FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00066188 13 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Ursula A. NAME Date Received **ELECTRONICALLY FILED** 01/15/2021 NICKNAME LAST **SUFFIX** Hall CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** P.O. Box 2103 MAILING Receipt # Amount **ADDRESS** Change of Address Houston, TX 77252 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Anthony W. NAME NICKNAME LAST **SUFFIX** Hall Ш **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE; **TREASURER** 2450 Louisiana, Suite 400-230 **ADDRESS** (Residence or Business) Houston, TX 77006 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (713) 503-8070 **PHONE** REPORT TYPE 30th day before election 15th day after campaign treasurer January 15 Runoff lx l appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) reporting limit PERIOD Month Month Day Year Day Year **COVERED THROUGH** 10/25/2020 12/31/2020 10 ELECTION **ELECTION DATE ELECTION TYPE** Day Month Year Primary Runoff Other 11/04/2020 χ General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE District Judge District 165 Harris District Judge District 165

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 13

This box is for notice of political contributions accepted or political expenditures made by political cortant candidate / officeholder. These expenditures may have been made without the candidate's or officeholders. Communication only if they receive notion of the consent. Candidates and officeholders are required to report this information only if they receive notion of the consent.												
COMMITTEE TYPE COMMITTEE NAME COMMITTEE NAME COMMITTEE ADDRESS SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER NAME												
										COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
												\$ 0.00
											5)	\$ 5,300.00
ENDITURE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES												
4. TOTAL POLIT	CAL EXPENDITURES		\$ 9,436.79									
		AST DAY OF THE	\$ 29,408.49									
		OF THE LAST DAY	\$ 7,192.16									
	The Hon	orable Ursula A. Hall										
	Signature of	Candidate or Officehold	ler									
ARY STAMP / SEAL ABO	DVE											
		, this the	day									
, 20, to ce	rtify which, witness my hand and seal of office.											
er administering oath	Printed name of officer administering oath	Title of officer a	administering oath									
	COMMITTEE TYPE GENERAL SPECIFIC SPECIFIC 1. TOTAL UNITEMI OR GUARANTEE COMMITTEE TYPE GENERAL SPECIFIC 1. TOTAL UNITEMI OR GUARANTEE COMMITTEE TYPE COMMITTEE COMMITTEE TYPE COMMITTEE TYPE COMMITTEE	COMMITTEE TYPE GENERAL GENERAL COMMITTEE NAME COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS COMMITTEE CAMPAIGN TREASURER ADDRESS COMMITTEE CAMPAIGN TREASURER ADDRESS COMMITTEE CAMPAIGN TREASURER ADDRESS COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTORY (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) TOTAL POLITICAL EXPENDITURES TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LARPORTING PERIOD TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE REPORTING PERIOD I SWEAR, OR Affirm, under penalty true and correct and includes all under Title 15, Election Code. The Hon Signature of ARY STAMP / SEAL ABOVE ribed before me, by the said , 20, to certify which, witness my hand and seal of office.	COMMITTEE TYPE GENERAL GENERAL COMMITTEE ADDRESS COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES 4. TOTAL POLITICAL EXPENDITURES 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD I swear, or affirm, under penalty of perjury, that the accurate and includes all information required to under Title 15, Election Code. The Honorable Ursula A. Hall Signature of Candidate or Officehold ARY STAMP / SEAL ABOVE ribed before me, by the said, to certify which, witness my hand and seal of office.									

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

			C	OVER S	3 of 13
	ER NAN	(Ethics Cor	mmission Filers)		
I		E SUBTOTALS SCHEDULE		SUBT	OTAL AMOUNT
1.	Х	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	5,300.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	
4.		SCHEDULE E(J): LOANS (JUDICIAL)		\$	
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$	9,436.79
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10	. 🔲	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11	. 🗆	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
12	. 🔲	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS FOR TO FILER	RETURNED	\$	

	MONET	TARY POLITICAL	CONTRIBUTIO	ONS			SCHEDULE	A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1		ages Schedule A(J /3 Rpt: 4/13)1:
	FILER NAME Hall, Ursula	A. (The Honorable)			3	Filer ID	(Ethics Commis	sion Filers)
4	Date 11/08/2020					Amount	of Contribution (\$	\$2,500.00
•	Contributorlo	Houston, TX 77002		9 Contributor's Job Title				
0	Continuators	Principal Occupation		9 Continuator S Job Title				
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oous	se (if any))	
12	If contributor i	is a child, law firm of parent(s) (i	f any)	1				
	Date Full name of contributor out-of-state PAC (ID#: 11/04/2020 Hebron, Duni Contributor address; City; State; Zip Code					Amount	of Contribution (\$	\$1,000.00
	Contributor's I	Pearland, TX 77584 Principal Occupation		Contributor's Job Title				
		employer/law firm		Law firm of contributor's sp	oous	e (if any))	
	The Emeralo	d Group is a child, law firm of parent(s) (i	if any)					
	Date 10/31/2020	Full name of contributor Jordan, Willie Contributor address; City; Houston, TX 77021	out-of-state PAC (ID#:_			Amount	of Contribution (\$	\$100.00
	Contributor's Retired	Principal Occupation		Contributor's Job Title				
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any))	
	If contributor i	is a child, law firm of parent(s) (i	f any)					

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)	1
	The Instru	ction Guide explains ho		ges Schedule A(J)1: 3 Rpt: 5/13			
2	FILER NAME					(Ethics Commission Filer	s)
	Hall, Ursula	A. (The Honorable)			000661	88	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:		7 Amount	of Contribution (\$)	
	12/18/2020	Kim, John]	\$1,00	00.00
		6 Contributor address; City;	State; Zip Code				
Ļ		Houston, TX 77024		Ta a			
8		Principal Occupation		9 Contributor's Job Title			
	Attorney						
10		employer/law firm		11 Law firm of contributor's s	pouse (if any)		
	The Kim Lav						
12	! If contributor i	s a child, law firm of parent(s) (i	if any)				
	Date	Full name of contributor	out-of-state PAC (ID#:	1	Amount	of Contribution (\$)	
	11/03/2020	Tribble, Wesson	out or state 1710 (IBII.		7		0.00
		Contributor address; City;	State: 7in Code			,	
		Contributor address, City,	State, Zip Code				
		Houston, TX 77057					
	Contributor's	1		Contributor's Job Title			
	Attorney	Principal Occupation		Continuator's Job Title			
		omployor/low firm		Law firm of contributor's s	nouse (if only)		
	Tribble Ross	employer/law firm		Law IIIII of Contributor's s	pouse (ii ariy)		
_			:				
	ii contributor	s a child, law firm of parent(s) (i	ii any)				
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount	of Contribution (\$)	
	11/11/2020	Washington, Evelyn				\$20	00.00
		Contributor address; City;	State; Zip Code		··		
		Houston, TX 77088					
	Contributor's	Principal Occupation		Contributor's Job Title	1		
	Retired						
	Contributor's	employer/law firm		Law firm of contributor's s	pouse (if any)		
	If contributor i	s a child, law firm of parent(s) (i	if any)				

	MONETARY POLITICAL CONTRIB	SCHEDULE A(J)1	
	The Instruction Guide explains how to complete	1 Total pages Schedule A(J)1: Sch: 3/3 Rpt: 6/13	
2	FILER NAME	3 Filer ID (Ethics Commission Filers)	
	Hall, Ursula A. (The Honorable)	00066188	
4	Date 5 Full name of contributor out-of-state PAC (ID#:)		7 Amount of Contribution (\$)
	11/03/2020 Womack, Gerald		\$250.00
	6 Contributor address; City; State; Zip Code Houston, TX 77004		
8	Contributor's Principal Occupation	9 Contributor's Job Title	<u> </u>
	Real Estate		
10	O Contributor's employer/law firm	11 Law firm of contributor's sp	oouse (if any)
	Womack Development		

SCHEDULE F1

EXPENDITURE 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 Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 1/7 Rpt: 7/13	Hall, Ursula A. (The Honorable) 00066188
4	Date	5 Payee name
	11/05/2020	Constant Contact Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$489.36	1601 Trapelo Road, 3rd Floor
		Waltham, MA 02451
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Email campaign marketing
		Email campaign marketing
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
•	expenditure to benefit C/O	
	Date	Payee name
	11/10/2020	Elegantthemes.com
	Amount (\$)	Payee address; City; State; Zip Code
	\$89.00	584 Castro Street #123
		San Francisco, CA 94114
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign advertising
		Campaign devertising
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
	Date	Payee name
	11/02/2020	Facebook
	Amount (\$)	Payee address; City; State; Zip Code
	\$47.07	1601 S. California Avenue
	• •	
		Palo Alto, CA 94304
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign advertising
	Commission ONE V. C. P.	Condidate/Officeholder name
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense
Printing Expense

Candidate/Officeholder/Political Committee Credit Card Payment			Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.					OTHER (enter a	category not listed at	oove)
1	Total pages Schedule F1:	2 FILER NAM	E				3	Filer ID	(Ethics Commiss	ion Filers)
	Sch: 2/7 Rpt: 8/13	Hall, Ursula	a A. (The Honorable)					00066188		
4	Date	5 Payee name)							
	11/30/2020	Facebook								
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip Co	ode					
	\$13.67	1601 S. Ca	ılifornia Avenue							
		Palo Alto, (CA 94304							
8	PURPOSE OF		See Categories listed at the top of	this schedule)	(b)	Description				
	EXPENDITURE	Advertising	Expense					ide of Texas. Com , officeholder living		
						Campaign ad			у ехрепас	
							au versessing			
9	Complete ONLY if direct expenditure to benefit C/OI		ficeholder name	Office sou	<u>l</u> ught			Office he	eld	
H	Date	Payee name	<u> </u>							
	10/27/2020	Go Daddy	•							
H	Amount (\$)	Payee addre	ess; City;	State; Zip Co	odo					
	\$21.31	1		State, Zip Ct	bue					
	ΦΖ1.31	14455 N H	ayuen							
		Scottsdale,	AZ 85260							
	PURPOSE	(a) Category (s	See Categories listed at the top of	this schedule)	(b)	Description				
	OF EXPENDITURE	Fees				=		ide of Texas. Com		
						Webhosting s		, officeholder living		
						vvebilosting s	Sub	iscription lee	•	
	Complete ONLY if direct expenditure to benefit C/OI		ficeholder name	Office sou	<u>l</u> ught			Office he	eld	
F	Date	Payee name	<u> </u>							
	10/28/2020	Go Daddy								
H	Amount (\$)	Payee addre	ess; City;	State; Zip Co	ode					
	\$153.38	14455 N H		, — ₋						
	,		,							
		Scottsdale,	AZ 85260							
	PURPOSE OF	(a) Category (S	See Categories listed at the top of	this schedule)	(b)	Description				
	EXPENDITURE	Fees						ide of Texas. Com		
						Webhosting s		, officeholder living		
						vvcbilosting s	Jub	Scription lec	,3	
\vdash	Complete ONLY if direct	Candidate/Off	ficeholder name	Office sou	ıaht			Office he	ald.	
	expenditure to benefit C/OI		nocholaci Haitie	OHICE SUL	agrit			Onice III	Jiu .	
\vdash										
1										

SCHEDULE F1

EXPENDITURE 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 Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (onter a category not listed above)

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
	Sch: 3/7 Rpt: 9/13	Hall, Ursula A. (The Honorable) 00066188	
4	Date	5 Payee name	
	11/02/2020	Go Daddy	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$10.65	14455 N Hayden	
		Scottsdale, AZ 85260	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Webhosting subscription fee	
		Webliosting subscription lee	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
ľ	expenditure to benefit C/OI		
H	Date	Payee name	=
	11/27/2020	Go Daddy	
H	Amount (\$)	Payee address; City; State; Zip Code	_
	\$21.31	14455 N Hayden	
	ΨΖ1.31	14455 W Haydell	
		Scottsdale, AZ 85260	
┢	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	-
	OF	Fees Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Webhosting subscription fee	
L			_
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
L			_
	Date	Payee name	
	12/02/2020	Go Daddy	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$10.65	14455 N Hayden	
		Scottsdale, AZ 85260	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense	
		Webhosting subscription fee	
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI	o	
\vdash			_

SCHEDULE F1

EXPENDITURE 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 Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Credit Card Payment	The Instruction Guide explains how to con	-	ete this form.				
1	Total pages Schedule F1:	·	_	3 Filer ID (Ethics Commission Filers)				
	Sch: 4/7 Rpt: 10/13	Hall, Ursula A. (The Honorable)		00066188				
4	Date	Payee name						
	12/04/2020	Go Daddy						
6	Amount (\$)	7 Payee address; City; State; Zip Coo	de					
	\$170.31	14455 N Hayden						
		Scottsdale, AZ 85260						
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description				
	OF EXPENDITURE	Fees		Check if travel outside of Texas. Complete Schedule T.				
	LAFENDITORE			Check if Austin, TX, officeholder living expense				
				Webhosting subscription fees				
_	0 1 0 0 1 1 1 1			0.00				
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	ght	Office held				
	Date	Payee name						
	12/28/2020	Go Daddy						
	Amount (\$)	Payee address; City; State; Zip Coo	de					
	\$21.31	14455 N Hayden						
		Scottsdale, AZ 85260						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description				
	OF EXPENDITURE	Fees		Check if travel outside of Texas. Complete Schedule T.				
				Check if Austin, TX, officeholder living expense Webhosting subscription fees				
				Weblieding Subscription ices				
	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht	Office held				
	expenditure to benefit C/OI		,	Since hold				
	Date	Davis name						
	10/30/2020	Payee name Google Pay Store						
	Amount (\$)	Payee address; City; State; Zip Coo	40					
	\$15.14	601 N. 34th Street	Je					
	Ψ13.14	001 N. 34th Sticet						
		South MA 00102						
		Seattle, WA 98103						
	PURPOSE OF	2 ((b)	Description Check if travel outside of Texas. Complete Schedule T.				
	EXPENDITURE	Fees		Check if Austin, TX, officeholder living expense				
				Poll finder app subscription fee				
	Complete ONLY if direct	Candidate/Officeholder name Office soug	ght	Office held				
	expenditure to benefit C/OI	1						

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarice Magnet/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (onter a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 5/7 Rpt: 11/13	Hall, Ursula A. (The Honorable) 00066188
4	Date	5 Payee name
	10/28/2020	Jewish Hearld Voice Newspaper
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$265.00	3403 Audley
		Houston, TX 77098
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign advertising
		Campaign autoriumg
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Date	Payee name
	11/27/2020	Jewish Hearld Voice Newspaper
	Amount (\$)	Payee address; City; State; Zip Code
	\$265.00	3403 Audley
	Ψ203.00	3403 Addiey
		Houston, TX 77098
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign advertising
		Campaign autoriumg
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· ·
	Date	Payee name
	12/03/2020	Kingwood Area Democrats
	Amount (\$)	Payee address; City; State; Zip Code
	\$120.00	P.O. Box 6177
	7=20.00	
		Kingwood, TX 77325
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Contribution
		Contribution
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	o

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comm

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 6/7 Rpt: 12/13	Hall, Ursula A. (The Honorable) 00066188
4	Date	5 Payee name
	12/18/2020	Piryx Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$71.88	144 2nd St. 1st Floor
		San Francisco, CA 94105
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	!	Online donation software/ service fee
	!	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	н
	Date	Payee name
	11/03/2020	See You At The Polls Texas
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	3311 Raleigh Row
	!	
		Missouri City, TX 77459
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	!	GOTV expenditure
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	S
H	Date	Payee name
	10/27/2020	Urban One
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,005.00	1010 Wayne Avenue
	Ψ2,000.00	1010 Wayne / Wende
		Silver Spring, MD 20910
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	EXPLINDITORL	Check if Austin, TX, officeholder living expense
	!	Campaign advertising
	Camplete ONLY if direct	Office cought Office helder regree Office cought
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held H

SCHEDULE F1

EXPENDITURE 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 Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Consuling Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	ı - I Comi	Gift/Av mittee Legal	wards/Memorials Expe Services Instruction Guide	ense		ense ges/Contract Labor		Travel Out of Dis OTHER (enter a	trict category not listed above)	
1	Total pages Schedule F1:	2	ILER NAME					3	Filer ID	(Ethics Commission Filers)
L	Sch: 7/7 Rpt: 13/13		Hall, Ursula A. (The Honorable)				00066188		
4	Date	5 F	Payee name								
	10/29/2020	i	HeartMedia, Inc								
6	Amount (\$)	7 F	Payee address;	City;	State;	Zip Cod	е				
	\$5,146.75	2	200 East Basse	Road							
		٠,	San Antonio, TX	78209-8328							
8	PURPOSE	(a) (Category (See Cate	egories listed at the top	o of this sched	dule) (b) Description				
	OF EXPENDITURE	/	Advertising Expe	ense					de of Texas. Com		
							Campaign a		officeholder living	expense	
							Campaign	uve	lusing		
Ļ	0 1: 0 1 1 1 1 1								0.00		
9	Complete ONLY if direct expenditure to benefit C/OI	- Са Н	andidate/Officeho	der name	Of	ffice soug	nt		Office he	210	