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Official Public Records of
Harris County
Stan Stanart
County Clerk

Campaign Finance Report



Stan Stanart

COUNTY CLERK
HARRIS COUNTY, TEXAS

FileNo: 2018148
Received By Clerk: 1/16/2018
File Date: January 16, 2018
Office: County Treasurer
Candidate: Sanchez, Orlando
Treasurer: Butler, Penny
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 Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 24
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI ORLANDO SANCHEZ NICKNAME LAST SUFFIX	OFFICE USE ONLY Date Received Date Hand-delivered or Date Postmarked Receipt # Amount \$ Date Processed Date Imaged	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 130853 HOUSTON TX 77219		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (832) 521-1962		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI PENNY BUTLER NICKNAME LAST SUFFIX		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 4605 POST OAK PLACE DR. HOUSTON TX 77056		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (713) 621 7221		
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year Month Day Year 7 / 1 / 17 THROUGH 12 / 31 / 17		
11 ELECTION	ELECTION DATE ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special		
12 OFFICE	OFFICE HELD (if any) COUNTY TREASURER	13 OFFICE SOUGHT (if known)	

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME

ORLANDO SANCHEZ

15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM
POLITICAL
COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE

☐ GENERAL

☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ Additional Pages

17 CONTRIBUTION
TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ 0

2. TOTAL POLITICAL CONTRIBUTIONS
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 0

EXPENDITURE
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS,
UNLESS ITEMIZED

\$ 0

4. TOTAL POLITICAL EXPENDITURES

\$ 6420.87

CONTRIBUTION
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY
OF REPORTING PERIOD

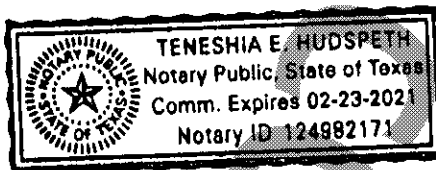
\$ 199,621.36

OUTSTANDING
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$ 200,000.00

18 AFFIDAVIT



I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 16, Election Code.

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said ORLANDO SANCHEZ, this the 16
day of JANUARY, 20 18, to certify which, witness my hand and seal of office.

Teneshia E. Hudspeth
Signature of officer administering oath

TENESHIA E. HUDSPETH
Printed name of officer administering oath

DEPUTY CLERK CCO
Title of officer administering oath

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

Accounting/Banking

Consulting Expense

Contributions/Donations Made By

Candidate/Officeholder/Political Committee

Credit Card Payment

Event Expense

Fees

Food/Beverage Expense

Gift/Awards/Memorials Expense

Legal Services

Loan Repayment/Reimbursement

Office Overhead/Rental Expense

Polling Expense

Printing Expense

Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense

Transportation Equipment & Related Expense

Travel In District

Travel Out Of District

Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 22		2 FILER NAME ORLANDO SANCHEZ		3 Filer ID (Ethics Commission Filers)	
4 Date 7.3.17		5 Payee name Harris County Heritage Society			
6 Amount (\$) 619.50		7 Payee address; City; State; Zip Code 1100 Bagby Houston TX 77002			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Non Profit Contribution		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 7.14.17		Candidate / Officeholder name City of Houston			
Amount (\$) 6.00		Payee name City of Houston			
Amount (\$) 6.00		Payee address; City; State; Zip Code PO Box 1562 Houston TX 77252			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Parking Meter		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 7.19.17		Candidate / Officeholder name U.S. Post Master			
Amount (\$) 40.		Payee name U.S. Post Master			
Amount (\$) 40.		Payee address; City; State; Zip Code 1900 W. Gray Houston TX 77019			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Postage		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Candidate / Officeholder name U.S. Post Master					
Office sought U.S. Post Master					
Office held					

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 22		2 FILER NAME ORLANDO SANCHEZ		3 Filer ID (Ethics Commission Filers)	
4 Date 7.20.17		5 Payee name DONSERAKI			
6 Amount (\$) - 20.00		7 Payee address; City; State; Zip Code 300 GULFGATE MALL HOUSTON, TX 77087			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food Beverage		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 7.20.17		Payee name U.S. POST MASTER			
Amount (\$) 40.00		Payee address; City; State; Zip Code 1900 W. GRAY HOUSTON, TX 77218			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) POSTAGE		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 7.21.17		Payee name The Parking Spot			
Amount (\$) 4.95		Payee address; City; State; Zip Code 7601 AIRPORT BLVD HOUSTON, TX 77061			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Parking		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 22		2 FILER NAME ORLANDO SANCHEZ		3 Filer ID (Ethics Commission Filers)	
4 Date 7.31.17		5 Payee name HEB			
6 Amount (\$) 56.48		7 Payee address; City; State; Zip Code 200 AVENUE F DEL RIO, TX 78840			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) BEVERAGES		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 8.1.17		Payee name HOUSTON LIVESTOCK SHOW & RODEO			
Amount (\$) 696.66		Payee address; City; State; Zip Code 3 NRG PARKWAY HOUSTON, TX 77054			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Not Profit Donation		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 8.3.17		Payee name ARMADILLO PALACE			
Amount (\$) 88.00		Payee address; City; State; Zip Code 5015 Kirby Dr HOUSTON TX 77098			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) FOOD BEVERAGE		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <u>22</u>		2 FILER NAME <u>ORLANDO SANCHEZ</u>		3 Filer ID (Ethics Commission Filers)	
4 Date <u>8.4.17</u>		5 Payee name <u>IRMA'S Southwest Gails</u>			
6 Amount (\$) <u>50.38</u>		7 Payee address; City; State; Zip Code <u>1314 TEXAS ST. #100</u> <u>HOUSTON, TX 77002</u>			
8 PURPOSE OF EXPENDITURE <u>FOOD BEVERAGE</u>		(a) Category (See Categories listed at the top of this schedule)		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date <u>8.7.15</u>		Payee name <u>CUS</u>			
Amount (\$) <u>14.64</u>		Payee address; City; State; Zip Code <u>5401 WASHINGTON AVE.</u> <u>HOUSTON, TX 77007</u>			
PURPOSE OF EXPENDITURE <u>ENVELOPES</u>		Category (See Categories listed at the top of this schedule)		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date <u>8.7.17</u>		Payee name <u>Verizon Wireless</u>			
Amount (\$) <u>114.68</u>		Payee address; City; State; Zip Code <u>P.O. Box 920041</u> <u>DALLAS, TEXAS 75392-0041</u>			
PURPOSE OF EXPENDITURE <u>WIRELESS SERVICE</u>		Category (See Categories listed at the top of this schedule)		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 22		2 FILER NAME ORLANDO SANCHEZ		3 Filer ID (Ethics Commission Filers)	
4 Date		5 Payee name CAFE PIQUET			
6 Amount (\$) 187.00		7 Payee address; City; State; Zip Code 5757 BISSONNET HOUSTON TX 77401			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) FOOD BEVERAGE		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 8.10.17		Candidate / Officeholder name HARRIS			
Amount (\$) 17.05		Payee address; City; State; Zip Code 318 TAMM ST. HOUSTON, TX 77004			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) FOOD BEVERAGE		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 8.11.17		Candidate / Officeholder name Network Solution			
Amount (\$) 195.95		Payee address; City; State; Zip Code 12808 GREENWAY PARKWAY JACKSONVILLE, FL 32258			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) WEB HOSTING SERVICE		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 22		2 FILER NAME ORLANDO SANCHEZ		3 Filer ID (Ethics Commission Filers)	
4 Date 8.11.17		5 Payee name D'Amico			
6 Amount (\$) 30.00		7 Payee address; City; State; Zip Code 5510 MORNINGSIDE DR. #140 HOUSTON, TX 77005			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) FOOD BEVERAGE		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 9.20.17		Payee name U.S. POSTAL SERVICE			
Amount (\$) 100.00		Payee address; City; State; Zip Code 1900 W. GRAY HOUSTON, TX 77019			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) POSTAGE		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 9.21.17		Payee name VERIZON WIRELESS			
Amount (\$) 44.53		Payee address; City; State; Zip Code 920041 DALLAS, TX 75392-0041			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) WIRELESS SERVICE		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 22		2 FILER NAME ORLANDO SANCHEZ		3 Filer ID (Ethics Commission Filers)	
4 Date 9.22.17		5 Payee name Network Solutions			
6 Amount (\$) 14.94		7 Payee address: City; State; Zip Code 12808 GREENBAY Parkway JACKSONVILLE, FL 32258			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) WEB Hosting		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 9.25.17		Payee name SENTRY STORAGE			
Amount (\$) 88.00		Payee address: City; State; Zip Code 8510 HUFFME LN. BOZEMAN, MT 59718			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Storage Facility		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 9.25.17		Payee name US POSTAL SERVICE			
Amount (\$) 104.00		Payee address: City; State; Zip Code 1900 W. GRAY HOUSTON, TX 77019			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) POSTAGE		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 22		2 FILER NAME ORLANDO SANCHEZ		3 Filer ID (Ethics Commission Filers)	
4 Date 9.29.17		5 Payee name COSTCO			
6 Amount (\$) 59.99		7 Payee address; City; State; Zip Code 1150 BUNKER HILL HOUSTON, TX 77055			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Snacks for Office		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10.4.17		Payee name VISTA PRINT			
Amount (\$) 19.98		Payee address; City; State; Zip Code 395 OLIVE AVE. VISTA, CA 92083			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10.6.17		Payee name Harry's			
Amount (\$) 32.00		Payee address; City; State; Zip Code 318 TULANE ST. HOUSTON, TX 77006			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food Beverage		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
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Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 22		2 FILER NAME ORLANDO SANCHEZ		3 Filer ID (Ethics Commission Filers)	
4 Date 10.10.17		5 Payee name ARC			
6 Amount (\$) 31.39		7 Payee address; City; State; Zip Code 2900 Smith Suite 100 Houston, TX 77006			
8 PURPOSE OF EXPENDITURE Printing		(a) Category (See Categories listed at the top of this schedule) Printing			
		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name FIESTA EN GUADALAJARA			
Date 10.10.17		Payee name FIESTA EN GUADALAJARA			
Amount (\$) 135.00		Payee address; City; State; Zip Code 3522 FRANKLIN HOUSTON, TX 77009			
PURPOSE OF EXPENDITURE Food & Beverage		Category (See Categories listed at the top of this schedule) Food & Beverage			
		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name METRO HOUSTON			
Date 10.10.17		Payee name METRO HOUSTON			
Amount (\$) 1.25		Payee address; City; State; Zip Code 1900 MAIN ST. HOUSTON, TX 77002			
PURPOSE OF EXPENDITURE RAIL PASS		Category (See Categories listed at the top of this schedule) RAIL PASS			
		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Office sought			
		Office held			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 22		2 FILER NAME ORLANDO SANCHEZ		3 Filer ID (Ethics Commission Filers)	
4 Date 10.10.17		5 Payee name METRO HOUSTON			
6 Amount (\$) 1.25		7 Payee address; City; State; Zip Code 1900 MAIN ST. HOUSTON, TX 77002			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) RAIL PASS		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 10.10.17		Payee name AMAZON			
Amount (\$) 125.13		Payee address; City; State; Zip Code 207 BOREN AVE N. SEATTLE WA 98109			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) TONER FOR PRINTERS		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 10.10.17		Payee name TEPATILAN			
Amount (\$) 44.00		Payee address; City; State; Zip Code 4720 NORTH MAIN HOUSTON, TX 77009			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) FOOD BEVERAGE		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 22	2 FILER NAME ORLANDO SANCHEZ	3 Filer ID (Ethics Commission Filers)
4 Date 10.11.17	5 Payee name HARRY'S	
6 Amount (\$) 17.06	7 Payee address; City; State; Zip Code 318 TIVAN ST HOUSTON, TX 77006	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) FOOD BEVERAGE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		

Date 10.12.17	Payee name HARRY'S	
Amount (\$) 35	Payee address; City; State; Zip Code 318 TIVAN ST. HOUSTON TX 77006	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) FOOD BEVERAGE	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		

Date 10.12.17	Payee name METRO	
Amount (\$) 1.25	Payee address; City; State; Zip Code 1900 MAIN ST HOUSTON, TX 77002	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) RAIL PASS	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 22		2 FILER NAME Orlando Sanchez		3 Filer ID (Ethics Commission Filers)	
4 Date 10.13.17		5 Payee name HOUSTON LIVESTOCK SHOW RODEO			
6 Amount (\$) 60.00		7 Payee address; City; State; Zip Code 3 NRG Parkway HOUSTON, TX 77054			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Non Profit Contribution		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10.19.17		Payee name RDG ANNIE			
Amount (\$) 181.06		Payee address; City; State; Zip Code 1800 POST OAK # 6170 HOUSTON, TX 77056			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) FOOD BEVERAGE		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10.23.17		Payee name PRICE LINE			
Amount (\$) 52.97		Payee address; City; State; Zip Code 800 CONNECTICUT AVE NORWALK, CONNECTICUT 06584			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Hotel Booking		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <u>22</u>		2 FILER NAME <u>ORLANDO SANCHEZ</u>		3 Filer ID (Ethics Commission Filers)	
4 Date <u>10.23.17</u>		5 Payee name <u>VERIZON</u>			
6 Amount (\$) <u>49.56</u>		7 Payee address; City; State; Zip Code <u>920041</u> <u>DALLAS, TX</u> <u>75392-0041</u>			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) <u>WIRELESS SERVICE</u>		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <u>10.24.17</u>		Payee name <u>LARRY LUDWIG</u>			
Amount (\$) <u>250</u>		Payee address; City; State; Zip Code <u>2310 NAVIGATION BLVD</u> <u>HOUSTON, TX</u> <u>77063</u>			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) <u>MUSIC TALENT</u>		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <u>10.27.17</u>		Payee name <u>AMAZON</u>			
Amount (\$) <u>5.02</u>		Payee address; City; State; Zip Code <u>207 BOREN RD. N.</u> <u>SEATTLE WA</u> <u>98109</u>			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) <u>BATTERIES</u>		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <u>22</u>		2 FILER NAME <u>ORLANDO SANCHEZ</u>		3 Filer ID (Ethics Commission Filers)	
4 Date <u>10.30.17</u>		5 Payee name <u>ALAMO TANKS</u>			
6 Amount (\$) <u>12.00</u>		7 Payee address; City; State; Zip Code <u>809 BERRY RD. HOUSTON TX 77022</u>			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) <u>Food Beverage</u>		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <u>10.30.17</u>		Payee name <u>STENTIN STORAGE</u>			
Amount (\$) <u>75.00</u>		Payee address; City; State; Zip Code <u>8510 HUFFINE LN. BOZEMAN, MT. 59718</u>			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) <u>Storage Facility</u>		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <u>10.30.17</u>		Payee name <u>AMAZON</u>			
Amount (\$) <u>3.24</u>		Payee address; City; State; Zip Code <u>207 BOREN AVE N SEATTLE WA 98109</u>			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) <u>BATTERIES</u>		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <u>22</u>		2 FILER NAME <u>ORLANDO SANCHEZ</u>		3 Filer ID (Ethics Commission Filers)	
4 Date <u>11.2.17</u>		5 Payee name <u>KROGER</u>			
6 Amount (\$) <u>79.36</u>		7 Payee address; City; State; Zip Code <u>1938 W. GRAY</u> <u>HOUSTON TX 77019</u>			
8 PURPOSE OF EXPENDITURE <u>SNACKS & DRINKS</u>		(a) Category (See Categories listed at the top of this schedule) (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Candidate / Officeholder name					
Office sought					
Office held					
Date <u>11.3.17</u>		Payee name <u>Uienq Thai</u>			
Amount (\$) <u>82.00</u>		Payee address; City; State; Zip Code <u>6929 LONGPOINT</u> <u>HOUSTON TX 77055</u>			
PURPOSE OF EXPENDITURE <u>FOOD & BEVERAGE</u>		Category (See Categories listed at the top of this schedule) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Candidate / Officeholder name					
Office sought					
Office held					
Date <u>11.15.17</u>		Payee name <u>POST MASTER</u>			
Amount (\$) <u>55.55</u>		Payee address; City; State; Zip Code <u>1900 W. GRAY</u> <u>HOUSTON TX 77019</u>			
PURPOSE OF EXPENDITURE <u>POSTAGE</u>		Category (See Categories listed at the top of this schedule) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Candidate / Officeholder name					
Office sought					
Office held					

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 22		2 FILER NAME ORLANDO SANCHEZ		3 Filer ID (Ethics Commission Filers)	
4 Date 11.15.17		5 Payee name Sangkran			
6 Amount (\$) 35		7 Payee address; City: State; Zip Code 1101-08 UPTOWN PARK BLVD HOUSTON, TX 77056			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food Beverage		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 11.16.17		Payee name Pollo Bravo			
Amount (\$) 26.00		Payee address; City: State; Zip Code 5801 MEMORIAL DR HOUSTON TX 77007			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food Beverage		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 11.24.17		Payee name Verizon Wireless			
Amount (\$) 50.35		Payee address; City: State; Zip Code PO BOX 920041 HOUSTON TX 75392-0041			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Wireless Service		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <u>2</u>		2 FILER NAME <u>Orlando Sanchez</u>		3 Filer ID (Ethics Commission Filers)	
4 Date <u>11.29.17</u>		5 Payee name <u>SENTINEL STORAGE</u>			
6 Amount (\$) <u>75.00</u>		7 Payee address; City; State; Zip Code <u>8510 HUFFINE LN</u> <u>BOZEMAN, MT 59718</u>			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) <u>Storage Facility</u>		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <u>11.29.17</u>		Payee name <u>U.S. POSTMASTER</u>			
Amount (\$) <u>1.19</u>		Payee address; City; State; Zip Code <u>1900 W. GRAY</u> <u>HOUSTON, TX 77019</u>			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) <u>POSTAGE</u>		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <u>11.30.17</u>		Payee name <u>METRO</u>			
Amount (\$) <u>1.25</u>		Payee address; City; State; Zip Code <u>1900 MAIN ST.</u> <u>HOUSTON, TX 77002</u>			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) <u>RAIL PASS</u>		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <u>28</u>		2 FILER NAME: <u>ORLANDO SANCHEZ</u>		3 Filer ID (Ethics Commission Filers)	
4 Date: <u>11.30.17</u>		5 Payee name: <u>ALADDIN</u>			
6 Amount (\$): <u>24.87</u>		7 Payee address; City: State: Zip Code <u>912 WESTHEIMER</u> <u>HOUSTON, TX 77006</u>			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) <u>FOOD BEVERAGE</u>		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date: <u>12.1.17</u>		Payee name: <u>HOUSTON, LIVESTOCK SHOW; ROGER</u>			
Amount (\$): <u>350.00</u>		Payee address; City: State: Zip Code <u>3 NRB Parkway</u> <u>HOUSTON, TX 77054</u>			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) <u>Non Profit Donation</u>		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date: <u>12.4.17</u>		Payee name: <u>Asalon Diner</u>			
Amount (\$): <u>56.00</u>		Payee address; City: State: Zip Code <u>2417 WESTHEIMER</u> <u>HOUSTON, TX 77099</u>			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) <u>FOOD BEVERAGE</u>		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <u>22</u>		2 FILER NAME <u>ORLANDO SANCHEZ</u>		3 Filer ID (Ethics Commission Filers)	
4 Date <u>12.4.17</u>		5 Payee name <u>CARLOS CALBILLO</u>			
6 Amount (\$) <u>30.00</u>		7 Payee address; City: State; Zip Code <u>8000 Kimble #135</u> <u>HOUSTON, TX 77017</u>			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) <u>Consulting FEE</u>		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date <u>12.11.17</u>		Payee name <u>Harris County Republican Party</u>			
Amount (\$) <u>1300.00</u>		Payee address; City: State; Zip Code <u>7232 WYNWOOD</u> <u>HOUSTON, TX 77008</u>			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) <u>Filing FEE</u>		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date <u>12.12.17</u>		Payee name <u>OFFICE DEPOT</u>			
Amount (\$) <u>68.18</u>		Payee address; City: State; Zip Code <u>3443 Kirby</u> <u>HOUSTON, TX 77098</u>			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) <u>Office Supplier</u>		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 22		2 FILER NAME ORLANDO SANCHEZ		3 Filer ID (Ethics Commission Filers)	
4 Date 12.13.17		5 Payee name CITY OF HOUSTON			
6 Amount (\$) 2.95		7 Payee address; City; State; Zip Code PO BOX 1562 HOUSTON, TX 77252			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Parking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 12.15.17		Payee name LAREDO TAQUERIA			
Amount (\$) 45.50		Payee address; City; State; Zip Code WASHINGTON AVE. 915 SNOVEL HOUSTON, TX 77007			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food & Beverage		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 12.18.17		Payee name METRO			
Amount (\$) 3.95		Payee address; City; State; Zip Code 1900 MAIN ST HOUSTON, TX 77002			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) METRO RAIL PASS		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 22		2 FILER NAME ORLANDO. SANCHEZ		3 Filer ID (Ethics Commission Filers)	
4 Date 12.18.17		5 Payee name TRIBE BRANDS			
6 Amount (\$) 310.00		7 Payee address; City; State; Zip Code 315 TRAVIS ST. HOUSTON, TX 77002			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) FOOD BEVERAGE OFFICE Holiday Party		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 12.18.17		Payee name KROGER			
Amount (\$) 22.98		Payee address; City; State; Zip Code 1938 W. GRAY HOUSTON TX 77019			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) BEVERAGES for OFFICE		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 12.20.17		Payee name WORLD AFFAIRS Council			
Amount (\$) 25.00		Payee address; City; State; Zip Code 2500 E. T.C. JESTER #350 HOUSTON, TX 77008			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Non Profit EVENT COST		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <u>22</u>		2 FILER NAME <u>ORLANDO SANCHEZ</u>		3 Filer ID (Ethics Commission Filers)	
4 Date <u>12.21.17</u>		5 Payee name <u>VERIZON WIRELESS</u>			
6 Amount (\$) <u>49.64</u>		7 Payee address; City; State; Zip Code <u>PO BOX 920041</u> <u>DALLAS TEXAS 75392-0041</u>			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) <u>WIRELESS SERVICE</u>		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <u>12.22.17</u>		Payee name <u>METRO</u>			
Amount (\$) <u>1.25</u>		Payee address; City; State; Zip Code <u>1900 WIRTH</u> <u>HOUSTON, TX 77062</u>			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) <u>RAIL PASS</u>		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <u>1</u>		Payee name			
Amount (\$)		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule)		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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Sanchez, Orlando (County Treasurer)

From: Meadows, John (CTS)
Sent: Thursday, December 21, 2017 9:03 AM
To: Sanchez, Orlando (County Treasurer)
Cc: Heather Little; Rubie Alvarez
Subject: Quote SR38219
Attachments: SR438219 Treasurer.doc

The attached quote is to add one network connection. Please copy all on the P.O.

Thank you,
john



John Meadows
Communications Field Services
Harris County Central Technology Services
Direct (713) 274-7906

The 24 hour helpdesk number is (713) 274-4444 or email: itchelpdesk@hctx.net.

UNOFFICIAL COPY

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