	(	Office sought	Office held
4 Date	5 Payee name			
04/23/2018	Houston Chronicle			
6 Amount \$20.00	7 Payee address;	City;	State:	Zip Code
	4747 Southwest Fwy Houston,	TX 77027-6901		
8	(a) Category (See categories listed	at the top of this schedule)	(b) Description	el outside of Texas, complete Schedule T
PURPOSE OF	Office Overhead/Rental Expense		· 🛏	stin, TX, officeholder living expense
EXPENDITURE	Street Sterneam tental impelise		Dues and Subscriptio	- · ·
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	(	Office sought	Office held
	ATTACH ADDITIONAL CO	PIES OF THIS SCHE	DULE AS NEFD	ED.

	EXPENDIT	TURE CATEGORIES I	FOR BOX 8(a	)
Advantaine Europe	F	Office Occurrend/Dentel		lisitation#wadesia= Europe
Advertising Expense Accounting/Banking	Event Expense Fees	Office Overhead/Rental Polling Expense	) 50 Te	olicitation/Fundraising Expense ransportation Equipment & Related
Consulting Expense	Food/Beverage Expense	Printing Expense		cheuse
	Gift/Awards/Memorials Expense	Salaries/Wages/Contrac		avel In District
Candidate/Officeholder/Political	Legal Services	001011001770800700111121		avel Out of District
Committee	regai ocivices		O	ther (enter a category not listed above)
Credit Card Payment	The Instruction Gul	de explains how to cor		,
1. Total pages Schedule F1:	2. FILER NAME	<del></del>	3 Filer	ID (Ethics Commission Filers)
Total pages concade t t	Lina M. Hidalgo		0. 1	(Elinos Soliminosoli i AEIE)
4 Data		· · · · · · · · · · · · · · · · · · ·		
4 Date	5 Payee name			
05/21/2018	Houston Chronicle			
6 Amount	7 Payee address;	City;	State:	Zip Code
\$20.00				
	4747 Southwest Fwy Houston	TX 77027-6901		
	1			
			10.5	
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Description	ON k if travel outside of Texas, complete Schedule T
OF	Office Overhead/Rental Expense		Chec	ck If Austin, TX, officeholder living expense
EXPENDITURE	Office Greenead A.		Dues and Subs	scription
			Dues and Sales	eription
9 Complete ONLY if direct	Candidate/Officeholder name		Office sought	Office held
expenditure to benefit C/OH			-	
		***************************************		
4 Date	5 Payee name			
06/18/2018	Houston Chronicle			
6 Amount	7 Payee address;	City;	State:	Zip Code
\$20.00				
	4747 Southwest Fwy Houston,	TX 77027-6901		
				•
8	(a) Category (See categories listed	at the top of this schedule)	(b) Description	on
PURPOSE	_			ck if travel outside of Texas, complete Schedule T
OF	Office Overhead/Rental Expense		Chec	ck if Austin, TX, officeholder living expense
EXPENDITURE			Dues and Subs	scription
9 Complete ONLY if direct	Condidate/Officeholder name		Office sought	Office held
expenditure to benefit C/OH	Candidate/Officeholder name	'	Office Sought	Office field
expensione to perion exert				
4 Date	5 Payee name			
03/05/2018	Houston Rising			
6 Amount	7 Payee address;	City;	State:	Zip Code
\$200.00	i	_ ,,		·
4200,00	017 Dinelman St Hauston TV	77000 9616		
	917 Pinckney St Houston, TX	//009-8010		
		1		
8	(a) Category (See categories listed	at the top of this schedule)	(b) Description	on.
PURPOSE	(and only light	at the top of this solidatio,	Chec	DN 此 if travel outside of Texas, complete Schedule T
OF	Contributions/Donations Made By		Chec	ck if Austin, TX, officeholder living expense
EXPENDITURE	Candidate/Officeholder/Political Co	ommittee	Contribution f	of the March for Black Women
0.0.1.0			0.00	05.
9 Complete ONLY if direct	Candidate/Officeholder name	•	Office sought	Office held
expenditure to benefit C/OH				
	ATTACH ADDITIONAL CO	PIES OF THIS SCH	EDULE AS N	IEEDED

## Page - 106

## POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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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 The Instruction Guil	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contract de explains how to cor	T E I Labor T T C	iolicitation/Fundraising Expense ransportation Equipment & Related expense ravel In District ravel Out of District other (enter a category not listed above)	
· · · · · · · · · · · · · · · · · · ·	2. FILER NAME	ue expluite flow to col		· ID (Ethics Commission Filers)	
Total pages Schedule F1:	Lina M. Hidalgo		JS. Files	ID (Ethics Confinission Friers)	
4 Date	5 Payee name		, <del></del> ,		
01/10/2018	J&N Enterprises				
6 Amount \$65.00	7 Payee address;	City;	State:	Zip Code	
<b>V-1</b> -1-1	2015 W 34th St Houston, TX 7	7018-6139			
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Descript	ion ck if travel outside of Texas, complete Schedule T	
OF	Printing Expense		Che	eck if Austin, TX, officeholder living expense	
EXPENDITURE			Printing and	Reproduction	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	
4 Date 02/13/2018	5 Payee name J&N Enterprises				
6 Amount \$37.89	7 Payee address; 2015 W 34th St Houston, TX 7	City; 77018-6139	State:	Zip Code	
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descript	ion sck if travel outside of Texas, complete Schedule T	
PURPOSE	Printing Expense		😑	eck if Austin, TX, officeholder living expense	
EXPENDITURE	rining tapense		Printing and		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	
4 Date	5 Payee name				
02/26/2018	J&N Enterprises			- HARRING TO THE TOTAL TO THE T	
6 Amount \$92.01	7 Payee address;	City;	State:	Zip Code	
	2015 W 34th St Houston, TX 7	77018-6139			
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descript	ION ack if travel outside of Texas, complete Schedule T	
PURPOSE OF	Printing Expense		. ⊨	ack if Austin, TX, officeholder living expense	
EXPENDITURE	t tiliting Lappense		. –	Reproduction	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		I Office sought	Office held	
	ATTACH ADDITIONAL CO	PIES OF THIS SCHI	EDULE AS	NEEDED	

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 The Instruction Gui	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contract de explains how to cor	ct Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District Other (enter a category not listed above)
Total pages Schedule F1:	2. FILER NAME	<del> ' </del>		er ID (Ethics Commission Filers)
	Lina M. Hidalgo			,
4 Date	5 Payee name			
04/05/2018	J&N Enterprises			
6 Amount	7 Payee address;	City	State:	Zip Code
\$492.54	2015 W 34th St Houston, TX 7	•		
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Descrip	otion heck if trayel outside of Texas, complete Schedule T
PURPOSE OF	Printing Expense		<del> </del>	heck if Austin, TX, officeholder living expense
EXPENDITURE				1 Reproduction
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	Office held
4 Date	5 Payee name			
05/14/2018	J&N Enterprises		*	
6 Amount \$140.73	7 Payee address; 2015 W 34th St Houston, TX 7	City; 77018-6139	State:	Zip Code
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Descrip	Otion heck if travel outside of Texas, complete Schedule T
OF EXPENDITURE	Printing Expense		<u></u> □°	heck if Austin, TX, officeholder living expense d Reproduction
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held
4 Date	5 Payee name			
05/23/2018	J&N Enterprises			
6 Amount \$492.54	7 Payee address; 2015 W 34th St Houston, TX 7	City; 77018-6139	State:	Zip Code
8	(a) Catagoni		(h) Casa-	ation.
PURPOSE	(a) Category (See categories listed	i at the top of this schedule)	(b) Descrip	DTION heck if travel outside of Texas, complete Schedule T
OF	Printing Expense		_	heck if Austin, TX, officeholder living expense
EXPENDITURE			Printing and	d Reproduction
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held
	ATTACH ADDITIONAL CO	PIES OF THIS SCHI	EDULE AS	NEEDED

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· · · · · · · · · · · · · · · · · · ·	EXPENDIT	TURE CATEGORIES I	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 The Instruction Gui	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contract de explains how to cor	ol Labor	Solicitation/Fundralsing Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) orm.
	2. FILER NAME			er ID (Ethics Commission Filers)
i. Total pages schedule r i.	Lina M. Hidalgo		5. File	er to (Ethics Commission Filers)
4 Date	5 Payee name			
06/14/2018	J&N Enterprises			
6 Amount	7 Payee address;	City;	State:	Zip Code
\$362.64	2015 W 34th St Houston, TX 7	-		
8 Pubboor	(a) Category (See categories listed	at the top of this schedule)	(b) Descrip	otion heck if Itavel outside of Texas, complete Schedule T
PURPOSE OF	Printing Expense		1	heck if Austin, TX, officeholder living expense
EXPENDITURE			Printing and	Reproduction
9 Complete ONLY if direct	Candidate/Officeholder name		 Office sough	t Office held
expenditure to benefit C/OH	CandidaterOnicendider name			
4 Date	5 Payee name			
01/01/2018	Antron Johnson			
6 Amount	7 Payee address;	City,	State:	Zip Code
\$385.00	2400 S Loop W Apt 413 Hous		(b) Descri	ntion and the same of the same
PURPOSE OF EXPENDITURE	(a) Category (See categories lister Salaries/Wages/Contract Labor	d at the top of this schedule)	``` <u></u>	heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held
4 Date	5 Payee name			
01/18/2018	Mehran H Khodabandeh			
6 Amount	7 Payee address;	City;	State:	Zip Code
\$1,250.00	27 Franciscan Way Kensingto	n, CA 94707-1112		
8 DUDDOCE	(a) Category (See categories lister	d at the top of this schedule)	(b) Descri	Otion heck if travel outside of Texas, complete Schedule T
PURPOSE OF	Salaries/Wages/Contract Labor		1 ===	heck if Austin, TX, officeholder living expense
EXPENDITURE	Outsiles viages confidentiation		Contract La	abor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	nt Office held
	ATTACH ADDITIONAL CO	PIES OF THIS SCH	EDULE AS	NEEDED

٠.	EXPENDI	TURE CATEGORIES	FOR BOX 8(a)	· · · · · · · · · · · · · · · · · · ·
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made Book Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Gu	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contrat de explains how to con	Transp Expens I Labor Travel I Travel ( Other (	tion/Fundraising Expense ortation Equipment & Related le in District Out of District enter a category not listed above)
Total pages Schedule F1:	2. FILER NAME Lina M. Hidalgo		3. Filer ID (E	thics Commission Filers)
4 Date 03/05/2018	5 Payee name Mehran H Khodabandeh			21.0
6 Amount \$1,250.00	7 Payee address; 27 Franciscan Way Kensington	City; n, CA 94707-1112	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Salaries/Wages/Contract Labor	d at the top of this schedule)	. =	vel autside of Texas, complete Schedule T istin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
4 Date 01/26/2018	5 Payee name Mariah Najmuddin			
6 Amount \$135.00	7 Payee address; 16027 Cypress Farms Dr	City; ress, TX 77429-7401	State:	Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See categories listed Salaries/Wages/Contract Labor	d at the top of this schedule)	ı <b>≡</b>	ovel outside of Texas, complete Schedule T ustin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
4 Date 01/31/2018	5 Payee name Mariah Najmuddin		0.1	7.0.4
6 Amount \$150.00	7 Payee address; 16027 Cypress Farms Dr Cypr	City; ress, TX 77429-7401	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Salaries/Wages/Contract Labor	d at the top of this schedule)	1	ovel outside of Texas, complete Schedule T ustin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	W	Office sought	Office held
	ATTACH ADDITIONAL CO	PIES OF THIS SCHI	EDULE AS NEED	DED

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<del></del>	EXPEND	ITURE CATEGORIES	FOR BOX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Office Overhead/Rental Polling Expense Printing Expense a Salaries/Wages/Contra	Trar Exp ct Labor Trav Trav	citation/Fundraising Expense asportation Equipment & Related ense rel In District rel Out of District er (enter a category not listed above)
Credit Card Payment	The Instruction Gu	uide explains how to co		,
Total pages Schedule F1:	2. FILER NAME Lina M. Hidalgo		3. Filer IC	(Ethics Commission Filers)
4 Date	5 Payee name			
03/01/2018	Mariah Najmuddin			
6 Amount \$217.50	7 Payee address;	City;	State:	Zip Code
	16027 Cypress Farms Dr Cyr	ness, TX 77429-7401		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories liste Salaries/Wages/Contract Labor	ed at the top of this schedule)		f travel outside of Texas, complete Schedule T If Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
4 Date	5 Payee name			
04/01/2018	Mariah Najmuddin			
6 Amount \$457.50	7 Payee address; 16027 Cypress Farms Dr Cyj	City; press, TX 77429-7401	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listi Salaries/Wages/Contract Labor	ed at the top of this schedule)	· •	) if travel outside of Texas, complete Schedule T if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	9	Office sought	Office held
4 Date	5 Payee name			
04/23/2018	Mariah Najmuddin			
6 Amount \$261.00	7 Payee address; 16027 Cypress Farms Dr Cyl	City; press, FX 77429-7401	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories list	ed at the top of this schedule)	. =	) if travel outside of Texas, complete Schedule T if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	е	Office sought	Office held
	ATTACH ADDITIONAL CO	OPIES OF THIS SCH	EDULE AS NE	EDED

	EXPENDIT	URE CATEGORIES F	FOR BOX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contract	Transpo Expense It Labor Travel Ir Travel C	ion/Fundraising Expense Intation Equipment & Related In District Out of District Inter a category not listed above)
Credit Card Payment	The Instruction Gul	de explains how to con		
Total pages Schedule F1:	2. FILER NAME Lina M. Hidalgo		3. Filer ID (E	thics Commission Filers)
4 Date 05/21/2018	5 Payee name Mariah Najmuddin			
6 Amount \$71.25	7 Payee address; 16027 Cypress Farms Dr Cypre	City; ess, TX 77429-7401	State:	Zíp Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Sataries/Wages/Contract Labor	at the top of this schedule)	1 😑	rel outside of Texas, complete Schedule T stin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
4 Date 01/05/2018	5 Payee name Nationbuilder			
6 Amount \$1,229.00	7 Payee address; 520 S Grand Ave Los Angeles	City; , CA 90071-2600	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)	· ==	rel outside of Texas, complete Schedule T stin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
4 Date 02/06/2018	5 Payee name Nationbuilder			
6 Amount \$29.00	7 Payee address; 520 S Grand Ave Los Angeles	City; , CA 90071-2600	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)	l !	rel outside of Taxas, complete Schedule T stin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	(	Office sought	Office held
	ATTACH ADDITIONAL CO	PIES OF THIS SCHE	EDULE AS NEED	ED

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· · ·	EXPENDIT	TURE CATEGORIES F	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 The Instruction Gui	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contrac de explains how to con	T Et Labor 1 1	Solicitation/Fundraising Expense Fransportation Equipment & Related Expense Fravel In District Fravel Out of District Other (enter a category not listed above)
	2. FILER NAME			r ID (Ethics Commission Filers)
in Total pages conedule 1 1.	Lina M. Hidalgo		0. 1 110	TIS (Elines continued on Files)
4 Date				
03/06/2018	5 Payee name Nationbuilder			
6 Amount	7 Payee address;	City;	State:	Zip Code
\$29.00	520 S Grand Ave Los Angeles	-	otate.	ZIP 0000
PURPOSE OF EXPENDITURE	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)	ı <b>≔</b>	tion ack if travel outside of Texas, complete Schedule T eck if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
4 Date 04/06/2018	5 Payee name Nationbuilder			
6 Amount \$29.00	7 Payee address; 520 S Grand Ave Los Angeles	City:	State:	Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)	. =	tion ack if travel outside of Texas, complete Schedule T ack if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	!	Office sought	Office held
4 Date	5 Payee name			
05/07/2018	Nationbuilder			
6 Amount \$29.00	7 Payee address; 520 S Grand Ave Los Angeles	City; , CA 90071-2600	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Office Overhead/Rental Expense	f at the top of this schedule)	. ⊨	tion ack if travel outside of Texas, complete Schedule T ack if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
	ATTACH ADDITIONAL CO	PIES OF THIS SCH	EDULE AS	NEEDED

	EXPENDIT	URE CATEGORIES F	OR BOX 8	(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Legal Services	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contract de explains how to com	t Labor		oment & Related
Total pages Schedule F1:	2. FILER NAME			er ID (Ethics Comn	nission Filers)
7. Total pages contouring 1.	Lina M. Hidalgo		0	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
4 Date	5 Payee name		<del> </del>		
06/06/2018	Nationbuilder				
6 Amount \$29.00	7 Payee address; 520 S Grand Ave Los Angeles,	City; ,CA 90071-2600	State:	Zip	Code
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Descrip	otion neck if travel outside of Te	exas, complete Schedule T
OF EXPENDITURE	Office Overhead/Rental Expense			heck if Austin, TX, officeh	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		office sought	i i	Office held
4 Date	5 Payee name				
01/01/2018	NGP VAN				
6 Amount \$150.00	7 Payee address; 1445 New York Ave NW Ste 2	City:	State: 05-2158	Zip	Code
PURPOSE OF EXPENDITURE	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)	• =	heck if travel outside of Te heck if Austin, TX, officet	exas, complete Schedule T nolder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	C	office sought	t	Office held
4 Date	5 Payee name				
01/02/2018	NGP VAN	City;	State:	7 in	Code
6 Amount \$170.00	7 Payee address; 1445 New York Ave NW Ste 2			<i></i>	Code
PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Descrip	otion heck if travel outside of Tr	exas, complete Schedule T
OF	Office Overhead/Rental Expense		. ⊑	heck if Austin, TX, office	•
EXPENDITURE			Compliance	Software	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	C	Office sought	t	Office held
	ATTACH ADDITIONAL COI	PIES OF THIS SCHE	DULE AS	NEEDED	

	EXPENDI	TURE CATEGORIES	FOR BOX	B(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense	Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District
Candidate/Officeholder/Political	Legal Services	· ·		Travel Out of District
Committee Credit Card Payment	The Instruction Gui	ide explains how to co	molete this	Other (enter a category not listed above)
Total pages Schedule F1:		ac explaine from 10 00		er ID (Ethics Commission Filers)
T. Fotal pages consults (T.	Lina M. Hidalgo			
4 Date	5 Payee name			
02/02/2018	NGP VAN			
6 Amount \$320.00	7 Payee address;	City;	State:	Zip Code
	1445 New York Ave NW Ste	200 Washington, DC 20	005-2158	
8 PURPOSE	(a) Category (See categories lister	i at the lop of this schedule)	(b) Descri	ption heck if travel outside of Texas, complete Schedule T
OF	Office Overhead/Rental Expense		_ =	Check if Austin, TX, officeholder living expense
EXPENDITURE			Complianc	e Software
9 Complete ONLY if direct	Candidate/Officeholder name		Office sough	nt Office held
expenditure to benefit C/OH	,	466	•	
4 Date	5 Payee name			
03/02/2018	NGP VAN			
6 Amount \$320.00	7 Payee address;	Cily;	State:	Zip Code
	1445 New York Ave NW Ste	200 Washington, DC 20	0005-2158	
8 PURPOSE	(a) Category (See categories listed	d at the top of this schedule)	(b) Descri	ption Theck if travel outside of Texas, complete Schedule T
OF	Office Overhead/Rental Expense			Check if Austin, TX, officeholder living expense
EXPENDITURE			Complianc	e Software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	nt Office held
4 Date	5 Payee name			
04/02/2018	NGP VAN			
6 Amount \$320.00	7 Payee address;	City;	State:	Zip Code
	1445 New York Ave NW Ste	200 Washington, DC 20		
8 PURPOSE	(a) Category (See categories liste	d at the top of this schedule)	(b) Descr	ption heck if travel outside of Texas, complete Schedule T
OF EXPENDITURE	Office Overhead/Rental Expense			Check if Austin, TX, officeholder living expense ce Software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office soug	nt Office held
	ATTACH ADDITIONAL CO	PIES OF THIS SCH	IEDULE 🏄	NEEDED

	EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Fees   Fees   Fees   Food/Beverage Expense   Fees	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contract	Trans Exper  Labor Trave Trave Other	ation/Fundraising Expense portation Equipment & Related ise I In District I Out of District (enter a category not listed above)	
1. Total pages Schedule F1:	2. FILER NAME		3. Filer ID (	(Ethics Commission Filers)	
. •	Lina M. Hidalgo			·	
4 Date	5 Payee name				
05/02/2018	NGP VAN				
6 Amount	7 Payee address;	City;	State:	Zip Code	
\$320,00	r ayee address,		7-10.	p 0000	
•• ====	1445 New York Ave NW Ste 20	00 Washington, DC 200	05-2158		
			<b>///</b>		
8	12.0		10 > 5		
PURPOSE	(a) Category (See categories listed a	at the top of this schedule)	(b) Description Check if to	ravel outside of Texas, complete Schedule T	
OF	Office Overhead/Rental Expense		Check if /	Austin, TX, officeholder living expense	
EXPENDITURE			Compliance Softw	are	
9 Complete ONLY if direct	Candidate/Officeholder name		LOffice sought	Office held	
expenditure to benefit C/OH	Canadate/Officeriolder name		omao dougin	• · · · · · · · · · · · · · · · · · · ·	
4 D-4-	F C				
4 Date 06/04/2018	5 Payee name NGP VAN				
6 Amount		City;	State:	Zip Code	
\$320.00	7 Payee address;	City,	State.	Zip Code	
	1445 New York Ave NW Ste 21	00 Washington, DC 200	005-2158		
8 BURDOCE	(a) Category (See categories listed a	at the top of this schedule)	(b) Description	ravel outside of Texas, complete Schedule T	
PURPOSE OF	Office Overhead/Rental Expense	****		Austin, TX, officeholder living expense	
EXPENDITURE	77		Compliance Softw	are	
	****			<del></del>	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	•	Office sought	Office held	
4 Date	5 Payee name				
05/29/2018	Nu Strategies	0.1	01-1	7:- Oada	
6 Amount	7 Payee address;	City;	State:	Zip Code	
\$3,000.00	2137 24th Oc Cuits 9675 No.	VJ. NV 10016 421	า		
	31W 34th Street Suite 8075 Nev	w TOFK, NT 10010-431	3		
8	(a) Cata 4		(h) Doordation		
PURPOSE	(a) Category (See categories listed a	at the top of this schedule)	(b) Description Check if t	ravel outside of Texas, complete Schedule T	
OF	Salaries/Wages/Contract Labor		Check if	Austin, TX, officeholder living expense	
EXPENDITURE			Contract Labor		
9 Complete ONLY if direct	Candidate/Officeholder name		I Office sought	Office held	
expenditure to benefit C/OH	Carra de la companio del la companio de la companio				
				- Address - Addr	
	ATTACH ADDITIONAL COP	IES OF THIS SCHE	EDULE AS NEE	DED	

	EXPENDIT	URE CATEGORIES I	FOR BOX 8	i(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 The Instruction Gui	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contracted to the explains how to core	ci Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) orm.
1. Total pages Schedule F1:	2. FILER NAME		3. File	er ID (Ethics Commission Filers)
	Lina M. Hidalgo			
4 Date	5 Payee name			
03/01/2018	Rory Payne			
\$32.00	7 Payee address;  44 Martin St Cambridge, MA (	City; 02138-1617	State:	Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See categories listed Salaries/Wages/Contract Labor	at the top of this schedule)		heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held
4 Date	5 Payee name			
01/03/2018	Dynisha Randle			
6 Amount \$1,250.00	7 Payee address; 917 Pinckney St Houston, TX	City; 77009-8616	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Salaries/Wages/Contract Labor	at the top of this schedule)	·** —	heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held
4 Date	5 Payee name			
01/19/2018	Redshift Writers LLC			
6 Amount \$900.00	7 Payee address; 2744 Briarhurst Dr Apt 12 Hot	City; uston, TX 77057-5317	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Salaries/Wages/Contract Labor	at the top of this schedule)	. =	heck if travel outside of Texas, complete Schedule 1 heck if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	d Office held
	ATTACH ADDITIONAL CO	PIES OF THIS SCH	EDULE AS	NEEDED

	EXPENDIT	TURE CATEGORIES F	OR 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 The Instruction Gui	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contrac de explains how to con	t Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above)
Total pages Schedule F1:		•		er ID (Ethics Commission Filers)
, •	Lina M. Hidalgo			
4 Date	5 Payee name			
04/12/2018	REVUP Software			
6 Amount \$1,500.00	7 Payee address; 101 Redwood Shores Pkwy Sto	City;	State:	Zip Code
	101 Redwood Shores Pkwy Ste	e 125 Reawood City, CA	. 94003-1177	
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Descrip	tion sck if travel outside of Texas, complete Schedule T
OF	Office Overhead/Rental Expense			neck if Austin, TX, officeholder living expense
EXPENDITURE	,		Compliance	Software
9 Complete ONLY if direct	Candidate/Officeholder name		Office sought	Office held
expenditure to benefit C/OH	Candidate/Officeriolder flame		< × ×	0.1100 11010
4 Date	5 Payee name			
04/16/2018	REVUP Software			
6 Amount	7 Payee address;	City;	State:	Zip Code
\$300.00				·
	101 Redwood Shares Pkwy Sta	e 125 Redwood City, CA	. 94065-1177	
8 BUDDOOF	(a) Category (See categories listed	at the top of this schedule)	(b) Descrip	otion leck if travel outside of Texas, complete Schedule T
PURPOSE OF	Office Overhead/Rental Expense		ı <u>≔</u>	neck if Austin, TX, officeholder living expense
EXPENDITURE			Compliance	Software
9 Complete ONLY if direct	Candidate/Officeholder name		Office sought	Office held
expenditure to benefit C/OH	Candidate/Officendider name	`	Office sough	Office held
4 Data	* Davis and			
4 Date 05/02/2018	5 Payee name REVUP Software			
6 Amount	7 Payee address;	City;	State:	Zip Code
\$500.00	i ayee address,	Ony,	Olulo.	_,p 0000
	101 Redwood Shores Pkwy Sto	e 125 Redwood City, CA	94065-1177	
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descrip	otion neck if travel outside of Texas, complete Schedule T
PUAPOSE OF	Office Overhead/Rental Expense			neck if Austin, TX, officeholder living expense
EXPENDITURE			Compliance	Software
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	(	 Office sough	Office held
	ATTACH ADDITIONAL CO	PIES OF THIS SCHE	EDULE AS	NEEDED

· · · · · · · · · · · · · · · · · · ·	EXPENDIT	URE CATEGORIES I	OR BOX 8	3(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contrac	t Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above)
Credit Card Payment	The Instruction Gui	de explains how to con	nplete this f	form.
1 Total pages Schedule F1:	2. FILER NAME Lina M. Hidalgo		3. File	er ID (Ethics Commission Filers)
4 Date 06/04/2018	5 Payee name REVUP Software		· , · · · · , · <del>· ·</del> , ·	
6 Amount \$500.00	7 Payee address; 101 Redwood Shores Pkwy Sto	City; 2 125 Redwood City, CA	State: . 94065-1177	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Office Overhead/Restal Expense	at the top of this schedule)		heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	nt Office held
4 Date	5 Payee name			
05/18/2018	Road Women Democratic Club			
6 Amount \$150.00	7 Payee address; PO Box 22678 Houston, TX 77	City; 7227-2678	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed  Event Expense	at the top of this schedule)		ption heck if travel outside of Texas, complete Schedule T theck if Austin, TX, officeholder living expense c, Convention, Meeting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	Office held
4 Date 01/01/2018	5 Payee name Carroll Robinson			
6 Amount \$750.00	7 Payee address; 3401 Prospect St Houston, TX	City; 77004-7811	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Salaries/Wages/Contract Labor	at the top of this schedule)	! ≒	theck if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense abor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	nt Office held
	ATTACH ADDITIONAL CO	PIES OF THIS SCHE	DULE AS	NEEDED

-	EXPENDIT	URE CATEGORIES F	OR 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 The Instruction Guil	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contrac de explains how to con	Tra Ex I Labor Tra Tra Ott	licitation/Fundraising Expense ansportation Equipment & Related pense avel In District avel Out of District ner (enter a category not listed above) n.
,	2. FILER NAME	ao axplamo non to con		D (Ethics Commission Filers)
Total pages Schedule F1:	Lina M. Hidalgo		3. FIIBI I	D (Etines Continuesion Facis)
4 Date	5 Payee name			
01/31/2018	Carroll Robinson			
6 Amount \$750.00	7 Payee address; 3401 Prospect St Houston, TX	City; 77004-7811	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Salaries/Wages/Contract Labor	at the top of this schedule)	. =	if travel outside of Texas, complete Schedule T if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
4 Date	5 Payee name			<del> </del>
03/01/2018	Carroll Robinson			
6 Amount \$750.00	7 Payee address; 3401 Prospect St Houston, TX	City: 77004-7811	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed	at the top of this schedule)	. =	cif travel outside of Texas, complete Schedule T kif Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
4 Date	5 Payee name			- <del></del> -
04/11/2018	Carroll Robinson			
6 Amount \$750.00	7 Payee address; 3401 Prospect St Houston, TX	City; 77004-7811	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Salaries/Wages/Contract Labor	at the top of this schedule)		k if travel outside of Texas, complete Schedule T k if Austin, TX, officeholder living expense -
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
	ATTACH ADDITIONAL CO	PIES OF THIS SCHE	EDULE AS N	EEDED

EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Politicat Committee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contrac	Tra Exp ct Labor Tra Tra	licitation/Fundraising Expense ansportation Equipment & Related pense avel In District avel Out of District ner (enter a category not listed above)	
Credit Card Payment	The Instruction Gui	de explains how to cor	mplete this forn	n.	
Total pages Schedule F1:	2. FILER NAME Lina M. Hidalgo		3. Filer I	D (Ethics Commission Filers)	
4 Date	5 Payee name		•		
05/11/2018	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 Salaries/Wages/Contract Labor	at the top of this schedule)	1 😐	cif travel outside of Texas, complete Schedule T cif Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	
4 Date	5 Payee name				
06/06/2018 ·	Carroll Robinson				
6 Amount \$750.00	7 Payee address; 3401 Prospect St Houston, TX	City; 77004-7811	State:	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Salaries/Wages/Contract Labor	at the top of this schedule)	# <b>=</b>	cif travel outside of Texas, complete Schedule T kif Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	
4 Date	5 Payee name				
03/02/2018	Serena Roosevelt				
6 Amount \$800.00	7 Payee address; 1251 Bellair Way Menlo Park,	City; CA 94025-6612	State:	Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed Salaries/Wages/Contract Labor		Contract Labor	k if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	
	ATTACH ADDITIONAL CO	PIES OF THIS SCHI	EDULE AS N	EEDED	

	EXPENDI	TURE CATEGORIES I	FOR BOX 8	EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Legal Services	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contract de explains how to cor	ct Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above form.	B)			
Total pages Schedule F1:	2. FILER NAME	•		er ID (Ethics Commission Filers)				
	Lina M. Hidalgo			(2002)				
4 Date	5 Payee name	· . · . · . · · · · · · · · · · · · · ·			7			
04/10/2018	Serena Roosevelt				,			
6 Amount	7 Payee address;	City;	State:	Zip Code				
\$105.00	1251 Bellair Way Menlo Park,	CA 94025-6612	4					
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descrip	otion heck if travel outside of Texas, complete Schedul	le T			
PURPOSE OF	Advertising Expense		@#####################################	heck if Austin, TX, officeholder living expense				
EXPENDITURE	Z		Reimbursen	ment of recruitment job posting for				
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	ot Office held				
4 Date	5 Payee name							
04/10/2018	Serena Roosevelt							
6 Amount \$3,000.00	7 Payee address; 1251 Bellair Way Menlo Park	CA 94025-6612	State:	Zip Code				
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Descrip	ption Theck if travel outside of Texas, complete Schedul	le T			
OF	Advertising Expense		. ≔	Check if Austin, TX, officeholder living expense				
EXPENDITURE	<b>3 7 3</b>		Contract La	abor				
O O O O O O O O O O O O O O O O O O O	0 23 20 5 13		Office sough	nt Office held				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Onice sough	it Office field				
4 Date	5 Payee name							
05/10/2018	Serena Roosevelt							
6 Amount \$3,000.00	7 Payee address;	City;	State:	Zip Code				
	1251 Bellair Way Menlo Park	, CA 94025-6612						
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Descri	ption Check if travel outside of Texas, complete Schedu	ıle T			
PURPOSE	Salaries/Wages/Contract Labor			Check if Austin, TX, officeholder living expense				
EXPENDITURE	Summer waste comment than a		Contract La	abor				
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	ht Office held				
	ATTACH ADDITIONAL CO	PIES OF THIS SCHI	EDULE AS	S NEEDED				

	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 The Instruction Guil	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contract de explains how to com	1 E t Labor 1 1	Solicitation/Fundraising Expense Fransportation Equipment & Related Expense Fravel In District Fravel Out of District Other (enter a category not listed above)	
	2. FILER NAMÉ	ao explaine non le con	<del></del>	r ID (Ethics Commission Filers)	
1. Votal pages collectule 1 1.	Lina M. Hidalgo		0. 1 110	TE (Euros Sammonari Hora)	
4 Date	5 Payee name				
06/07/2018	Serena Roosevelt				
6 Amount \$179.00	7 Payee address; 1251 Bellair Way Menlo Park,	City; CA 94025-6612	State:	Zip Code	
8 DUBBOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Descript	tion ack if travel outside of Texas, complete Schedule T	
PURPOSE OF	Office Overhead/Rental Expense		=	ack if Austin, TX, officeholder living expense	
EXPENDITURE			Reimbursem	ent for Purchase of Software	
9 Complete ONLY if direct	Candidate/Officeholder name		) Office sought	Office held	
expenditure to benefit C/OH	Candidate/Officeriologic flame	`	omoo ooagaa	J.1.03 7.3.0	
4 Date	5 Payee name				
06/07/2018	Serena Roosevelt				
6 Amount \$3,000.00	7 Payee address; 1251 Bellair Way Menlo Park,	CA 94025-6612	State:	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Salaries/Wages/Contract Labor	l at the top of this schedule)	· — ·	eck if travel outside of Texas, complete Schedule T eck if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	(	Office sought	Office held	
4 Date	5 Payee name				
06/21/2018	Serena Roosevelt				
6 Amount \$36.85	7 Payee address; 1251 Bellair Way Menlo Park,	City; , CA 94025-6612	State:	Zip Code	
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descrip	tion eck if travel outside of Texas, complete Schedule T	
PURPOSE OF	Solicitation/Fundraising Expense		_	eck if Austin, TX, officeholder living expense	
EXPENDITURE	Tallian State and State an		Reimbursem	ent for contractor taxis	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	(	 Office sought	Office held	
	ATTACH ADDITIONAL CO	PIES OF THIS SCHE	DULE AS	NEEDED	

	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		Tr Ex ct Labor Tr Tr O	olicitation/Fundraising Expense ansportation Equipment & Related kpense avel In District avel Out of District ther (enter a category not listed above)	
		de explains how to cor	<del></del>		
Total pages Schedule F1:	2. FILER NAME Lina M. Hidalgo		3. Filer	ID (Ethics Commission Filers)	
4 Date	5 Payee name				
06/21/2018	Serena Roosevelt				
6 Amount \$39.35	7 Payee address; 1251 Bellair Way Menlo Park,	City; CA 94025-6612	State:	Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed Solicitation/Fundraising Expense	at the top of this schedule)	Chec	On k if travel outside of Texas, complete Schedule T ck if Austin, TX, officeholder living expense at for contractor taxis	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	
4 Date	5 Payee name				
06/21/2018	Serena Roosevelt	<u> </u>			
8 PURPOSE	7 Payee address; 1251 Bellair Way Menlo Park, (a) Category (See categories listed		State:	Zip Code On ck if travel outside of Texas, complete Schedule T	
OF EXPENDITURE	Solicination/Fundraising Expense		, —	ck if Austin, TX, officeholder living expense  int for contractor taxis	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	
4 Date	5 Payee name				
06/21/2018	Serena Roosevelt		01-1-1	7. 0.4	
6 Amount \$50.12	7 Payee address; 1251 Beltair Way Menlo Park,	City; CA 94025-6612	State:	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Solicitation/Fundraising Expense	at the top of this schedule)	Che	ON ck if travel outside of Texas, complete Schedule T ck if Austin, TX, officeholder living expense nt for contractor taxis	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	
,	ATTACH ADDITIONAL CO	PIES OF THIS SCHI	EDULE AS N	IEEDED	

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•	EXPENDIT	URE CATEGORIES F	OR BOX 8	(a)
Candidate/Officeholder/Political Committee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	-		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above)
Credit Card Payment	The Instruction Gul	de explains how to com		
Total pages Schedule F1:	2. FILER NAME Lina M. Hidalgo		3. File	er ID (Ethics Commission Filers)
4 Date	5 Payee name			
06/21/2018	Serena Roosevelt			
6 Amount \$88.40	7 Payee address; 1251 Bellair Way Menlo Park,	City; CA 94025-6612	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Travel Out Of District	at the top of this schedule)		otion heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense ment for contractor plane tickets
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held
4 Date 02/09/2018	5 Payee name Jennifer Soros			
6 Amount \$250.00	7 Payee address; 70A Greenwich Ave New York	City, k, NY 10011-8300	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed OFHER (enter a category not listed		🗀 :	Otion heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense Contribution on 2.08.2018
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	C	Office sough	t Office held
4 Date	5 Payee name			
03/12/2018 6 Amount \$232.50	7 Payee address; 2702 Love Field Dr Dallas, TX	City;	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed	at the top of this schedule)	_	Dtion heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	(	Office sough	t Office held
	ATTACH ADDITIONAL CO	PIES OF THIS SCHE	DULE AS	NEEDED

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	Solid Tran Expe t Labor Trav Trav Othe	citation/Fundraising Expense sportation Equipment & Related ense el in District el Out of District er (enter a category not listed above)
Total pages Schedule F1:	2. FILER NAME		-000000·	(Ethics Commission Filers)
Total pages conceded 1 17	Lina M. Hidalgo		0, , ,,,,,	(2)
4 Date	5 Payee name			
05/08/2018	Southwest Airlines	•		
6 Amount	7 Payee address;	City;	State:	Zip Code
\$198.98	, , , , , , , , , , , , , , , , , , ,	•		
	2702 Love Field Dr Dallas, TX	75235-1908		
8	(a) Category (See categories listed	at the lop of this schedule)	(b) Description	f travel outside of Texas, complete Schedule T
PURPOSE OF	Travel In District	****	. =	f Austin, TX, officeholder living expense
EXPENDITURE	Havet In District		Airfare	
		<u> </u>	Office course	Office held
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office field
4 Date	5 Payee name			
05/08/2018	Southwest Airlines	0.1	State:	Zip Code
6 Amount \$379.79	7 Payee address; 2702 Love Field Dr Dallas, TX	City;	Oldio.	2.0 0000
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Description	f travel outside of Texas, complete Schedule T
OF	Travel Out Of District		Check	if Austin, TX, officeholder living expense
EXPENDITURE			Airfare	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
4 Date	5 Payee name			
05/09/2018	Spirit Airlines			
6 Amount	7 Payee address;	City;	State:	Zip Code
\$158.19	2800 Executive Way Miramar	, FL 33025-6542		
8	(a) Category (See categories lister	at the top of this schedule)	(b) Description	) if travel outside of Texas, complete Schedule T
PURPOSE OF	Travel Out Of District			if Austin, TX, officeholder living expense
EXPENDITURE	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Airfare	
9 Complete ONLY if direct	Candidate/Officeholder name		Office sought	Office held
expenditure to benefit C/OH	Candidate/Onicendidat name		Onice addgin	Onios flois
<u> </u>	<u> </u>			
	ATTACH ADDITIONAL CO	PIES OF THIS SCHI	EDULE AS NE	EDED

	EXPENDITURE CATEGOR	IES 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/R Polling Expense Printing Expense Salaries/Wages/Co	Transportation Equipment & Related Expense ontract Labor Travel In District Travel Out of District Other (enter a category not listed above)	
Total pages Schedule F1:	2. FILER NAME Lina M. Hidalgo	3. Filer ID (Ethics Commission Filers)	
4 Date 02/28/2018	5 Payee name Texas Coalition of Black Democrats		-
6 Amount \$250.00	7 Payee address; City; PO Box 570793 Dallas, TX 75357-0793	State: Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sched	Check if Austin, TX, officeholder living expense  Event	г
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	
4 Date 04/20/2018	5 Payee name Texas Democratic Party 7 Payee address: City;	State: Zip Code	
6 Amount \$1,375.00	7 Payee address; City; 1106 Lavaca St Ste 100 Austin, TX 78701-2170	State. Zip Good	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sched	dule) (b) Description Check if travel outside of Texas, complete Schedule 1 Check if Austin, TX, officeholder living expense Voter File Access	r
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	
4 Date 04/23/2018 6 Amount \$1,375.00	5 Payee name Texas Democratic Party 7 Payee address; City, 1106 Lavaca St Ste 100 Austin, TX 78701-2170	State: Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this school Office Overhead/Rental Expense	dule) (b) Description Check if travel outside of Texas, complete Schedule Check if Austin, TX, officeholder living expense Voter File Access	T
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	
	ATTACH ADDITIONAL COPIES OF THIS S	SCHEDULE AS NEEDED	

	EXPENDITURE	CATEGORIES FOR	BOX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Fees Pollin		Travel Out of District Other (enter a category	ent & Related
	2. FILER NAME	·	3. Filer ID (Ethics Commis	saion Eilora\
Total pages Schedule F1:	Lina M. Hidalgo	,	3. Filer ID (Ethics Commis	Sion Filots)
4 Date	5 Payee name			
06/29/2018	Juana Torres			
6 Amount \$4,838.26	7 Payee address; Ci 678 Stonewall St San Antonio, TX 7	-	itate: Zip C	ode
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the Salaries/Wages/Contract Labor	, ,	Description Check if travel outside of Texa Check if Austin, TX, officeholi ries and Wages	
9 Complete ONLY if direct	Candidate/Officeholder name	Office	sought O	ffice held
expenditure to benefit C/OH				
4 Date 03/12/2018	5 Payee name United Airlines	$-/\Lambda$	. (	
6 Amount \$462.00	7 Payee address; C 233 S Wacker Dr Chicago, IL 60606	2000000 2000000	itete: Zip C	ode 🚿 🔠
8 PURPOSE	(a) Category (See categories listed at the	top of this schedule) (b) [	Description   Check if travel outside of Texa	s, complete Schedule T
OF EXPENDITURE	Travel Out Of District	Airf	Check if Austin, TX, officehol	der living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office	sought O	ffice held
4 Date	5 Payee name			
05/14/2018	United Airlines			
6 Amount \$258.95	7 Payee address; C 233 S Wacker Dr Chicago, IL 60606		State: Zip C	ode
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the Travel Out Of District	top of this schedule) (b) [	Description Check if travel outside of Texe Check if Austin, TX, officehol	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office	sought O	ffice held
	ATTACH ADDITIONAL COPIES	OF THIS SCHEDUL	E AS NEEDED	

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment		head/Rental ense pense ages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above)	
1. Total pages Schedule F1:	2. FILER NAME	3. Fil	er ID (Ethics Commission Filers)	
	Lina M. Hidalgo			
4 Date	5 Payee name			
01/31/2018	USPS			
6 Amount \$136.38	7 Payee address; City; 1000 W Walnut St Garland, TX 75040-569	State:	Zip Code	
i				
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of the Office Overhead/Rental Expense		heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sough	t Office held	
4 Date	5 Payee name			
02/20/2018	USPS	<u> </u>		
6 Amount \$40.00	7 Payee address; City; 1000 W Walnut St Garland, TX 75040-569	State:	Zip Code	
8 PURPOSE OF	(a) Category (See categories listed at the top of to		Dtion heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense	
EXPENDITURE		Postage and	1 Shipping	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sough	t Office held	
4 Date	5 Payee name			
04/09/2018	USPS			
6 Amount \$30.00	Payee address; City;  1000 W Walnut St Garland, TX 75040-56	State:	Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of the Office Overhead/Rental Expense		heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Óffice sough	t Office held .	
	ATTACH ADDITIONAL COPIES OF	THIS SCHEDULE AS	NEEDED	

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Candidate/Officeholder/Political Committee Credit Card Payment		Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contract de explains how to cor	Tr. Ex Ct Labor Tr. Tr. Ot nplete this for	
Total pages Schedule F1:	2. FILER NAME Lina M. Hidalgo		3. Filer	ID (Ethics Commission Filers)
4 Date	5 Payee name			
05/29/2018	USPS			
6 Amount	7 Payee address;	City;	State:	Zip Code
\$20.00	1000 W Walnut St Garland, TX	₹ 75040-5690		
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Description	On k if travel outside of Texas, complete Schedule T
OF	Office Overhead/Rental Expense		. ≡	k if Austin, TX, officeholder living expense
EXPENDITURE	,		Postage and St	nipping
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
4 Date	5 Payee name			
01/16/2018	Verizon Wireless			
6 Amount \$44.10	7 Payee address; PO Box 15023 Worcester, MA	O1,615-0023	State:	Zip Code
8	(a) Category (See categories listed	at the top of this sehedule?	(b) Description	on.
PURPOSE		at the top of this schedule)	Chec	k if travel outside of Texas, complete Schedule T
OF EXPENDITURE	Office Overhead/Rental Expense		Campaign Pho	ck if Austin, TX, officeholder living expense
			Campaign Fno	vite
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
4 Date	5 Payee name			
02/21/2018	Verizon Wireless			
6 Amount \$33.08	7 Payee address;	City;	State:	Zip Code
23.1,978	PO Box 15023 Worcester, MA	01615-0023		
8	(a) Category (See categories lister	at the top of this schedule)	(b) Description	On k if travel outside of Texas, complete Schedule T
PURPOSE	Office Overhead/Rental Expense		. =	ck if Austin, TX, officeholder living expense
EXPENDITURE			Campaign Pho	one
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
	ATTACH ADDITIONAL CO	PIES OF THIS SCHI	EDULE AS N	IEEDED

	EXPE	NDITURE CATEGORIES	FOR BOX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Legal Services	Office Overhead/Rental Polling Expense Printing Expense ense Salaries/Wages/Contra	Transj Expen ct Labor Travel Travel Other	ation/Fundraising Expense portation Equipment & Related ise In District Out of District (enter a category not listed above)
Total pages Schedule F1:	2. FILER NAME	•		Ethics Commission Filers)
	Lina M. Hidalgo		(	
4 Date	5 Payee name		<u> </u>	
04/11/2018	Verizon Wireless			
6 Amount \$33.08	7 Payee address;	City;	State:	Zip Code
<i>φ.</i> 1.7.00	PO Box 15023 Worcester	-, MA 01615-0023		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories Office Overhead/Rental Expe	s listed at the top of this schedule) ense	I <u></u>	ravel outside of Texas, complete Schedule T Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder n	ame	Office sought	Office held
4 Date	5 Payee name			
01/01/2018	Sean Walker			
6 Amount \$141.00	7 Payee address;	City; 1 Antonio, TX 78251-4306	State:	Zip Code
8			(h) Description	10-00-11/00-TE
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Lab	s listed at the top of this schedule) oor	· 😑	ravel outside of Texas, complete Schedule T Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder n	ame	Office sought	Office held
4 Date	5 Payee name			
01/23/2018	Sean Walker			
6 Amount \$162.00	7 Payee address; 4222 Luckenbach Rd Sar	City; 1 Antonio, TX 78251-4306	State:	Zip Code
8 PURPOSE OF	(a) Category (See categorie Salaries/Wages/Contract Lat	s listed at the top of this schedule)	Check if	ravel outside of Texas, complete Schedule T Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder n	ame	Office sought	Office held
	ATTACH ADDITIONAL	COPIES OF THIS SCH	EDULE AS NEE	DED

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 The Instruction Sul	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contract	Transp Expen ct Labor Travel Travel Other	ation/Fundraising Expense portation Equipment & Related se In District Out of District (enter a category not listed above)
•		de explains now to col		This Completion Filoso)
Total pages Schedule F1:	2. FILER NAME Lina M. Hidalgo		3. Filet ID (	Ethics Commission Filers)
4 Date	5 Payee name			
01/31/2018	Sean Walker			
6 Amount \$213.00	7 Payee address;	City;	State:	Zip Code
	4222 Luckenbach Rd San Anto	nio, TX 78251-4306		
8 PURPOSE OF	(a) Category (See categories listed	at the top of this schedule)	1 ///	avel outside of Texas, complete Schedule T
EXPENDITURE	Salaries/Wages/Contract Labor		Contract Labor	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
4 Date	5 Payee name	$\searrow$		
02/22/2018	Sean Walker	<u> </u>		
6 Amount \$225.00	7 Payee address; 4222 Luckenbach Rd San Anto	City; onio, TX 78251-4306	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Salaries/Wages/Contract Labor	at the top of this schedule)	· 🛏	avel outside of Texas, complete Schedule T Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
4 Date	5 Payee name			
03/02/2018	Sean Walker			
6 Amount \$183,00	7 Payee address;	City;	State:	Zip Code
	4222 Luckenbach Rd San Anto	onio, TX 78251-4306		
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)	1 😐	avel outside of Texas, complete Schedule T
OF EXPENDITURE	Salaries/Wages/Contract Labor		Contract Labor	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
	ATTACH ADDITIONAL CO	PIES OF THIS SCHI	EDULE AS NEE	DED

# Page - 132

### POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

				···
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/Contrade explains how to contract the explains have the explains how to contract the explains have the explain have the explains have the explain have the explains have the explain have the explains have the explains have the explains have th	Solicitat Transpo Expensi Ct Labor Travel I Travel C	ion/Fundraising Expense Intation Equipment & Related In District Out of District Inter a category not listed above)
1 Total pages Cahadula E1:	2. FILER NAME	•	20000000	thics Commission Filers)
Total pages Schedule F1:	Lina M. Hidalgo		a. Filerib (E	(Inca Commission Filers)
4 D-4-				
4 Date	5 Payee name			
03/19/2018	Sean Walker			7-0-1-
6 Amount \$246.00	7 Payee address; 4222 Luckenbach Rd San Anto	City;	State:	Zip Code
		•		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Salaries/Wages/Contract Labor	at the top of this schedule)		rel outside of Texas, complete Schedule T stin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
4 Date	5 Payee name		-	
04/01/2018	Sean Walker			
6 Amount \$69.00	7 Payee address; 4222 Luckenbach Rd San Anto	City; onio, TX 78251-4306	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Salaries/Wages/Contract Labor	at the top of this schedule)	. =	vel outside of Texas, complete Schedule T stin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
4 Date 04/17/2018	5 Payee name Sean Walker			
6 Amount \$237.00	7 Payee address; 4222 Luckenbach Rd San Anto	City; onio, TX 78251-4306	State:	Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See categories listed Salaries/Wages/Contract Labor	at the top of this schedule)	Check if Au	vel outside of Texas, complete Schedule T istin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
	ATTACH ADDITIONAL CO	PIES OF THIS SCH	EDULE AS NEED	DED

EXPENDITURE CATEGORIES FOR BOX B(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Office Overhead/Rent Fees Polling Expense Printing Expense Gift/Awards/Memorials Expense Legal Services  The Instruction Guide explains how to compare the compared to the compa	Transportation Equipment & Related Expense ract Labor Travel In District Travel Out of District Other (enter a category not listed above)			
· · · · · · · · · · · · · · · · · · ·	2. FILER NAME	3. Filer ID (Ethics Commission Filers)			
1. Total pages Schedule FT.	Lina M. Hidalgo	S. The ID (Ethics Commission Thers)			
4 Date	5 Payee name				
05/07/2018	Sean Walker				
6 Amount \$174.00	7 Payee address; City; 4222 Luckenbach Rd San Antonio, TX 7825 -4306	State: Zip Code			
8	(a) Category (See categories listed at the top of this schedule	(b) Description			
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Contract Labor			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			
4 Date	5 Payee name				
05/30/2018	Sean Walker				
6 Amount \$246.00	7 Payee address; City; 4222 Luckenbach Rd San Antonio, TX 78251-4306	State: Zip Code			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule Salaries/Wages/Contract Labor	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Contract Labor			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			
4 Date	5 Payee name				
06/06/2018	Sean Walker				
6 Amount \$96.00	7 Payee address; City; 4222 Luckenbach Rd San Antonio, TX 78251-4306	State: Zip Code			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule Salaries/Wages/Contract Labor	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Contract Labor			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			
	ATTACH ADDITIONAL COPIES OF THIS SC	HEDULE AS NEEDED			

#### 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	Legal Services	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contract La	Transports Expense abor Travel In I Travel Oul Other (ent	n/Fundraising Expense ation Equipment & Related District t of District er a category not listed above)		
Total pages Schedule F1:	2. FILER NAME Lina M. Hidalgo		3. Filer ID (Eth	ics Commission Filers)		
4 Date 06/26/2018	5 Payee name Sean Walker					
6 Amount \$225.00	7 Payee address. 4222 Luckenbach Rd San Anto	City; onio, TX 78251-4306	State:	Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Salaries/Wages/Contract Labor		<b>—</b>	outside of Texas, complete Schedule T n, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Öffi	ce sought	Office held		
4 Date 01/22/2018	5 Payee name WPY Action Network					
6 Amount \$250.00	7 Payee address; 350 Convention Way Ste 200 I	City; Redwood City, CA 94063-1	State:	Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Advertising Expense					
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Offi	ice sought	Office held		

#### ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

#### INTEREST, CREDITS, GAINS, REFUNDS, AND **CONTRIBUTIONS RETURNED TO FILER**

#### SCHEDULE K

The instruction Guide explains how to complete this form.  2. FILER NAME			Schedule K: ole nics Commission Filers)	
Lina M. Hidal 4. Date 01/16/2018	5 Name of person from whom amount is received Nationbuilder 6 Address of person from whom amount is received; City; State; Zip	Code	8 Amount \$1,200.00	
	520 S Grand Ave Los Angeles, CA 90071-2600  7 Purpose for which amount is received	Check if politi	lical contribution returned to filer	
4. Date 06/18/2018	5 Name of person from whom amount is received Texas Comptroller of Public Accounts  6 Address of person from whom amount is received; City; State; Zip PO Box 13528 Austin, TX 78711-3528	Code	8 Amount \$185.07	
	7 Purpose for which amount is received Refund of payroll taxes	Check if polit	tical contribution returned to filer	

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

#### SCHEDULE T

The Instr	uction Guide	explains how t	o complete this fo	rm.	1. Total pages Schedule	T:
2. FILER NAME Lina M. Hidalgo					3. Filer ID (Ethics Comm	nission Filers)
4 Name of Contributor /	Corporation	or Labor Organiz	ation / Pledgor / Pa	IVAE		
Southwest Airlines	OU/puranon.	or Education of Spirite	.a.ioiii i loagoi i i a	,,,,,		
5 Contribution / Expend	liture reporter	d on:				
_ ·	lule A2	Schedule B	Schedule B(J)	Schedule C2	Schedule D	Schedule F1
l	fule F2	Schedule F4	Schedule G	Schedule H	Schedule COH-UC	Schedule B-SS
6 Dates of travel	7 Name of p	erson(s) traveling				
03/21/2018		city or name of d	eparture location			
	9 Destination San Jose		destination location	_		
10 Means of transportal COMMAIR	tion	11 Purpose of tr Fundraising t	avel (including nam rip to CA	ne of conference, s	eminar, or other event)	
4 Name of Contributor /	/ Corporation	or Labor Organiz	ation / Pledgor / Pa	iyee		
United Airlines	<u></u>					
5 Contribution / Expend	liture reporte	d on:		adh		
Sched	iule A2	Schedule B	Schedule B(J)	Schedule C2	Schedule D	Schedule F1
Sched	iule F2	Schedule F4	Schedule G	Schedule H	Schedule COH-UC	Schedule B-SS
6 Dates of travel	7 Name of p Lina Hid	erson(s) traveling talgo	1			
03/24/2018		city or name of d	eparture location			
	9 Destination Houston		destination location			
10 Means of transporta COMMAIR	tion	11 Purpose of to Fundraising t	ravel (including nam rip from CA	e of conference, s	eminar, or other event)	-
4 Name of Contributor /	/ Corporation	or Labor Organiz	zation / Pledgor / Pa	yea		
Southwest Airlines						
5 Contribution / Expend	diture reporte	d on:				
=	dule A2	Schedule B	Schedule B(J)	Schedule C2	Schedule D	Schedule F1
Sched	dule F2	Schedule F4	}Schedule G	Schedule H	Schedule COH-UC	Schedule 8-SS
]		erson(s) traveling h Doyel	J			
05/15/2018	8 Departure Austin,	city or name of d	eparture location			,
ļ	9 Destination Los Ang	n city or name of geles, CA	destination location			
10 Means of transporta COMMAIR	tion	11 Purpose of to Airfare to a C	ravel (including nam CA Fundraiser	ne of conference, s	eminar, or other event)	
	<del></del>					

#### ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

#### SCHEDULE T

The Instr	ruction Guide	explains how	to complete this fo	rm.	Total pages Schedule	• T:	
2. FILER NAME Lina M. Hidalgo				3. Filer ID (Ethics Commission Filers)			
4 Name of Contributor	/ Corporation	or Labor Organi	zation / Pledgor / Pa	yee			
Spirit Airlines							
5 Contribution / Expend	diture reported	d on:					
Sche	dule A2	Schedule B	Schedule B(J)	Schedule C2	Schedule D	Schedule F1	
Sche	dule F2	Schedule F4	Schedule G	Schedule H	Schedule COH-UC	Schedule B-SS	
6 Dates of travel	7 Name of po	erson(s) travelin lalgo	g	•			
5/15/2018	8 Departure Houston	city or name of o , TX	departure location				
		city or name of eles, CA	destination location				
10 Means of transports COMMAIR	ation		travel (including nam A Fundraiser	ne of conference, s	eminar, or other event)		
4 Name of Contributor	/ Corporation	or Labor Organi	ization / Pledgor / Pa	ıyee			
United Airlines							
5 Contribution / Expend	5 Contribution / Expenditure reported on:						
	Schedule A2 Schedule B Schedule B(J) Schedule C2 Schedule D Schedule F1					<u></u>	
Sche	dule F2	Schedule F4	Schedule G	Schedule H	Schedule COH-UC	Schedule B-SS	
6 Dates of travel	7 Name of po Lina Hid	erson(s) travelin lalgo	9				
05/16/2018 And 05/16/2018	5/16/2018 And 05/16/2018 B Departure city or name of departure location San Francisco, CA						
	9 Destination city or name of destination location Houston, CA						
10 Means of transports COMMAIR	10 Means of transportation COMMAIR  11 Purpose of travel (including name of conference, seminar, or other event) Airfare to CA Fundraiser						
4 Name of Contributor	/ Corporation	or Labor Organ	ization / Pledgor / Pa	ayee			
American Airlines							
5 Contribution / Expenditure reported on:							
	dule A2	Schedule B	Schedule B(J)	Schedule C2	Schedule D	Schedule F1	
Sche	dule F2	Schedule F4	Schedule G	Schedule H	Schedule COH-UC	Schedule B-SS	
6 Dates of travel	7 Name of person(s) traveling Lina Hidalgo						
5/16/2018	8 Departure city or name of departure location Los Angeles, CA						
	Destination city or name of destination location     San Jose, CA					<del></del>	
10 Means of transports COMMAIR	10 Means of transportation						
		·			<del></del>		

ATTACH ADDITIONAL	CODIES OF THIS	SCHEDIH E	AS NEEDED
A I I ACH ADDII IUNAL	COPIES OF 1 113	SCHEDULE	AS MEEDED

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

#### SCHEDULE T

The Instruction	1. Total pages Schedu	le T:			
FILER NAME     Lina M. Hidalgo				3. Filer ID (Ethics Com	mission Filers)
4 Name of Contributor / Corpo Serena Roosevelt	ration or Labor Orga	nization / Pledgor / Pa	ayee		
5 Contribution / Expenditure re	ported on:				
Schedule A2 Schedule B Schedule B(J) Schedule C2 Schedule D Schedule					Schedule F1
Schedule F2	Schedule F4	Schedule G	Schedule H	Schedule COH-UC	Schedule B-SS
	ne of person(s) traveli erena Roosevelt	ng			
05/15/2018 8 Dep	8 Departure city or name of departure location San Francisco, CA				
9 Destination city or name of destination location Los Angeles, CA					
10 Means of transportation COMMAIR	11 Purpose o Airfare to	f travel (including nar CA Fundraiser	ne of conference, s	eminar, or other event)	

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 pnote copy, discolored paper, etc. All blockouts, additions and changes were present at the time the instrument was filed and recorded.

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