#### 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) 00081836 37 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Gloria NAME Date Received **ELECTRONICALLY FILED** 01/16/2022 NICKNAME LAST **SUFFIX** Lopez CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** 2121 Sage Rd., Ste. 110 MAILING Receipt # Amount **ADDRESS** Change of Address Houston, TX 77056 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Ms. Heidy NAME NICKNAME LAST **SUFFIX** Orellana **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE: **TREASURER** 2121 Sage Rd., Ste. 110 **ADDRESS** (Residence or Business) Houston, TX 77056 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (832) 821-5295 **PHONE** REPORT TYPE 30th day before election Runoff 15th day after campaign treasurer January 15 lx| appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) reporting limit

Month

Month

Day

Day

03/01/2022

OFFICE HELD (if any)

**ELECTION DATE** 

07/01/2021

Year

Year

Family District Court Judge District 308th Harris

PERIOD

10 ELECTION

11 OFFICE

**COVERED** 

**THROUGH** 

χ Primary

General

Month

**ELECTION TYPE** 

Runoff

Special

Day

12/31/2021

12 OFFICE SOUGHT (if known)

District Judge District 308th

Year

Other

## JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM JC/OH COVER SHEET PG 2

2 of 37

13 C / OH NAME	Lopez, Gloria (The H	onorable)	14 Filer ID 00081836	(Ethics Commission Filers)			
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures.						
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME					
	GENERAL						
		COMMITTEE ADDRESS					
	SPECIFIC						
		COMMITTEE CAMPAIGN TREASURER NAME					
		COMMITTEE CAMPAIGN TREASURER ADDRES	\$S				
16 CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS(OTHER THAN ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		\$ 0.00			
	2. TOTAL POLIT	ICAL CONTRIBUTIONS		\$ 63,636.00			
EXPENDITURE	<del>                                       </del>	PLEDGES, LOANS, OR GUARANTEES OF LOANS IZED POLITICAL EXPENDITURES	S)				
TOTALS	3. TOTAL ONTIEN	IZED POLITICAL EXPENDITORES		\$ 0.00			
	4. TOTAL POLIT	ICAL EXPENDITURES		\$ 28,527.62			
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LA RIOD	AST DAY OF THE	<b>\$</b> 111,822.30			
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOANS AS ITING PERIOD	OF THE LAST DAY	<b>\$</b> 7,735.00			
<b>17</b> AFFIDAVIT		I swear, or affirm, under penalty true and correct and includes al under Title 15, Election Code.					
		The Hon	norable Gloria Lopez	•			
			Candidate or Officeho				
AFFIX NO	TARY STAMP / SEAL AB	OVE					
Sworn to and subs	cribed before me, by the s	aid	, this the	day			
		ertify which, witness my hand and seal of office.					
Signature of office	cer administering oath	Printed name of officer administering oath	Title of office	r administering oath			

## **SUBTOTALS - JC/OH**

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

					3 of 37
	ER NAM	ne oria (The Honorable)	19 Filer ID 00081836	(Ethi	cs Commission Filers)
		E SUBTOTALS SCHEDULE			SUBTOTAL AMOUNT
1.	Х	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	59,966.52
2.	Х	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	3,669.48
3.		SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	
4.		SCHEDULE E(J): LOANS (JUDICIAL)		\$	
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	3	\$	27,853.62
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.	Х	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	674.00
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF	OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
12.	Х	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	1,948.50

	MONET	ARY POLITICAL CONTRIBUTION	DNS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete this 1	orm.	1 Total pages Schedule A(J)1: Sch: 1/16 Rpt: 4/37
2	FILER NAME Lopez, Glori	a (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081836
4	Date 10/29/2021	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_Billings, Patricia (Mrs.)</li> <li>Contributor address; City; State; Zip Code</li> <li>Kingwood, TX 77345</li> </ul>		7 Amount of Contribution (\$) \$1,000.00
8	Contributor's F	I	9 Contributor's Job Title	<u> </u>
	Attorney	· ·	Owner of Law Firm	
10		employer/law firm	11 Law firm of contributor's sp	ouse (if anv)
		of Patricia Garcia Billings	N/A	
12		s a child, law firm of parent(s) (if any)		
	N/A		N/A	
=	Date	Full name of contributor  ut-of-state PAC (ID#:	)	Amount of Contribution (\$)
	09/09/2021	Bobby K. Newman, P.C.  Contributor address; City; State; Zip Code  Houston, TX 77098		\$5,000.00
	Contributor's F	Principal Occupation	Contributor's Job Title	
		· · · · · · · · · · · · · · · · · · ·		
	Contributor's	employer/law firm	Law firm of contributor's sp	ouse (if any)
	If contributor is	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
	12/22/2021	Brantley, Brittany (Ms.)  Contributor address; City; State; Zip Code  Fort Worth, TX 76131		\$25.00
	Contributor's F	Principal Occupation	Contributor's Job Title	
	Attorney		Associate Attorney	
	Contributor's	employer/law firm	Law firm of contributor's sp	ouse (if any)
	Leach Fox L	aw	N/A	
If contributor is a child, law firm of parent(s) (if any)				
	N/A		N/A	

	MONET	ARY POLITICAL CONTRIBUTION	DNS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 2/16 Rpt: 5/37
2	FILER NAME Lopez, Glori	a (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081836
4	Date 10/25/2021	<ul> <li>5 Full name of contributor  out-of-state PAC (ID#:_Bregman, Erica (Mrs.)</li> <li>6 Contributor address; City; State; Zip Code</li> <li>Austin, TX 78748</li> </ul>		7 Amount of Contribution (\$) \$25.00
8	Contributor's I	Principal Occupation	9 Contributor's Job Title	
	HR Manage	r	HR Manager	
10	Contributor's	employer/law firm	11 Law firm of contributor's sp	ouse (if any)
	N/A		Texas Medical Board	
12	! If contributor i	s a child, law firm of parent(s) (if any)		
	N/A		N/A	
	Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
	09/07/2021	Burgower, Wendy (Miss)  Contributor address; City; State; Zip Code  Houston, TX 77007		\$1,500.00
	Contributor's I	Principal Occupation	Contributor's Job Title	
	Attorney	· · · · · · · · · · · · · · · · · · ·	Partner	
		employer/law firm	Law firm of contributor's sp	ouse (if any)
		R SILVER LLP	N/A	, ,,
	If contributor i	s a child, law firm of parent(s) (if any)		
	N/A		N/A	
	Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
	10/23/2021	Canales, Claudia (Mrs.)  Contributor address; City; State; Zip Code  Pearland, TX 77581		\$500.00
	Contributor's I	Principal Occupation	Contributor's Job Title	
	Attorney		Partner	
	Contributor's	employer/law firm	Law firm of contributor's sp	ouse (if any)
	Law Office of	of Claudia Canales P.C.	N/A	
If contributor is a child, law firm of parent(s) (if any)				
	N/A		N/A	

	MONET	ARY POLITICAL CONTRIBUTION	DNS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 3/16 Rpt: 6/37
2	FILER NAME Lopez, Glori	a (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081836
4	Date 11/03/2021	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_ Carlin, Amy (Mrs.)</li> <li>Contributor address; City; State; Zip Code</li> <li>Houston, TX 77002</li> </ul>	)	7 Amount of Contribution (\$) \$1,000.00
8	Contributor's I	Principal Occupation	9 Contributor's Job Title	L
	Attorney		Solo Practioner	
10	Contributor's	employer/law firm	11 Law firm of contributor's sp	ouse (if any)
	The Carlin L	aw Firm	N/A	
12	If contributor is	s a child, law firm of parent(s) (if any)		
	N/A		N/A	
	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
	12/02/2021	Clay, Michael (Mr.)  Contributor address; City; State; Zip Code  Houston, TX 77254		\$300.00
	Contributor's I	I Principal Occupation	Contributor's Job Title	
	Attorney		Solo Practioner	
		employer/law firm	Law firm of contributor's sp	ouse (if any)
		ice of J. Michael Clay	N/A	, ,
	If contributor is	s a child, law firm of parent(s) (if any)		
	N/A		N/A	
	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
	12/15/2021	Enos, Gregory (Mr.)  Contributor address; City; State; Zip Code  League City, TX 77573		\$1,001.00
	Contributor's F	Principal Occupation	Contributor's Job Title	
	Attorney		Owner of Law Firm	
	Contributor's	employer/law firm	Law firm of contributor's sp	ouse (if any)
	The Enos La	aw Firm, P.C.	N/A	
If contributor is a child, law firm of parent(s) (if any)				
	N/A		N/A	

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A(J)1: Sch: 4/16 Rpt: 7/37
2	FILER NAME Lopez, Glori	a (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081836
4	Date 10/28/2021	<ul> <li>Full name of contributor  out-of-state PAC (ID#: Gray, Daniel (Mr.)</li> <li>Contributor address; City; State; Zip Code</li> <li>Pearland, TX 77584</li> </ul>		7 Amount of Contribution (\$) \$1,500.00
8	Contributor's I	I Principal Occupation	9 Contributor's Job Title	l
	Attorney		Solo Practioner	
10	Contributor's	employer/law firm	11 Law firm of contributor's sp	Douse (if any)
	Solo Practio	ner	N/A	
12	If contributor is	s a child, law firm of parent(s) (if any)	1	
	N/A		N/A	
	Date	Full name of contributor  ut-of-state PAC (ID#:	)	Amount of Contribution (\$)
	10/13/2021	Gregory Law PLLC  Contributor address; City; State; Zip Code  Houston, TX 77008		\$3,000.00
	Contributor's F	Principal Occupation	Contributor's Job Title	
		opa. Cocapation		
	Contributor's	employer/law firm	Law firm of contributor's sp	ouse (if any)
	If contributor is	s a child, law firm of parent(s) (if any)	L	
	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
	10/13/2021	Gregory, Myrna (Miss)  Contributor address; City; State; Zip Code  Houston, TX 77041		\$900.00
	Contributor's I	Principal Occupation	Contributor's Job Title	
	Attorney		Owner of Law Frim	
	Contributor's	employer/law firm	Law firm of contributor's sp	oouse (if any)
	Gregory Lav	v PLLC	N/A	
If contributor is a child, law firm of parent(s) (if any)				
	N/A		N/A	

	MONET	ARY POLITICAL C	ONTRIBUTIO	ONS	SCHEDULE A	(J)1
	The Instru	ction Guide explains how	to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 5/16 Rpt: 8/37	
2	FILER NAME Lopez, Glori	a (The Honorable)			3 Filer ID (Ethics Commission 00081836	Filers)
4	Date 09/09/2021	Full name of contributor     Gutheinz Law Firm     Contributor address; City; Sta	out-of-state PAC (ID#:_ te; Zip Code	)	7 Amount of Contribution (\$)	2,000.00
8	Contributor's F	Principal Occupation		9 Contributor's Job Title		
10	Contributor's 6	employer/law firm		11 Law firm of contributor's sp	spouse (if any)	
12	If contributor is	s a child, law firm of parent(s) (if ar	y)			
	Date O9/09/2021 Full name of contributor out-of-state PAC (ID#:) Hal D. Hate & Associates  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	1,500.00	
	Contributor's F	Houston, TX 77056 Principal Occupation		Contributor's Job Title		
				Solo Practicioner		
	Contributor's 6	employer/law firm		Law firm of contributor's sp	spouse (if any)	
	If contributor is	s a child, law firm of parent(s) (if ar	ıy)			
	Date 09/21/2021	Full name of contributor Holmes Diggs Eames & Sa Contributor address; City; Sta Houston, TX 77007			Amount of Contribution (\$)	2,500.00
	Contributor's I	I Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	spouse (if any)	
	If contributor is a child, law firm of parent(s) (if any)					

	MONET	ARY POLITICAL (	CONTRIBUTIO	DNS		SCHEDULE A	A(J)1
	The Instruction Guide explains how to complete this form.					Total pages Schedule A(J)1 Sch: 6/16 Rpt: 9/37	:
2	FILER NAME	o /The Henerable)			3	Filer ID (Ethics Commission	on Filers)
Ļ	-	a (The Honorable)			Ļ	00081836	
4	Date 10/29/2021	<ul><li>5 Full name of contributor Holmes, Maria (Ms.)</li><li>6 Contributor address; City; S</li></ul>	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$500.00
		Houston, TX 77023					
8	Contributor's I	Principal Occupation		9 Contributor's Job Title			
	Attorney			Associate Attorney			
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	ous	se (if any)	
	The Buzbee	Law Firm		N/A			
12	If contributor is	s a child, law firm of parent(s) (if a	any)	•			
	N/A			N/A			
	Date	Full name of contributor	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	09/09/2021	John E. Van Ness, P.C.  Contributor address; City; S					\$3,000.00
	Contributor's F	Houston, TX 77098 Principal Occupation		Contributor's Job Title Owner of Law Firm			
	Contributor's	employer/law firm		Law firm of contributor's sp	ous	se (if any)	
	If contributor is	s a child, law firm of parent(s) (if a	any)	l			
	Date	Full name of contributor	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	09/10/2021	Kuehm, Robert (Mr.)	_				\$2,500.00
		Contributor address; City; S  Pearland, TX 77584	tate; Zip Code		•		
	Contributor's F	Principal Occupation		Contributor's Job Title	-		
	Attorney			Associate Attorney			
	Contributor's	employer/law firm		Law firm of contributor's sp	ous	se (if any)	
	Slate & Asso	ociates Attorneys at Law		N/A			
	If contributor is	s a child, law firm of parent(s) (if a	any)				
	N/A			N/A			

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instruction Guide explains how to complete this form.				Total pages Schedule A(J)1: Sch: 7/16 Rpt: 10/37
2	FILER NAME			3	Filer ID (Ethics Commission Filers)
	Lopez, Glori	a (The Honorable)			00081836
4	Date   5 Full name of contributor		7	Amount of Contribution (\$) \$1,000.00	
		Houston, TX 77056			
8	Contributor's I	Principal Occupation	9 Contributor's Job Title	_	
			Owner of Law Firm.		
10	Contributor's	employer/law firm	11 Law firm of contributor's sp	oous	se (if any)
12	! If contributor is	s a child, law firm of parent(s) (if any)			
	Date	Full name of contributor  out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	09/09/2021	Law Office of Joel A. Nass  Contributor address; City; State; Zip Code		•	\$1,500.00
		Houston, TX 77057			
	Contributor's I	Principal Occupation	Contributor's Job Title		
			Owner of Law Firm		
	Contributor's	employer/law firm	Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if any)	l		
	Date	Full name of contributor	)		Amount of Contribution (\$)
	09/07/2021	Law Office of Robert S. Hoffman, P.L.L.C.			\$1,500.00
		Contributor address; City; State; Zip Code  Houston, TX 77019		•	
-	Contributor's I	Principal Occupation	Contributor's Job Title	_	
	Continuator 5 i	Thisipal Occupation	Owner of Law Firm		
	Contributor's	employer/law firm	Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if any)			

	MONET	ARY POLITICAL (	CONTRIBUTIO	DNS		SCHEDULE A(J)1
	The Instru	ction Guide explains how	to complete this f	orm.	1	Total pages Schedule A(J)1: Sch: 8/16 Rpt: 11/37
2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Lopez, Gloria	a (The Honorable)				00081836
4	Date 10/29/2021	<ul><li>5 Full name of contributor Lee, Chung (Mr.)</li><li>6 Contributor address; City; St</li></ul>	out-of-state PAC (ID#:_		7	Amount of Contribution (\$) \$1,000.00
		Katy, TX 77494				
8	Contributor's F	Principal Occupation		9 Contributor's Job Title		
	Attorney			Owner of Law Firm		
10		employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
		gal Group, PLLC		N/A		
12	If contributor is N/A	s a child, law firm of parent(s) (if a	any)	N/A		
	Date	Full name of contributor	out-of-state PAC (ID#:_	)	Π	Amount of Contribution (\$)
	10/05/2021	Mack, Hasan (Mr.)  Contributor address; City; Si	tate; Zip Code			\$1,000.00
		Austin, TX 78738		T		
		Principal Occupation		Contributor's Job Title		
	Attorney			Partner		
		employer/law firm churst & Horton L.L.P.		Law firm of contributor's sp	oous	se (if any)
		s a child, law firm of parent(s) (if a	any)	I IV/A		
	N/A	s a clind, law littl of paretids) (ii c	arry)	N/A		
	Date	Full name of contributor	out-of-state PAC (ID#:_	)	Τ	Amount of Contribution (\$)
	10/26/2021	Mark R. Thiessen PC	_			\$300.00
		Contributor address; City; Si Houston, TX 77008	tate; Zip Code		1	
	Contributor's F	I Principal Occupation		Contributor's Job Title	_	
	Contributor's 6	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if a	any)			

	MONET	ARY POLITICAL CONTRIBUTION	)NS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 9/16 Rpt: 12/37
2	FILER NAME Lopez, Gloria	a (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081836
4	Date 10/24/2021	<ul> <li>5 Full name of contributor  out-of-state PAC (ID#:_Medrano, Jose (Mr.)</li> <li>6 Contributor address; City; State; Zip Code</li> </ul>		7 Amount of Contribution (\$) \$100.00
Ļ	2 · · · · · · · · · · · · · · · · · · ·	Pasadena, TX 77503	To 0 10 1 1 1 1 7 1 7	
8	Contributor's F Insurance Aç	Principal Occupation	9 Contributor's Job Title Insurance Agent	
10		employer/law firm	11 Law firm of contributor's sp	nouse (if any)
10	N/A	этрюуетам шт	N/A	Jouse (ii ariy)
12	If contributor in	s a child, law firm of parent(s) (if any)		
	N/A		N/A	
	Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
	10/30/2021	Miranda, Kristi (Ms.)  Contributor address; City; State; Zip Code  Houston, TX 77060		\$500.00
$\vdash$	Contributor's	Principal Occupation	Contributor's Job Title	
	Attorney	чистра оссираноп	Solo Practioner	
		employer/law firm	Law firm of contributor's sp	pouse (if anv)
	Solo Practitio		N/A	,
	If contributor is	s a child, law firm of parent(s) (if any)		
	N/A		N/A	
	Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
	10/27/2021	Moreno, Candace (Mrs.)  Contributor address; City; State; Zip Code  Midland, TX 79705		\$10.00
	Contributor's F	Principal Occupation	Contributor's Job Title	•
	Home Engin	eer	N/A	
Contributor's employer/law firm Law firm of contributor's sp		pouse (if any)		
N/A N/A			N/A	
	If contributor is N/A	is a child, law firm of parent(s) (if any)	N/A	

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A(J)1: Sch: 10/16 Rpt: 13/37
2	FILER NAME Lopez, Glori	a (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081836
4	Date 10/04/2021	<ul> <li>Full name of contributor  out-of-state PAC (ID#: Moreno, Candace (Mrs.)</li> <li>Contributor address; City; State; Zip Code</li> <li>Midland, TX 79705</li> </ul>		7 Amount of Contribution (\$) \$25.00
8	Contributor's I	Principal Occupation	9 Contributor's Job Title	
	Home Engin	neer	N/A	
10	Contributor's 6	employer/law firm	11 Law firm of contributor's sp	ouse (if any)
12	If contributor is	s a child, law firm of parent(s) (if any)		
	N/A		N/A	
	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
	09/09/2021	Parchman Law Firm  Contributor address; City; State; Zip Code  The Woodlands, TX 77380		\$1,500.00
	Contributor's F	l Principal Occupation	Contributor's Job Title	<u> </u>
			Owner of Law Firm	
	Contributor's 6	employer/law firm	Law firm of contributor's sp	ouse (if any)
	If contributor is	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
	09/10/2021	Proffitt Family Law  Contributor address; City; State; Zip Code  Houston, TX 77002		\$1,500.00
	Contributor's I	Principal Occupation	Contributor's Job Title	
	Contributor's	employer/law firm	Law firm of contributor's sp	ouse (if any)
If contributor is a child, law firm of parent(s) (if any)				

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 11/16 Rpt: 14/37
2	FILER NAME Lopez, Glori	a (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081836
4	Date 09/09/2021	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_Raia, Ben (Mr.)</li> <li>Contributor address; City; State; Zip Code</li> <li>Friendswood, TX 77546</li> </ul>		7 Amount of Contribution (\$) \$2,500.00
8	Contributor's I	Principal Occupation	9 Contributor's Job Title	
	Attorney		Associate Attorney	
10		employer/law firm ociates Attorneys at Law	11 Law firm of contributor's sp N/A	ouse (if any)
12	If contributor is	s a child, law firm of parent(s) (if any)		
	N/A		N/A	
	Date	Full name of contributor  out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
	09/08/2021	Rainwater & Associates PLLC  Contributor address; City; State; Zip Code  Houston, TX 77056		\$1,330.52
	Contributor's F	I Principal Occupation	Contributor's Job Title	<u> </u>
		·		
	Contributor's	employer/law firm	Law firm of contributor's sp	ouse (if any)
	If contributor is	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
	12/08/2021	Ramos Law Group  Contributor address; City; State; Zip Code  Houston, TX 77006		\$1,000.00
	Contributor's I	Principal Occupation	Contributor's Job Title	
	Contributor's 6	employer/law firm	Law firm of contributor's sp	ouse (if any)
	If contributor is	s a child, law firm of parent(s) (if any)		

	MONET	ARY POLITICAL C	ONTRIBUTIO	ONS	SC	HEDULE A	\(J)1			
	The Instru	ction Guide explains how	to complete this f	orm.	1 Total pages S Sch: 12/16 F					
2	FILER NAME Lopez, Glori	a (The Honorable)			3 Filer ID (Eth 00081836	nics Commission	n Filers)			
4	Date 09/09/2021	<ul> <li>Full name of contributor</li> <li>Slate &amp; Associates Attorne</li> <li>Contributor address; City; Sta</li> </ul>	-		7 Amount of Co		\$5,000.00			
_		Deer Park, TX 77536								
8	Contributor's F	Principal Occupation		9 Contributor's Job Title Owner of Law Firm						
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oouse (if any)					
12	If contributor is	s a child, law firm of parent(s) (if a								
	Date	Full name of contributor	out-of-state PAC (ID#:_	)	Amount of Co	entribution (\$)				
	10/27/2021	Stout, Angela (Mrs.)  Contributor address; City; Sta				validation (e)	\$500.00			
		Houston, TX 77008								
	Attorney	Principal Occupation		Contributor's Job Title Owner of Law Firm						
		employer/law firm		Law firm of contributor's sp	ouse (if any)					
		aw Firm, P.L.L.C.		The Curley Law Firm						
		s a child, law firm of parent(s) (if a	nv)							
	N/A	, , , , , , , , , , , , , , , , , , , ,	,	N/A						
	Date	Full name of contributor	out-of-state PAC (ID#:_	)	Amount of Co	ontribution (\$)				
	12/02/2021	Sunnyside Legal Clinic PL Contributor address; City; Sta Houston, TX 77098					\$300.00			
	Contributor's I	Principal Occupation		Contributor's Job Title						
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (if any)					
	If contributor is	s a child, law firm of parent(s) (if a	ny)							

	MONET	ARY POLITICAL C	CONTRIBUTIO	ONS		SCHEDULE A(J)	1
	The Instru	ction Guide explains how	to complete this f	orm.	1	Total pages Schedule A(J)1: Sch: 13/16 Rpt: 16/37	
2	FILER NAME	a (The Honorable)			3	Filer ID (Ethics Commission Filers 00081836	5)
4	Date 10/24/2021	Full name of contributor     Taylor, Ashton (Mr.)     Contributor address; City; St.	out-of-state PAC (ID#:_		7	Amount of Contribution (\$)	0.00
		Houston, TX 77057					
8		Principal Occupation		9 Contributor's Job Title			
L	Attorney			Solo Practioner			
10	A Taylor Lav	employer/law firm	11 Law firm of contributor's sp In House Corporate Lav				
12	<del>-</del>	s a child, law firm of parent(s) (if a	nv)	III Flouse Corporate Lav	vyc		
12	N/A	s a clina, law mm or parem(s) (if a	119)	N/A			
F	Date	Full name of contributor	out-of-state PAC (ID#:	)	Г	Amount of Contribution (\$)	
	10/28/2021	The Clark Law Firm  Contributor address; City; St	_			\$1,00	0.00
		Houston, TX 77024					
	Contributor's F	Principal Occupation		Contributor's Job Title			
	Contributor's	employer/law firm		Law firm of contributor's sp	ous	se (if any)	
	If contributor is	s a child, law firm of parent(s) (if a	ny)				
	Date	Full name of contributor	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	11/15/2021	The Gonzalez Law Group  Contributor address; City; St.				\$1,50	0.00
		Houston, TX 77087					
	Contributor's I	Principal Occupation		Contributor's Job Title			
	Contributor's e	employer/law firm		Law firm of contributor's sp	oous	se (if any)	
	If contributor is	s a child, law firm of parent(s) (if a	ny)				

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A(J)1				
	The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A(J)1: Sch: 14/16 Rpt: 17/37				
2	FILER NAME Lopez, Glori	a (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081836				
4	Date 09/09/2021	<ul> <li>Full name of contributor</li></ul>		7 Amount of Contribution (\$) \$1,500.00				
8	Contributor's I	Houston, TX 77043 Principal Occupation	9 Contributor's Job Title					
10	Contributor's e	employer/law firm	11 Law firm of contributor's sp	ouse (if any)				
12	! If contributor is	s a child, law firm of parent(s) (if any)	L					
	Date 09/30/2021	Full name of contributor out-of-state PAC (ID#: The Law Office of Charlton & Associates  Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$200.00				
	Contributor's I	Houston, TX 77070  Principal Occupation	Contributor's Job Title					
	Contributor's 6	employer/law firm	Law firm of contributor's spouse (if any)					
	If contributor is	s a child, law firm of parent(s) (if any)						
	Date 09/10/2021	Full name of contributor out-of-state PAC (ID#: The Torres Law Group  Contributor address; City; State; Zip Code  Houston, TX 77018	)	Amount of Contribution (\$) \$2,500.00				
	Contributor's I	I Principal Occupation	Contributor's Job Title					
	Contributor's e	employer/law firm	Law firm of contributor's sp	ouse (if any)				
	If contributor is	s a child, law firm of parent(s) (if any)	1					

	MONET	ARY POLITICAL CO	ONTRIBUTIO	ONS	SCHEDULE A(J)1				
	The Instru	ction Guide explains how to	complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 15/16 Rpt: 18/37				
2	FILER NAME Lopez, Glori	a (The Honorable)			3 Filer ID (Ethics Commission Filers) 00081836				
4	Date 09/08/2021	<ul><li>5 Full name of contributor</li></ul>	out-of-state PAC (ID#:_ ; Zip Code	)	7 Amount of Contribution (\$) \$1,500.00				
8	Contributor's I	Houston, TX 77027 Principal Occupation		9 Contributor's Job Title					
10	Contributor's 6	employer/law firm		11 Law firm of contributor's sp	pouse (if any)				
12	If contributor is	s a child, law firm of parent(s) (if any)							
	Date 10/26/2021	Full name of contributor  Tran, Thao (Ms.)  Contributor address; City; State	out-of-state PAC (ID#:_ ; Zip Code		Amount of Contribution (\$) \$250.00				
		Pearland, TX 77584							
		Principal Occupation		Contributor's Job Title Solo Practioner					
	Attorney	employer/law firm			naugo (if any)				
		ices of Thao T. Tran		Law firm of contributor's spouse (if any) N/A					
		s a child, law firm of parent(s) (if any)	1	14/7 (					
	N/A	s a clina, law litti of parchi(s) (if arry)	,	N/A					
	Date	Full name of contributor	out-of-state PAC (ID#:_	)	Amount of Contribution (\$)				
	12/17/2021	Valdez, Stacey Holley (Ms.)  Contributor address; City; State  Webster, TX 77598	; Zip Code		\$2,000.00				
	Contributor's I	Principal Occupation		Contributor's Job Title	•				
	Attorney			Owner of Law Firm					
		employer/law firm		Law firm of contributor's sp	pouse (if any)				
		ez and Associates		N/A					
	If contributor is	s a child, law firm of parent(s) (if any)	)	N/A					

	MONET	ARY POLITICAL CONTRIBUTION	ONS			SCHEDULE	A(J)1		
	The Instru	ction Guide explains how to complete this 1	form.	1		es Schedule A(J) 16 Rpt: 19/37	1:		
2	FILER NAME Lopez, Glori	a (The Honorable)		3	Filer ID 0008183	(Ethics Commiss	sion Filers)		
4	Date 11/05/2021	<ul> <li>Full name of contributor  out-of-state PAC (ID#: Wilson, Tasha (Mrs.)</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of	f Contribution (\$)	\$500.00		
		Missouri City, TX 77459							
8	Contributor's I Attorney	Principal Occupation	9 Contributor's Job Title Associate Attorney						
10		employer/law firm Smith & Associates, P.C.	11 Law firm of contributor's sp	oous	se (if any)				
12	If contributor is	is a child, law firm of parent(s) (if any)	N/A						
	Date 12/15/2021	Full name of contributor out-of-state PAC (ID#:_Zimmerman, Marcia Lee (Ms.)  Contributor address; City; State; Zip Code  Houston, TX 77059			Amount of	f Contribution (\$)	\$500.00		
		Principal Occupation	Contributor's Job Title	<u> </u>					
		employer/law firm Luttbie, LLP	Owner of Law Firm  Law firm of contributor's spouse (if any)  N/A						
	If contributor is N/A	is a child, law firm of parent(s) (if any)	N/A						

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	<u>_</u>	SCHEDULE A2
The Instruction Guide explains how to complete this f	orm.	1 Total pages Schedule A2: Sch: 1/1 Rpt: 20/37
2 FILER NAME Lopez, Gloria (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081836
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$
5 Date 09/09/2021 6 Full name of contributor out-of-state PAC (ID#:	)	8 Amount of contribution (\$)   9 In-kind contribution description   \$3,669.48   Cost of Fundraiser at Vic & Anthony's.
Houston, TX 77056		Check if travel outside of Texas. Complete Schedule T.
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	· · · · · · · · · · · · · · · · · · ·
12 Contributor's principal occupation (FOR JUDICIAL) Attorney	13 Contributor's job title Partner of Law Firn	
14 Contributor's employer/law firm (FOR JUDICIAL)		or's spouse (if any) (FOR JUDICIAL)
Rainwater & Associates PLLC  16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)  N/A	N/A	

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

	Credit Card Payment	The Instruction Guide explains how to comp	plete	e this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 1/11 Rpt: 21/37	Lopez, Gloria (The Honorable)		00081836
4	Date	5 Payee name		·
	07/16/2021	BRR Inn of Court		
6	Amount (\$)	7 Payee address; City; State; Zip Code	е	
	\$688.97	201 W. 16th Street		
		Houston, TX 77008		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b	b) [	Description
	OF EXPENDITURE	Fees	Ę	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
			L	I Check if Austin, 17, difficeriolder living expense  BRR Inn of Court membership Fees.
9	Complete ONLY if direct	Candidate/Officeholder name Office sough	ht	Office held
	expenditure to benefit C/O	<del>-</del>		
Т	Date	Payee name		
	12/03/2021	Bank of America		
	Amount (\$)	Payee address; City; State; Zip Code	e	
	\$15.00	5171 San Felipe St.		
		Houston, TX 77056		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b	b) [	Description
	OF EXPENDITURE	Fees		Check if travel outside of Texas. Complete Schedule T.
			L	Check if Austin, TX, officeholder living expense \$15.00 fee to purchase a cashier's check. Cashier's
				check to pay the filing fee for the 2022 Primary
	Complete ONLY if direct	Candidate/Officeholder name Office sough	ht	Office held
	expenditure to benefit C/O	1		
	Date	Payee name		
	09/13/2021	Cuchara		
	Amount (\$)	Payee address; City; State; Zip Code	е	
	\$3,897.00	214 Fairview St.		
		Suite #1		
		Houston, TX 77006		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b	b) [	Description
	OF EXPENDITURE	Event Expense	<u></u>	Check if travel outside of Texas. Complete Schedule T.
			Ļ	Check if Austin, TX, officeholder living expense Payment for two fundraiser events (Xochimilco on
				he Bayou).
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sough	ht	Office held
	expenditure to benefit C/O			22
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

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services	Sali		ages	/Contract Labor		OTHER (enter a	strict a category not listed above)	
	Credit Card F dyment			The Instruction Gu	ide explains how	to com	nple	te this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission Filers	;)
	Sch: 2/11 Rpt: 22/37		Lopez, Glori	ia (The Honorab	le)					00081836		
4	Date	5	Payee name					·				
	12/22/2021		El Tiempo C	Cantina								
6	Amount (\$)	7	Payee addres	ss; City;	State; Zi	p Cod	le					
	\$657.90		2814 Naviga	ation Blvd.								
			Houston, TX	77003								
8	PURPOSE	(a)	Category (Se	e Categories listed at th	e ton of this schedule	, [	(b)	Description				
	OF	` `		age Expense	e top of this soriedate,	′   ·		_ `	outsi	de of Texas. Con	plete Schedule T.	
	EXPENDITURE			3 1				<b>—</b>		officeholder living		
											se for 2021 End of Yea	ır
								Dinner for ent	ure	308th Coul	t Stail.	
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offic	ceholder name	Office	e soug	ht			Office h	eld	
	experioritire to berieff C/O	1										
	Date		Payee name									
	08/09/2021		Harris Coun	ty Democratic P	arty							
	Amount (\$)		Payee addres	ss; City;	State; Zi	p Cod	le					
	\$5,000.00		4609 Lyons	Avenue								
			Houston, TX	( 77020								
	PURPOSE	(a)	Category (Se	e Categories listed at th	e top of this schedule	) (	(b)	Description				
	OF EXPENDITURE		Contribution	s/Donations Ma	de By			<b>-</b>			nplete Schedule T.	
	LXI LINDITORL		Candidate/C	Officeholder/Polit	tical Committee	€		ш		officeholder living		
											2022 Harris County ed Campaign.	
	Complete ONLY if direct	<u> </u>	Condidate/Offic	achalder name	Office	2 00110	ht					
	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol		Candidate/Offic	cenoider name	Office	e soug	ΠL			Office h	eiu	
_		1	_									
	Date		Payee name	tu. Damaanatia D	a who							
	12/03/2021			ty Democratic P								
	Amount (\$)		Payee addres		State; Zi <sub>l</sub>	p Cod	le					
	\$2,500.00		4609 Lyons	Avenue								
			Houston, TX	( 77020								
	PURPOSE OF	(a)	•	e Categories listed at th	e top of this schedule	) (	(b)	Description				
	EXPENDITURE		Fees					ш		de of Texas. Con officeholder livin	plete Schedule T.	
								_			22 Democratic Primary	,
								application.			Somoorado i ililary	'
-	Complete ONLY if direct	L(		ceholder name	Office	soug	ht			Office h	eld	
	expenditure to benefit C/O			Tanasa namo	3.1100	Joug				2,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:		n Filers)
	Sch: 3/11 Rpt: 23/37	Lopez, Gloria (The Honorable) 00081836	
4	Date	5 Payee name	
_	11/16/2021	JOHNSTON TOBEY BARUCH	
6	Amount (\$) \$12,000.00	7 Payee address; City; State; Zip Code 12377 Merit Drive	
	Ψ12,000.00	Suite 880	
		Dallas, TX 75251	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Legal Services Check if travel outside of Texas. Complete Schedule T.	
	LAFENDITORE	Check if Austin, TX, officeholder living expense	
		Retainer paid for attorney representation.	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	DH	
	Date	Payee name	
	10/04/2021	Kirby Ice House	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$182.47	3333 Eastside Street	
		Houston, TX 77098	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Fivent Figure 5.  (b) Description  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Cost of Petition Signing Event held on Octol	ber 03,
		2021 at Kirby Ice House.	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held OH	
		<u> </u>	
	Date 10/04/2021	Payee name Moreno, Candace (Ms.)	
	Amount (\$) \$600.00	Payee address; City; State; Zip Code 907 Pine Ct	
	4000.00		
		Midland, TX 79705	
	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.	
		Cost of online Campaign Website.	
		Cost of offine Campaign Website.	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	DH	

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Food/Beverage Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Candidate/Officeholder/Politica			Legal Services  Legal Services  Legal Services  Frinting Expense Salaries/Wages/Contract Labor						OTHER (enter a category not listed above)				
	Credit Card Payment		The	Instruction Gui	de explains hov	w to con	nple	te this form.						
1	Total pages Schedule F1:	2 FIL	ER NAME						3	Fi	iler ID	(Ethics Con	nmission Filers)	
	Sch: 4/11 Rpt: 24/37	Lo	pez, Gloria (	The Honorabl	e)					00	0081836			
4	Date	<b>5</b> Pa	yee name											
	12/22/2021		ypal											
6	Amount (\$)	<b>7</b> Pa	yee address;	City;	State; Z	Zip Cod	de							_
	\$1.21		11 North Fire	st Street	•									
		Sa	ın Jose, CA 9	95131										
_	DUDDOCE						/h\	5						_
8	PURPOSE OF			ategories listed at the	e top of this schedu	ıle)	(n)	Description  Check if travel of	outsi	ide (	of Texas Con	nplete Schedule	т	
	EXPENDITURE	re	es					Check if Austin,						
								Fee from third	d p	art	y for onli	ne donatior	า.	
9	Complete ONLY if direct	Can	didate/Officeh	older name	Offic	ce soug	ght				Office h	eld		
	expenditure to benefit C/OI	4												
	Date	Pa	yee name											_
	12/02/2021		aypal											
	Amount (\$)		yee address;	City;	State; Z	Zin Cor	10							
	\$9.16	· ·	11 North Firs	•	State, 2	zip Coc	ac .							
	Ψ3.10		TT NOIGHT II.	or officer										
		Co	n loog CA (	DE121										
			ın Jose, CA 🤉											
	PURPOSE OF			ategories listed at the	e top of this schedu	ıle)	(b)	Description	outoi	ido	of Toyon Con	anlata Cahadula	т	
	EXPENDITURE	Fe	es					Check if Austin,				nplete Schedule g expense	1.	
								Fee from third					٦.	
	Complete ONLY if direct	Can	didate/Officeh	older name	Offic	ce soug	ght				Office h	eld		_
	expenditure to benefit C/OI	4												
	Date	Pa	vee name											_
	11/05/2021		ıypal											
	Amount (\$)		yee address;	City;	State; Z	7in Cod	de							
	\$14.94		11 North Fire	•	Otato, 2	p								
	Ψ=σ.			J. G.										
		S 2	ın Jose, CA 9	DE 1 2 1										
	DUDD 005			73131										
	PURPOSE OF		,	ategories listed at the	e top of this schedu	ıle)	(b)	Description  Check if travel (	nutsi	ide i	of Texas Con	nplete Schedule	т	
	EXPENDITURE	Fe	es					Check if Austin,				•	1.	
								Fee from third	d p	art	y for onli	ne donation	٦.	
	Complete ONLY if direct	Can	didate/Officeh	older name	Offic	ce soug	ght				Office h	eld		_
	expenditure to benefit C/O	4												
														_

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services		Salaries/W		e /Contract Labor		OTHER (enter	a category not listed a	above)
	orean out a tyment			The Instruction Gu	uide explains ho	ow to cor	nple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commis	ssion Filers)
	Sch: 5/11 Rpt: 25/37		Lopez, Glori	a (The Honoral	ole)					00081836		
4	Date	5	Payee name									
	10/30/2021		Paypal									
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Coo	de					
	\$14.94		2211 North	First Street								
			San Jose, C	A 95131								
8	PURPOSE	(a)	Category (Se	e Categories listed at t	ne ton of this sched	lule)	(b)	Description				
	OF	<u> </u>	Fees	e categories listed at ti	ic top of this scried	iuic)	` '		outsi	de of Texas. Co	mplete Schedule T.	
	EXPENDITURE							<b>—</b>		officeholder livi		
								Fee from third	d pa	arty for onli	ne donation.	
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	ceholder name	Off	fice souç	ght			Office I	neld	
	experiulture to beliefit C/Oi											
	Date		Payee name									
	10/29/2021		Paypal									
	Amount (\$)		Payee addres	ss; City;	State;	Zip Cod	de					
	\$29.39		2211 North	First Street								
			San Jose, C	A 95131								
	PURPOSE	(a)	Category (Se	e Categories listed at t	ne top of this sched	lule)	(b)	Description				
	OF EXPENDITURE		Fees					<b>=</b>			mplete Schedule T.	
								ш		officeholder livi		
								Fee from third	u pa	arty for Offi	ne donadon.	
	Complete ONLY if direct	<u> </u>	Candidata/Offi	ceholder name	Off	fice soug	aht			Office I	old	
	expenditure to benefit C/OI		Januluale/Oni	centituer frame	Oli	nce sou	JIII			Office i	ieiu	
_		1										
	Date		Payee name									
	10/29/2021		Paypal									
	Amount (\$)		Payee addres	-	State;	Zip Coo	de					
	\$14.94		2211 North	First Street								
			San Jose, C	A 95131								
	PURPOSE OF	(a)		e Categories listed at t	ne top of this sched	lule)	(b)	Description				
	EXPENDITURE		Fees					Check if travel of Check if Austin,			mplete Schedule T.	
								Fee from third				
								. 55 115111 (1111)	∽ Þ¢	101 01111		
-	Complete ONLY if direct	L	Candidate/Offi	ceholder name	Off	fice soug	ght			Office h	neld	
	expenditure to benefit C/OI				Oil	Jou	٠٠٠٠			0.1100 1		

#### SCHEDULE F1

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

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

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 above)					
1	Total pages Schedule F1:	2 FILER NAM					3	Filer ID	(Ethics Commission F	ilers)
-	Sch: 6/11 Rpt: 26/37		ria (The Honorable)					00081836	(	
4	Date	5 Payee name	1							
	10/29/2021	Paypal								
6	Amount (\$)	<b>7</b> Payee addre	ess; City; S	State; Zip Co	ode					
	\$29.39	2211 North	First Street							
		San Jose,	CA 95131							
8	PURPOSE	(a) Category (s	See Categories listed at the top of th	nis schedule)	(b)	Description				
	OF EXPENDITURE	Fees				ш		de of Texas. Com		
						Fee from third		officeholder living		
						r cc iroin time	чρ	arty for orinin	e donation.	
9	Complete ONLY if direct expenditure to benefit C/OH		iceholder name	Office sou	<b>l</b> ıght			Office he	eld	
_										
	Date	Payee name								
	10/28/2021	Paypal								
	Amount (\$)	Payee addre		State; Zip Co	ode					
	\$43.84	2211 North	First Street							
		San Jose,	CA 95131							
	PURPOSE	(a) Category (S	See Categories listed at the top of th	nis schedule)	(b)	Description				
	OF EXPENDITURE	Fees				<b>=</b>		de of Texas. Com		
						ш		officeholder living		
						Fee from third	uρ	arty for orinir	e donadon.	
	Complete ONLY if direct	Candidate/Of	iceholder name	Office sou	ıaht			Office he	ald.	
	expenditure to benefit C/O		icenoider name	Office 300	igiit			Office fic	iiu	
_	Data	Davis a name								
	Date 10/27/2021	Payee name	<b>)</b>							
		Paypal								
	Amount (\$)	Payee addre	•	State; Zip Co	ode					
	\$14.94	2211 Nortr	First Street							
			0.4.054.04							
		San Jose,	CA 95131							
	PURPOSE OF		See Categories listed at the top of th	nis schedule)	(b)	Description				
	EXPENDITURE	Fees				ш		de of Texas. Comp officeholder living		
						Fee from third				
							-	.,		
	Complete ONLY if direct	Candidate/Of	iceholder name	Office sou	L laht			Office he	eld	
	expenditure to benefit C/O			55 550	9			200 110		
l										

### SCHEDULE F1

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to co	mplete this form.		
1 Total pages Schedule F1	2 FILER NAME	3	Filer ID (Ethics Commis	ssion Filers)
Sch: 7/11 Rpt: 27/37	Lopez, Gloria (The Honorable)		00081836	
4 Date	5 Payee name			
10/27/2021	Paypal			
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode		
\$0.78	2211 North First Street			
	San Jose, CA 95131			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF	Fees		side of Texas. Complete Schedule T.	
EXPENDITURE		. —	X, officeholder living expense	
		Fee from third p	party for online donation.	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou OH	ight	Office held	
	~			
Date	Payee name			
10/26/2021	Paypal			
Amount (\$)	Payee address; City; State; Zip Co	ode		
\$7.72	2211 North First Street			
	San Jose, CA 95131			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Fees	I <u>ш</u>	side of Texas. Complete Schedule T.	
		_	x, officeholder living expense party for online donation.	
		r ee nom uma p	daity for offinite doriation.	
Complete ONLY if direct	Candidate/Officeholder name Office sou	<u> </u>  aht	Office held	
expenditure to benefit C/0		giit	Cilioc Held	
Date	Davos namo			
10/25/2021	Payee name Paypal			
		ad a		
Amount (\$) \$1.21	Payee address; City; State; Zip Co	ode		
Φ1.21	ZZII NOITH FIISt Street			
	0104.05404			
	San Jose, CA 95131	1		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
EXPENDITURE	Fees	<u>                                   </u>	side of Texas. Complete Schedule T. X, officeholder living expense	
			party for online donation.	
		<u>'</u>	-	
Complete ONLY if direct	Candidate/Officeholder name Office sou	ıght	Office held	
expenditure to benefit C/0				

#### 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

	Candidate/Officeholder/Politica Credit Card Payment		nmittee	Legal Services	•		/ages	/Contract Labor		OTHER (enter	a category not liste	d above)
		_		The Instruction Gu	ıide explains h	low to co	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Comn	nission Filers)
	Sch: 8/11 Rpt: 28/37		Lopez, Glori	ia (The Honoral	ole)					00081836	5	
4	Date	5	Payee name									
	10/24/2021		Paypal									
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	de					
	\$6.27		2211 North	First Street								
			San Jose, C	A 95131								
8	PURPOSE	(a)	Category (Se	ee Categories listed at t	ne top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		Fees	Ü		,		Check if travel of	outsi	de of Texas. Co	omplete Schedule T.	
	EXPENDITORE							Check if Austin,				
								Fee from third	d pa	arty for onl	ine donation.	
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Office	ceholder name	O:	ffice sou	ght			Office	held	
	experialitate to beliefit of of	_										
	Date		Payee name									
	10/24/2021		Paypal									
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de					
	\$3.38		2211 North	First Street								
			San Jose, C	CA 95131								
	PURPOSE	(a)	Category (Se	ee Categories listed at t	ne top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		Fees					<b>=</b>			omplete Schedule T.	
	LA LIBITORE							Check if Austin,				
								Fee from third	а ра	arty for oni	ine donation.	
_	Complete ONLY if direct	<u> </u>	Condidate/Offi			#:				Office	h a l al	
	Complete ONLY if direct expenditure to benefit C/OI		Jandidate/Offic	ceholder name	O	ffice sou	gnt			Office	neia	
	·											
	Date		Payee name									
	10/23/2021		Paypal									
	Amount (\$)		Payee addres	-	State;	Zip Co	de					
	\$14.94		2211 North	First Street								
			San Jose, C	A 95131								
	PURPOSE	(a)	Category (Se	ee Categories listed at t	ne top of this sche	dule)	(b)	Description				
	OF EXPENDITURE		Fees								omplete Schedule T.	
								Check if Austin,				
								Fee from third	u pa	מונא וטו טווו	me uundlion.	
_	Complete ONLY if divert	Ц,	Candidata/O#	achaldar nama	-	ffice so:	abt			Office	hold	
	Complete ONLY if direct expenditure to benefit C/OI		Januiuale/Uπi	ceholder name	O	ffice sou	ynı			Onice	nelu	
	•											

### 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/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 9/11 Rpt: 29/37	Lopez, Gloria (The Honorable) 00081836
4	Date	5 Payee name
	10/05/2021	Paypal
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$29.39	2211 North First Street
		San Jose, CA 95131
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
		Fee from third party for online donation.
		1 00 nom uma party 101 ommio donationi
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
$\vdash$	Date	Payeo namo
	10/04/2021	Payee name
		Paypal
	Amount (\$)	Payee address; City; State; Zip Code
	\$1.21	2211 North First Street
		San Jose, CA 95131
	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
		Fee from third party for online donation.
	Operation ONLY if allowed	On didn't Office helds
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/06/2021	Sanchez, Mareena (Miss)
	Amount (\$)	Payee address; City; State; Zip Code
	\$150.00	2148 SIENA DR.
		Pearland, TX 77581
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EM LINDITURE	Check if Austin, TX, officeholder living expense
		Payment for labor. Labor to review petitions and VUIDs on petitions.
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	poa.taro to boriont 0/01	

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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: 10/11 Rpt: 30/37	Lopez, Gloria (The Honorable) 00081836
4	Date	5 Payee name
	09/14/2021	Texas Latinx Judges
6	` '	7 Payee address; City; State; Zip Code
	\$1,000.00	P.O. Box 90683
	!	
		San Antonio, TX 78209
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
	!	Membership Dues for Texas Latinx Judges.
	!	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	experiulture to benefit 6/6/	<u> </u>
	Date	Payee name
	11/05/2021	The Houston LGBTQ+ Political Caucus
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	PO Box 66664
	!	
		Houston, TX 77266
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	!	Fee for ticket to attend the 2021 Equality Brunch
	!	event.
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Payee name
	10/05/2021	Twelthday
$\vdash$	Amount (\$)	Payee address; City; State; Zip Code
	\$331.52	1917 Sandy Schoals Dr.
	!	
	!	League City, TX 77573
	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  Deposit for 50 embroidered hats with election logo.
	!	(1/2 the cost of order).
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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

	Contributing Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
	Sch: 11/11 Rpt: 31/37	Lopez, Gloria (The Honorable) 00081836	
4	Date	5 Payee name	
	10/21/2021	Twelthday	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$331.51	1917 Sandy Schoals Dr.	
		League City, TX 77573	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Advertising Expense	
	LXI ENDITORE	Check if Austin, TX, officeholder living expense	
		1/2 half of cost for Embroidery caps. Re-Election	
		Caps.	
9	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	_
	09/22/2021	United States Postal Service	
			_
	Amount (\$)		
	\$11.60	310 Morningside Dr.	
		Friendswood, TX 77546	
	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.	
	EXI ENDITORE	Check if Austin, TX, officeholder living expense	
		USPS Fee for the cost of a book of Stamps for the mailing of thank you notes to donors.	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OF	<b>n</b>	

### POLITICAL EXPENDITURES FROM PERSONAL FUNDS

## SCHEDULE G

## **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking

Event Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Committee	Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Polling Ex Printing E Salaries/V	xpense Vages/Contract Labor		Travel in Dis Travel Out o	
	orean out a tyment		The Instruction Guide explains I	how to co	mplete this form.			
1	Total pages Schedule G:	2 FILER NAMI	E			3	Filer ID	(Ethics Commission Filers)
	Sch: 1/4 Rpt: 32/37	Lopez, Glo	ria (The Honorable)				0008183	36
4	Date	5 Payee name						
	12/16/2021	Houston Bl	ank American Democrats					
6	Amount (\$)	7 Payee addre	ess; City; State;	Zip Co	ode			
	\$50.00	P.O. Box 2	252					
	Reimbursement from							
	political contributions intended	Houston, T	X 77252					
8	PURPOSE	(a) Category (s	see Categories listed at the top of this sche	edule)	(b) Description	Che	eck if travel	outside of Texas. Complete Schedule T.
	OF EXPENDITURE	I	ns/Donations Made By			Che	eck if Austin	, TX, officeholder living expense
		Candidate/	Officeholder/Political Comm	ittee	Membership Due	es.		
9	Complete ONLY if direct expenditure to benefit	Candidate/Office	holder name		Office sought			Office held
	C/OH							
	Date	Payee name						
	09/19/2021	1 1	ank American Democrats					
	Amount (\$)	Payee addre	ess; City; State;	Zip Co	ode			
	\$100.00	P.O. Box 2	•					
	Reimbursement from							
	political contributions intended	Houston, T	X 77252					
	PURPOSE	Category (S	see Categories listed at the top of this sche	edule)	Description	Che	eck if travel	outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Contributio	ns/Donations Made By			Che	eck if Austin	, TX, officeholder living expense
	EXPENDITORE	Candidate/	Officeholder/Political Comm	ittee	Donation to the F	Hous	ton Blac	ck American Democrats.
	•	Candidate/Office	holder name		Office sought			Office held
	expenditure to benefit C/OH							
	Date	Davis a marris						
	09/19/2021	Payee name	LBT Political Caucus					
	Amount (\$)	Payee addre		Zip Co	nde.			
	\$40.00	P.O. Box 6	•	Zip Cc	Jue			
	Reimbursement from	l isigen						
	political contributions intended	Houston, T	X 77266					
	PURPOSE OF	Category (S	see Categories listed at the top of this sch	edule)	Description	_		outside of Texas. Complete Schedule T.
	EXPENDITURE		ns/Donations Made By	ittoo	L	_		, TX, officeholder living expense
		Carididate/	Officeholder/Political Comm	illee	Membership Fee		ouston (	GLBT Political Caucus and
		Candidate/Office	holder name		Office sought			Office held
	expenditure to benefit C/OH							
$\vdash$								

### POLITICAL EXPENDITURES FROM PERSONAL FUNDS

## SCHEDULE G

### **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		tee Legal S	ards/Memorials Expense Services		/ages/Contract Labor		Travel Out of District OTHER (enter a category not listed above)
	· 			nstruction Guide exp	lains how to co	mplete this form.		
1	Total pages Schedule G:	2 FIL	ER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 2/4 Rpt: 33/37	Lo	pez, Gloria (Tl	ne Honorable)				00081836
4	Date	<b>5</b> Pay	yee name					
	11/12/2021	Sc	hedulista					
6	Amount (\$)	<b>7</b> Pay	yee address;	City;	State; Zip Co	de		
	\$39.00	14:	19 S Jackson	Street, Suite 111				
	Reimbursement from political contributions intended	Se	eattle, WA 9814	14				
8	PURPOSE	(a) Ca	tegory (See Cate	gories listed at the top of th	nis schedule)	(b) Description	Cl	neck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Fe	es			Ī	Cl	neck if Austin, TX, officeholder living expense
	EXPENDITORE					Cost of third par scheduling of th		cheduling service for online ourt's docket.
9	Complete ONLY if direct expenditure to benefit C/OH	Candid	late/Officeholder	name		Office sought		Office held
	Date	Pay	yee name					
	10/12/2021	Sc	hedulista					
	Amount (\$)	Pay	yee address;	City; S	State; Zip Co	de		
	\$39.00	14	19 S Jackson	Street, Suite 111	·			
	Reimbursement from political contributions intended	Se	eattle, WA 981	14				
	PURPOSE	Cat	tegory (See Cate	gories listed at the top of th	nis schedule)	Description	CI	neck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Fe	es			Ī	Cl	neck if Austin, TX, officeholder living expense
	EXI ENDITORE					Cost of third par scheduling of th		cheduling service for online ourt's docket.
	Complete ONLY if direct expenditure to benefit C/OH	Candid	late/Officeholder	name		Office sought		Office held
	Date	Pay	yee name					
	09/12/2021	1 1	chedulista					
	Amount (\$)	Pav	yee address;	City; S	State; Zip Co	de		
	\$39.00	14	19 S Jackson	Street, Suite 111	·			
	X Reimbursement from political contributions intended	Se	eattle, WA 9814	14				
	PURPOSE	Cat	tegory (See Cate	gories listed at the top of th	nis schedule)	Description	_	neck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Fe	es			l	_	neck if Austin, TX, officeholder living expense
						Cost of third par scheduling of th		cheduling service for online ourt's docket.
	Complete ONLY if direct expenditure to benefit C/OH	Candida	late/Officeholder	name		Office sought		Office held

#### POLITICAL EXPENDITURES FROM PERSONAL FUNDS

#### SCHEDULE G

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Contributions/ Donations Made By -Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: FILER NAME Filer ID (Ethics Commission Filers) Sch: 3/4 Rpt: 34/37 Lopez, Gloria (The Honorable) 00081836 Date Payee name 12/12/2021 Schedulista Payee address; Amount (\$) City; State; Zip Code \$39.00 1419 S Jackson Street, Suite 111 Reimbursement from political contributions Х intended Seattle, WA 98144 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if Austin, TX, officeholder living expense Fees **EXPENDITURE** Cost of third party scheduling service for online scheduling of the Court's docket. Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 08/12/2021 Schedulista Amount (\$) Payee address; City; State; Zip Code \$39.00 1419 S Jackson Street, Suite 111 Reimbursement from political contributions Χ Seattle, WA 98144 intended **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Fees **EXPENDITURE** Cost of third party scheduling service for online scheduling of the Court's docket. Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 07/12/2021 Schedulista Payee address; City; State; Zip Code Amount (\$) \$39.00 1419 S Jackson Street, Suite 111 Reimbursement from

Seattle, WA 98144

Candidate/Officeholder name

Fees

Category (See Categories listed at the top of this schedule)

Χ

C/OH

political contributions intended

Complete ONLY if direct

expenditure to benefit

**PURPOSE** 

OF

**EXPENDITURE** 

Description

Office sought

Check if travel outside of Texas. Complete Schedule T.

Check if Austin, TX, officeholder living expense

Office held

Cost of third party scheduling service for online

scheduling of the Court's docket.

#### POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Advertising Expense Accounting/Banking Event Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. FILER NAME Filer ID Total pages Schedule G: (Ethics Commission Filers) Sch: 4/4 Rpt: 35/37 Lopez, Gloria (The Honorable) 00081836 Date Payee name 09/21/2021 Southwest Democrats 6 Amount (\$) Payee address; City; State; Zip Code \$250.00 P.O. Box 2053 Reimbursement from political contributions intended Bellaire, TX 77402 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. 8 OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Donation to the Southwest Democrats and Membership Dues. Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

# INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 36/37 2 FILER NAME Filer ID (Ethics Commission Filers) Lopez, Gloria (The Honorable) 00081836 5 Name of person from whom amount is received 8 Amount (\$) Date 12/30/2021 \$1,948.50 Cuchara 6 Address of person from whom amount is received; City; State; Zip Code Houston, TX 77006 Purpose for which amount is received Check if political contribution returned to filer Reimbursement for 1canceled event--Xochimilco on the Bayou. Cancelation due to weather.

The Instruction Guide explains how to complete this form.  FILER NAME Lopez, Gloria (The Honorable)  LENDER INFORMATION  4 Name of lender Lopez, Gloria  5 Lender address; City; State; Zip Code  Spring, TX 77379  GUARANTOR INFORMATION  X not applicable  7 Guarantor address; City; State; Zip Code	OUTSTAN	IDING LOANS	SCHEDULE L
FILER NAME Lopez, Gloria (The Honorable)  LENDER INFORMATION  4 Name of lender Lopez, Gloria  5 Lender address; City; State; Zip Code  Spring, TX 77379  GUARANTOR INFORMATION  6 Name of guarantor	The Instruction	on Guide explains how to complete this form.	
INFORMATION Lopez, Gloria  5 Lender address; City; State; Zip Code  Spring, TX 77379  GUARANTOR INFORMATION 6 Name of guarantor		he Honorable)	3 Filer ID (Ethics Commission Filers)
5 Lender address; City; State; Zip Code  Spring, TX 77379  GUARANTOR INFORMATION  6 Name of guarantor	LENDER INFORMATION		
GUARANTOR INFORMATION 6 Name of guarantor		5 Lender address; City; State; Zip Code	
INFORMATION			
7 Guarantor address; City; State; Zip Code		6 Name of guarantor	
	X not applicable	7 Guarantor address; City; State; Zip Code	