

# JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM **JC/OH**  
COVER SHEET PG 1

<b>The JC/OH Instruction Guide explains how to complete this form.</b>		<b>1</b> Filer ID (Ethics Commission Filers) 00081836	<b>2</b> Total pages filed:  30
<b>3</b> CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR The Honorable	FIRST Gloria	MI MI
	NICKNAME	LAST Lopez	SUFFIX
<b>OFFICE USE ONLY</b>			
Date Received <b>ELECTRONICALLY FILED</b> 07/17/2023			
<b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 2121 Sage Rd., Ste. 110		ZIP CODE
	Houston, TX 77056		
	Date Hand-delivered or Date Postmarked		Receipt #
	Date Processed		Amount
Date Imaged			
<b>5</b> CAMPAIGN TREASURER NAME	MS / MRS / MR Ms.	FIRST Heidy	MI MI
	NICKNAME	LAST Orellana	SUFFIX
<b>6</b> CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 2121 Sage Rd., Ste. 110		APT / SUITE #; CITY; STATE; ZIP CODE
	Houston, TX 77056		
<b>7</b> CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
(832) 821-5295			
<b>8</b> REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)		
	<input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)		
<b>9</b> PERIOD COVERED	Month	Day	Year
	01/01/2023	THROUGH	06/30/2023
<b>10</b> ELECTION	ELECTION DATE Month Day Year 11/08/2022		ELECTION TYPE
	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special		
<b>11</b> OFFICE	OFFICE HELD (if any) Family District Court Judge District 308 Harris		<b>12</b> OFFICE SOUGHT (if known) District Judge District 308th

**GO TO PAGE 2**

# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH  
COVER SHEET PG 2

2 of 30

**13 C / OH NAME** Lopez, Gloria (The Honorable) **14 Filer ID** (Ethics Commission Filers)  
00081836

**15 NOTICE FROM POLITICAL COMMITTEE(S)** This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

Additional Pages

<b>COMMITTEE TYPE</b>  <input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	<b>COMMITTEE NAME</b>
	<b>COMMITTEE ADDRESS</b>
	<b>COMMITTEE CAMPAIGN TREASURER NAME</b>
	<b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b>

<b>16 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0.00
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	31,542.69
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. <b>TOTAL POLITICAL EXPENDITURES</b>	\$	5,094.02
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	100,974.31
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

**17 AFFIDAVIT**

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

The Honorable Gloria Lopez  
\_\_\_\_\_  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

\_\_\_\_\_  
Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath

# SUBTOTALS - JC/OH

<b>18 FILER NAME</b> Lopez, Gloria (The Honorable)		<b>19 Filer ID</b> 00081836	(Ethics Commission Filers)
<b>20 SCHEDULE SUBTOTALS</b>			<b>SUBTOTAL AMOUNT</b>
NAME OF SCHEDULE			
1.	<input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$	27,811.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	3,731.69
3.	<input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$	
4.	<input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$	
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	4,307.40
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	786.62
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
12.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	605.00

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A(J)1: Sch: 1/12 Rpt: 4/30
2 FILER NAME Lopez, Gloria (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081836
4 Date 03/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Archer, Dawn C. (Ms.)	7 Amount of Contribution (\$)  \$1,000.00
	6 Contributor address; City; State; Zip Code  Houston, TX 77041	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Associate Attorney
10 Contributor's employer/law firm Bobby K. Newman, P.C.		11 Law firm of contributor's spouse (if any) N/A
12 If contributor is a child, law firm of parent(s) (if any) N/A N/A		
Date 03/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bates, Nicole (Ms.)	Amount of Contribution (\$)  \$250.00
	Contributor address; City; State; Zip Code  Houston, TX 77024	
Contributor's Principal Occupation Attorney		Contributor's Job Title Owner of Firm
Contributor's employer/law firm Law office of Nicole R. Bates		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A N/A		
Date 03/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bonney, Jerry R. (Mr.)	Amount of Contribution (\$)  \$500.00
	Contributor address; City; State; Zip Code  Houston, TX 77025	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Law Office of Jerry Bonney		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A N/A		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 2/12 Rpt: 5/30
<b>2</b> FILER NAME Lopez, Gloria (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081836
<b>4</b> Date 03/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bonney, Jerry R. (Mr.)	<b>7</b> Amount of Contribution (\$) \$501.00
	<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77025	
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Owner of Law Firm
<b>10</b> Contributor's employer/law firm Bonney Law Firm		<b>11</b> Law firm of contributor's spouse (if any) N/A
<b>12</b> If contributor is a child, law firm of parent(s) (if any) N/A N/A		
Date 03/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bragg, Melanie (Ms.)	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  Houston, TX 77056	
Contributor's Principal Occupation Attorney		Contributor's Job Title Owner of Law Firm
Contributor's employer/law firm Bragg Law, PC		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A N/A		
Date 03/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carlin, Amy Michelle (Ms.)	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  Houston, TX 77002	
Contributor's Principal Occupation Attorney		Contributor's Job Title Owner of Law Firm
Contributor's employer/law firm The Carlin Law Firm		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A N/A		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 3/12 Rpt: 6/30
<b>2</b> FILER NAME Lopez, Gloria (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081836
<b>4</b> Date 03/08/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Clark, Robert (Mr.)	<b>7</b> Amount of Contribution (\$) \$500.00
<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77024		
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Owner of Law Firm
<b>10</b> Contributor's employer/law firm The Clark Law Firm, P.C.		<b>11</b> Law firm of contributor's spouse (if any) N/A
<b>12</b> If contributor is a child, law firm of parent(s) (if any) N/A N/A		
Date 03/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dale, Laura (Mrs.)	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code  Houston, TX 77056		
Contributor's Principal Occupation Attorney		Contributor's Job Title Owner of Law Firm
Contributor's employer/law firm Laura Dale & Associates, P.C.		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A N/A		
Date 03/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) England, Angela (Ms.)	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code  Houston, TX 77024		
Contributor's Principal Occupation Attorney		Contributor's Job Title Owner
Contributor's employer/law firm Tindall England, PC		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A N/A		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 4/12 Rpt: 7/30
<b>2</b> FILER NAME Lopez, Gloria (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081836
<b>4</b> Date 03/08/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fritsch, Kelly (Mrs.)	<b>7</b> Amount of Contribution (\$) \$1,000.00
<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77007		
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Owner of Law Firm
<b>10</b> Contributor's employer/law firm Kelly Fritsch, PC		<b>11</b> Law firm of contributor's spouse (if any) N/A
<b>12</b> If contributor is a child, law firm of parent(s) (if any) N/A		
<b>Date</b> 03/07/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Fullenweider Wilhite	<b>Amount of Contribution (\$)</b> \$2,000.00
<b>Contributor address; City; State; Zip Code</b>  Houston, TX 77027		
<b>Contributor's Principal Occupation</b>		<b>Contributor's Job Title</b>
<b>Contributor's employer/law firm</b>		<b>Law firm of contributor's spouse (if any)</b>
<b>If contributor is a child, law firm of parent(s) (if any)</b>		
<b>Date</b> 03/02/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Gil III, Ned (Mr.)	<b>Amount of Contribution (\$)</b> \$1,000.00
<b>Contributor address; City; State; Zip Code</b>  Houston, TX 77098		
<b>Contributor's Principal Occupation</b> Attorney		<b>Contributor's Job Title</b> Solo
<b>Contributor's employer/law firm</b> Attorney Ned Gill, III		<b>Law firm of contributor's spouse (if any)</b> N/A
<b>If contributor is a child, law firm of parent(s) (if any)</b> N/A		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 5/12 Rpt: 8/30
<b>2</b> FILER NAME Lopez, Gloria (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081836
<b>4</b> Date 03/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gray, Daniel (Mr.)	<b>7</b> Amount of Contribution (\$) \$500.00
<b>6</b> Contributor address; City; State; Zip Code  Pearland, TX 77584		
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Owner of Law Firm
<b>10</b> Contributor's employer/law firm Law Office of Daniel Gray		<b>11</b> Law firm of contributor's spouse (if any) N/A
<b>12</b> If contributor is a child, law firm of parent(s) (if any) N/A		
Date 03/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gregory, Myrna (Ms.)	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code  Houston, TX 77008		
Contributor's Principal Occupation Attorney		Contributor's Job Title Owner of Firm
Contributor's employer/law firm Gregory Law, PLLC		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		
Date 03/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hal D. Hale & Associates, P.C.	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code  Houston, TX 77056		
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 6/12 Rpt: 9/30
<b>2</b> FILER NAME Lopez, Gloria (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081836
<b>4</b> Date 03/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Henderson, Brittany (Ms.)	<b>7</b> Amount of Contribution (\$) <span style="float:right">\$2,000.00</span>
	<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77098	
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Associate Attorney
<b>10</b> Contributor's employer/law firm Slate & Associates, Attorneys at Law PC		<b>11</b> Law firm of contributor's spouse (if any) N/A
<b>12</b> If contributor is a child, law firm of parent(s) (if any) N/A <span style="margin-left: 200px;">N/A</span>		
Date 03/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) John E. Van Ness, P.C.	Amount of Contribution (\$) <span style="float:right">\$2,500.00</span>
	Contributor address; City; State; Zip Code  Houston, TX 77098	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 03/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kuehm, Robert (Mr.)	Amount of Contribution (\$) <span style="float:right">\$2,000.00</span>
	Contributor address; City; State; Zip Code  Pearland, TX 77584	
Contributor's Principal Occupation Attorney		Contributor's Job Title Associate Attorney
Contributor's employer/law firm Slate & Associates		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A <span style="margin-left: 200px;">N/A</span>		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 7/12 Rpt: 10/30
<b>2</b> FILER NAME Lopez, Gloria (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081836
<b>4</b> Date 03/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Law Office of Shelly W. Durham, PC	<b>7</b> Amount of Contribution (\$) <span style="float:right">\$100.00</span>
	<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77056	
<b>8</b> Contributor's Principal Occupation		<b>9</b> Contributor's Job Title
<b>10</b> Contributor's employer/law firm		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 03/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Longino, Tristan (Mr.)	Amount of Contribution (\$) <span style="float:right">\$500.00</span>
	Contributor address; City; State; Zip Code  Houston, TX 77080	
Contributor's Principal Occupation Attorney		Contributor's Job Title Owner of Firm
Contributor's employer/law firm Longino Law		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		
Date 03/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lopez, Jorge (Mr.)	Amount of Contribution (\$) <span style="float:right">\$500.00</span>
	Contributor address; City; State; Zip Code  Houston, TX 77059	
Contributor's Principal Occupation Attorney		Contributor's Job Title Owner of Law Firm
Contributor's employer/law firm Jorge Lopez Law, PC		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 8/12 Rpt: 11/30
<b>2</b> FILER NAME Lopez, Gloria (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081836
<b>4</b> Date 03/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Vlahakos & Sydow, PLLC <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77046	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Contributor's Principal Occupation		<b>9</b> Contributor's Job Title
<b>10</b> Contributor's employer/law firm		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 03/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moreno, Candace (Mrs.) <hr/> Contributor address; City; State; Zip Code  Midland, TX 79705	Amount of Contribution (\$)  \$35.00
Contributor's Principal Occupation Home Engineer		Contributor's Job Title Stay at home mom.
Contributor's employer/law firm N/A		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		
Date 03/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Myres and Associates <hr/> Contributor address; City; State; Zip Code  Houston, TX 77045	Amount of Contribution (\$)  \$100.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A(J)1: Sch: 9/12 Rpt: 12/30
2 FILER NAME Lopez, Gloria (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081836
4 Date 03/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Office of Jan R. Cohen Atty at Law	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code  Houston, TX 77057	
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 03/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parchman, Jon (Mr.)	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  The Woodlands, TX 77380	
Contributor's Principal Occupation Attorney		Contributor's Job Title Owner of Law Firm
Contributor's employer/law firm Parchman Law Group, PLLC		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		
Date 03/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Ronique (Ms.)	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  Missouri, TX 77459	
Contributor's Principal Occupation Attorney		Contributor's Job Title Owner of Law Firm
Contributor's employer/law firm Bastine Law Group		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 10/12 Rpt: 13/30
<b>2</b> FILER NAME Lopez, Gloria (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081836
<b>4</b> Date 03/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slate, Dennis M. (Mr.)	<b>7</b> Amount of Contribution (\$) \$2,000.00
	<b>6</b> Contributor address; City; State; Zip Code  Deer Park, TX 77536	
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Owner of Law Firm
<b>10</b> Contributor's employer/law firm Slate & Associates		<b>11</b> Law firm of contributor's spouse (if any) N/A
<b>12</b> If contributor is a child, law firm of parent(s) (if any) N/A		
Date 03/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) St. Yves- Brewer, Diane (Mrs.)	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  Houston, TX 77006	
Contributor's Principal Occupation Attorney		Contributor's Job Title Owner of Law Firm
Contributor's employer/law firm Law Office of Diane St. Yves		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		
Date 03/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Gonzalez Law Group, PLLC	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code  Houston, TX 77087	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 11/12 Rpt: 14/30
<b>2</b> FILER NAME Lopez, Gloria (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081836
<b>4</b> Date 03/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) The Herrington Law Firm <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77043	<b>7</b> Amount of Contribution (\$)  \$1,500.00
<b>8</b> Contributor's Principal Occupation		<b>9</b> Contributor's Job Title
<b>10</b> Contributor's employer/law firm		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 03/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) The Stout Law Firm <hr/> Contributor address; City; State; Zip Code  Houston, TX 77008	Amount of Contribution (\$)  \$500.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 03/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tran, Thao (Mrs.) <hr/> Contributor address; City; State; Zip Code  Houston, TX 77023	Amount of Contribution (\$)  \$300.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Owner of Law Firm
Contributor's employer/law firm The Law Office of Thao T. Tran, P.C.		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 12/12 Rpt: 15/30
<b>2</b> FILER NAME Lopez, Gloria (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081836
<b>4</b> Date 03/21/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trinidad, Angelic (Ms.)	<b>7</b> Amount of Contribution (\$) \$25.00
<b>6</b> Contributor address; City; State; Zip Code  Hockley, TX 77447		
<b>8</b> Contributor's Principal Occupation Customer Service		<b>9</b> Contributor's Job Title Customer Service Rep
<b>10</b> Contributor's employer/law firm N/A		<b>11</b> Law firm of contributor's spouse (if any) N/A
<b>12</b> If contributor is a child, law firm of parent(s) (if any) N/A N/A		
Date 03/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valdez, Stacey Holley (Ms.)	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code  Webster, TX 77598		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Stacey Valdez & Associates		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A N/A		

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A2: Sch: 1/1 Rpt: 16/30	
2 FILER NAME Lopez, Gloria (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081836	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 03/07/2023	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rainwater, Charlotte (Mrs.)	8 Amount of contribution (\$) \$3,731.69	9 In-kind contribution description Cost of Fundraiser on March 07, 2023 at State of Grace.
	7 Contributor address; City; State; Zip Code  Houston, TX 77056	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL) Attorney		13 Contributor's job title (FOR JUDICIAL) (See instructions) Owner of Law Firm	
14 Contributor's employer/law firm (FOR JUDICIAL) The Rainwater Law Firm		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) N/A	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) N/A		N/A	



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/10 Rpt: 17/30	<b>2</b> FILER NAME Lopez, Gloria (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081836
<b>4</b> Date 06/22/2023	<b>5</b> Payee name BRR Inn of Court	
<b>6</b> Amount (\$) \$684.50	<b>7</b> Payee address; City; State; Zip Code 201 W. 16th Street  Houston, TX 77008	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense BRR Inn of Court membership Fees.
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 04/26/2023	Payee name Bloom and Box	
Amount (\$) \$233.82	Payee address; City; State; Zip Code 2617 Bissonnet St #103  Houston, TX 77005	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Flowers for memorial of court staff family member.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 04/03/2023	Payee name Bloom and Box	
Amount (\$) \$173.20	Payee address; City; State; Zip Code 2617 Bissonnet St #103  Houston, TX 77005	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gifts to the Court Staff.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 2/10 Rpt: 18/30	<b>2</b> FILER NAME Lopez, Gloria (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081836
<b>4</b> Date 04/05/2023	<b>5</b> Payee name Jonathan's the Rub	
<b>6</b> Amount (\$) \$60.88	<b>7</b> Payee address; City; State; Zip Code 9090 Katy Fwy  Houston, TX 77024	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lunch to discuss result of fundraiser and finance report.
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/27/2023	Payee name Le Meridien Dallas	
Amount (\$) \$11.97	Payee address; City; State; Zip Code 13402 Noel Rd  Dallas, TX 75340	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Breakfast while at NCJFCJ Conference 2023.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/24/2023	Payee name Le Meridien Dallas	
Amount (\$) \$64.95	Payee address; City; State; Zip Code 13402 Noel Rd  Dallas, TX 75340	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Overnight Parking for Hotel. NCJFCJ Conference 2023.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F1: Sch: 3/10 Rpt: 19/30	<b>2</b>	FILER NAME Lopez, Gloria (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00081836
<b>4</b>	Date 05/15/2023	<b>5</b>	Payee name Mezban Restaurant & Caterers		
<b>6</b>	Amount (\$) \$1,617.60	<b>7</b>	Payee address; City; State; Zip Code 6655 Harwin Dr. #108  Houston, TX 77036		
<b>8</b>	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 2023 Ramadan CLE and Iftar.		
<b>9</b>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 03/07/2023		Payee name Moreno, Candace (Ms.)		
	Amount (\$) \$35.00		Payee address; City; State; Zip Code 907 Pine Ct  Midland, TX 79705		
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for Donation made to test the online donation page.		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 01/09/2023		Payee name Panting with a Twist		
	Amount (\$) \$418.00		Payee address; City; State; Zip Code 1111 Holman St  Houston, TX 77004		
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Harris County Family Board Judicial Team Building.		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F1: Sch: 4/10 Rpt: 20/30	<b>2</b>	FILER NAME Lopez, Gloria (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00081836
<b>4</b>	Date 06/21/2023	<b>5</b>	Payee name Paypal		
<b>6</b>	Amount (\$) \$1.21	<b>7</b>	Payee address; City; State; Zip Code 2211 North First Street  San Jose, CA 95131		
<b>8</b>	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee from third party for online donation.		
<b>9</b>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 03/08/2023		Payee name Paypal		
	Amount (\$) \$29.39		Payee address; City; State; Zip Code 2211 North First Street  San Jose, CA 95131		
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee from third party for online donation.		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 03/08/2023		Payee name Paypal		
	Amount (\$) \$14.94		Payee address; City; State; Zip Code 2211 North First Street  San Jose, CA 95131		
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee from third party for online donation.		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 5/10 Rpt: 21/30	<b>2</b> FILER NAME Lopez, Gloria (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081836
<b>4</b> Date 03/07/2023	<b>5</b> Payee name Paypal	
<b>6</b> Amount (\$) \$14.94	<b>7</b> Payee address; City; State; Zip Code 2211 North First Street  San Jose, CA 95131	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee from third party for online donation.
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/07/2023	Payee name Paypal	
Amount (\$) \$58.29	Payee address; City; State; Zip Code 2211 North First Street  San Jose, CA 95131	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee from third party for online donation.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/07/2023	Payee name Paypal	
Amount (\$) \$7.72	Payee address; City; State; Zip Code 2211 North First Street  San Jose, CA 95131	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee from third party for online donation.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 6/10 Rpt: 22/30	<b>2</b> FILER NAME Lopez, Gloria (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081836
<b>4</b> Date 03/07/2023	<b>5</b> Payee name Paypal	
<b>6</b> Amount (\$) \$14.94	<b>7</b> Payee address; City; State; Zip Code 2211 North First Street  San Jose, CA 95131	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee from third party for online donation.
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 03/07/2023	Payee name Paypal	
Amount (\$) \$14.94	Payee address; City; State; Zip Code 2211 North First Street  San Jose, CA 95131	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee from third party for online donation.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 03/07/2023	Payee name Paypal	
Amount (\$) \$7.72	Payee address; City; State; Zip Code 2211 North First Street  San Jose, CA 95131	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee from third party for online donation.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 7/10 Rpt: 23/30	<b>2</b> FILER NAME Lopez, Gloria (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081836
<b>4</b> Date 03/07/2023	<b>5</b> Payee name Paypal	
<b>6</b> Amount (\$) \$14.94	<b>7</b> Payee address; City; State; Zip Code 2211 North First Street  San Jose, CA 95131	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee from third party for online donation.
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 03/07/2023	Payee name Paypal	
Amount (\$) \$14.94	Payee address; City; State; Zip Code 2211 North First Street  San Jose, CA 95131	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee from third party for online donation.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 03/07/2023	Payee name Paypal	
Amount (\$) \$14.94	Payee address; City; State; Zip Code 2211 North First Street  San Jose, CA 95131	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee from third party for online donation.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 8/10 Rpt: 24/30	<b>2</b> FILER NAME Lopez, Gloria (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081836
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<b>4</b> Date 03/07/2023	<b>5</b> Payee name Paypal
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<b>6</b> Amount (\$) \$14.94	<b>7</b> Payee address; City; State; Zip Code 2211 North First Street  San Jose, CA 95131
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee from third party for online donation.
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/07/2023	Payee name Paypal
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Amount (\$) \$1.99	Payee address; City; State; Zip Code 2211 North First Street  San Jose, CA 95131
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee from third party for online donation.
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/07/2023	Payee name Paypal
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Amount (\$) \$7.72	Payee address; City; State; Zip Code 2211 North First Street  San Jose, CA 95131
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee from third party for online donation.
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 9/10 Rpt: 25/30	<b>2</b> FILER NAME Lopez, Gloria (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081836
<b>4</b> Date 03/06/2023	<b>5</b> Payee name Paypal	
<b>6</b> Amount (\$) \$9.16	<b>7</b> Payee address; City; State; Zip Code 2211 North First Street  San Jose, CA 95131	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee from third party for online donation.
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/02/2023	Payee name Paypal	
Amount (\$) \$29.39	Payee address; City; State; Zip Code 2211 North First Street  San Jose, CA 95131	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee from third party for online donation.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/31/2023	Payee name Savoir	
Amount (\$) \$210.37	Payee address; City; State; Zip Code 344 Yale St  Houston, TX 77008	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Cost of Dinner for Court Staff.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 10/10 Rpt: 26/30	<b>2</b> FILER NAME Lopez, Gloria (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081836
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<b>4</b> Date 05/02/2023	<b>5</b> Payee name Texas Latinx Judges
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<b>6</b> Amount (\$) \$500.00	<b>7</b> Payee address; City; State; Zip Code P.O. Box 90683  San Antonio, TX 78209
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution for cost of Texas Latinx Judges Day at the Capitol.
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/23/2023	Payee name Trinidad, Angelic (Ms.)
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Amount (\$) \$25.00	Payee address; City; State; Zip Code 18423 White Stallion Ln  Hockley, TX 77447
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement to donor due to the fact that a donation was made outside of the donation time
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule G: Sch: 1/3 Rpt: 27/30	<b>2</b> FILER NAME Lopez, Gloria (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081836
<b>4</b> Date 02/22/2023	<b>5</b> Payee name Aloft Austin Downton	
<b>6</b> Amount (\$) \$552.62  <input type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code 109 East 7th Street  Austin, TX 78701	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Cost of hotel, valet, and fees to stay in Austin for Texas Latinx Judges Day.
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 06/12/2023	Payee name Schedulista	
Amount (\$) \$39.00  <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1419 S Jackson Street, Suite 111  Seattle, WA 98144	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fees	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Cost of third party scheduling service for online scheduling of the Court's docket/hearings/trials.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 05/12/2023	Payee name Schedulista	
Amount (\$) \$39.00  <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1419 S Jackson Street, Suite 111  Seattle, WA 98144	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fees	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Cost of third party scheduling service for online scheduling of the Court's docket/hearings/trials.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule G: Sch: 2/3 Rpt: 28/30	<b>2</b> FILER NAME Lopez, Gloria (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081836
<b>4</b> Date 04/12/2023	<b>5</b> Payee name Schedulista	
<b>6</b> Amount (\$) \$39.00  <input type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code 1419 S Jackson Street, Suite 111  Seattle, WA 98144	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Cost of third party scheduling service for online scheduling of the Court's docket/hearings/trials.
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 03/12/2023	Payee name Schedulista	
Amount (\$) \$39.00  <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1419 S Jackson Street, Suite 111  Seattle, WA 98144	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fees	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Cost of third party scheduling service for online scheduling of the Court's docket/hearings/trials.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 02/12/2023	Payee name Schedulista	
Amount (\$) \$39.00  <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1419 S Jackson Street, Suite 111  Seattle, WA 98144	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fees	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Cost of third party scheduling service for online scheduling of the Court's docket/hearings/trials.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

**SCHEDULE G**

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule G: Sch: 3/3 Rpt: 29/30	<b>2</b> FILER NAME Lopez, Gloria (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081836
<b>4</b> Date 01/12/2023	<b>5</b> Payee name Schedulista	
<b>6</b> Amount (\$) \$39.00  <input type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code 1419 S Jackson Street, Suite 111  Seattle, WA 98144	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Cost of third party scheduling service for online scheduling of the Court's docket/hearings/trials.
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

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

SCHEDULE K

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule K: Sch: 1/1 Rpt: 30/30
<b>2</b> FILER NAME Lopez, Gloria (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081836
<b>4</b> Date 06/20/2023	<b>5</b> Name of person from whom amount is received Texas Comptroller of Public Accounts	<b>8</b> Amount (\$) \$605.00
	<b>6</b> Address of person from whom amount is received; City; State; Zip Code  Austin, TX 78774	
	<b>7</b> Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer Texas Supreme Court Reimbursement of NCJFCJ Conference 2023 in Dallas (Due to Scholarship).	