JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 1

The JC/OH Instruction	Guide explains how to co	mplete this form.	1 Filer ID (Ethics Commis 00083869	,	2 Total pages	filed: 26
3 CANDIDATE /	MS / MRS / MR	FIRST		MI		
OFFICEHOLDER NAME	The Honorable	Veronica			Date Received	USE ONLY
					ELECTRONI	CALLY FILED
	NICKNAME	LAST		SUFFIX	01/16/2024	-
		Rivas-Molloy				
4 CANDIDATE / OFFICEHOLDER MAILING	ADDRESS / PO BOX; A	PT / SUITE #; CIT	Y;	ZIP CODE	Date Hand-delivered	d or Date Postmarked
ADDRESS	REDACTED PER 2	54.031 <u>3, GOV'T (</u>	ODE		Receipt #	Amount
Change of Address					Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST			MI	
TREASURER NAME	Ms.	Amy Bice				
	NICKNAME	LAST			SUFFIX	
		Larson				
6 CAMPAIGN	STREET ADDRESS (NO F	PO BOX PLEASE):	APT	/ SUITE #; CITY;	S	TATE; ZIP CODE
TREASURER				- ,,		,
	REDACTED PER 2	54.031 <u>3, GOV'T (</u>	ODE			
(Residence or Business)						
7 CAMPAIGN		ONE NUMBER	EXTENSION			
TREASURER PHONE	(314) 639-1907					
8 REPORT						
ТҮРЕ	X January 15	30th day before	e election	Runoff		campaign treasurer officeholder only)
	July 15	8th day before	election	Exceeded modified		Attach C/OH-FR)
				reporting limit		····· · · · · · · · · · · · · · · · ·
9 PERIOD COVERED	Month Day Yea			Month Day	Year	
COVERED	07/01/2023	TF	IROUGH	12/31/2023	3	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Yea	и 🗖 Р	rimary	Runoff	Other	
			eneral	Special		
11 OFFICE	OFFICE HELD (if any)		_	12 OFFICE SOUGHT	(if known)	
	Court Of Appeals, Justi	ce Place 3 District	1			
		GO 1	O PAGE 2			
Forms provided by Te	xas Ethics Commission	www.et	hics.state.tx.u	5	Ve	ersion V3.5.1.0bfcfb67

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2 2 of 26

L

13 C / OH NAME	Rivas-Molloy, Veroni	ca (The Honorable)	14 Filer ID 00083869	(Ethics Con	nmission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	ceholder's kn	to support the <i>owledge or</i> o expenditures.			
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL				
		COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASU	IRER NAME		
		COMMITTEE CAMPAIGN TREASU	IRER ADDRESS		
16 CONTRIBUTION	1. TOTAL UNITEM	IZED POLITICAL CONTRIBUTIONS	OTHER THAN PLEDGES LOANS		
TOTALS		ES OF LOANS, OR CONTRIBUTION		\$	0.00
		ICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTE		\$	0.00
EXPENDITURE	· · · · · · · · · · · · · · · · · · ·	IZED POLITICAL EXPENDITURES		\$	0.00
TOTALS					
	4. TOTAL POLI	ICAL EXPENDITURES		\$	18,228.99
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED	AS OF THE LAST DAY OF THE	\$	32,545.67
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCI OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDIN	IG LOANS AS OF THE LAST DAY	\$	5,000.00
17 AFFIDAVIT					
			i, under penalty of perjury, that the a and includes all information required lection Code.		
			The Honorable Veronica Rivas-I	Molloy	
			Signature of Candidate or Officeh	older	
AFFIX NO	TARY STAMP / SEAL AB	OVE			
Sworn to and subs	cribed before me, by the s	aid	, this the		day
Of	, 20, to c	ertify which, witness my hand and sea	al of office.		
Signature of offic	cer administering oath	Printed name of officer adminis	stering oath Title of offic	er administer	ing oath
Forms provided by Te	xas Ethics Commissio	www.ethics.state.tx.u	JS	Version	/3.5.1.0bfcfb67

FORM JC/OH COVER SHEET PG 3

3 of 26

18 FILER NAM Rivas-Moll	(Ethics Commission Filers)						
20 SCHEDULE NAME OF S			SUBTOTAL AMOUNT				
1.	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$				
2.	2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS						
3.	SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$				
4.	SCHEDULE E(J): LOANS (JUDICIAL)		\$				
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$ 17,938.56				
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. X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$ 290.43				
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$				
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	DNS	\$				
12. X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$ 16.98				

SUBTOTALS - JC/OH

		EXPENDITURE CATEGORIES FOR BOX 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:		Filer ID (Ethics Commission Filers)	
-	Sch: 1/17 Rpt: 4/26	Rivas-Molloy, Veronica (The Honorable)	00083869	
4	Date 07/17/2023	5 Payee name Amazon		
6	Amount (\$) \$46.50	Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109		
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Office Supplies Office Supplies				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held	
	Date	Payee name		
	08/03/2023	Amazon		
	Amount (\$) \$248.19	Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109		
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. 'X, officeholder living expense I Law Center	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held	
	Date	Payee name		
	08/03/2023	Amazon		
	Amount (\$) \$10.81	Payee address;City;State;Zip Code410 Terry Ave N		
		Seattle, WA 98109		
	PURPOSE OF EXPENDITURE		itside of Texas. Complete Schedule T. ⁻ X, officeholder living expense S	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held	

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense nmittee Legal Services The Instruction Guide expla	O Po Pi Sá	Office Over Polling Exp Printing Exp Salaries/Wa	ense ges/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	5	· · · · ·		W 10 00.		3	Filer ID (Ethics Commission Filers)
1	Sch: 2/17 Rpt: 5/26	2	Rivas-Molloy, Veronica (The Honor	able)			3	00083869
4	Date	5	Payee name					
	08/03/2023		Amazon					
6	Amount (\$)	7	Payee address; City; St	ate; Z	Zip Coc	е		
	\$47.72		410 Terry Ave N					
			Seattle, WA 98109					
8	PURPOSE	(2)				b) Description		
°	OF	(a)	Category (See Categories listed at the top of this Office Overhead/Rental Expense	schedu	ıle)	b) Description Check if travel	outs	ide of Texas. Complete Schedule T.
	EXPENDITURE		Once Overneau/Rentai Expense					, officeholder living expense
						Office Suppli	es	
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name	Offic	ce soug	ht		Office held
	Date		Payee name					
	08/03/2023		Amazon					
⊢	Amount (\$)			ate: 7	Zip Coc	0		
	\$78.07			ale, z		e		
	\$70.07		410 Terry Ave N					
			Seattle, WA 98109					
	PURPOSE	(a)	Category (See Categories listed at the top of this	s schedul	ıle)	b) Description		
	OF EXPENDITURE		Office Overhead/Rental Expense					ide of Texas. Complete Schedule T.
								, officeholder living expense
						Office Suppli	es	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	Offic	ce soug	ht		Office held
	expenditure to benefit e/or							
	Date		Payee name					
	08/15/2023		Amazon					
	Amount (\$)		Payee address; City; St	ate; Z	Zip Coc	е		
	\$64.94		410 Terry Ave N					
			2					
			Seattle, WA 98109					
	PURPOSE	(a)	Category (See Categories listed at the top of this	schedu	ıle)	b) Description		
	OF EXPENDITURE		Office Overhead/Rental Expense					ide of Texas. Complete Schedule T.
								, officeholder living expense
						Office Suppli	es	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Offic	ce soug	ht		Office held
	onpenditure to benefit C/OI							

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expens Gift/Awards/Memorials I Legal Services The Instruction Gu	Expense	Office Over Polling Exp Printing Exp Salaries/Wa	ense Iges/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	5					3	Filer ID (Ethics Commission Filers)
1	Sch: 3/17 Rpt: 6/26	2	Rivas-Molloy, Veronica (The	e Honorable	e)			00083869
4	Date	5	Payee name					
	09/07/2023		Amazon					
6	Amount (\$)	7	Payee address; City;	State;	; Zip Coo	е		
	\$63.58		410 Terry Ave N					
			Seattle, WA 98109					
8	PURPOSE	(a)	Category (See Categories listed at th	a tan of this ash	undula)	b) Description		
-	OF		Office Overhead/Rental Exp		iedule)		outs	ide of Texas. Complete Schedule T.
	EXPENDITURE					Check if Austir	n, TX	, officeholder living expense
						Office Suppli	es	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office soug	ht		Office held
	Date		Payee name					
	09/07/2023		Amazon					
	Amount (\$)		Payee address; City;	State;	; Zip Coo	е		
	\$15.39		410 Terry Ave N					
			Seattle, WA 98109					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at th Office Overhead/Rental Exp		edule)		ı, TX	ide of Texas. Complete Schedule T. , officeholder living expense
	Complete ONLY if direct expenditure to benefit C/O		andidate/Officeholder name	С	Office soug	ht		Office held
	Date		Payee name					
	09/25/2023		Amazon					
	Amount (\$)		Payee address; City;	State;	; Zip Coo	е		
	\$131.59		410 Terry Ave N					
			Seattle, WA 98109					
	PURPOSE OF	(a)	Category (See Categories listed at th	e top of this sch	edule)	b) Description		
	EXPENDITURE		Event Expense					ide of Texas. Complete Schedule T. , officeholder living expense
						Investiture S		
							~~~	
-	Complete ONLY if direct	<u>ر</u>	andidate/Officeholder name		Office soug	ht		Office held
	expenditure to benefit C/OI			C C	Since Soug			
-								

		EXPENDITURE CATEGORIES FOR BOX 8(a)	
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Poling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)
	Sch: 4/17 Rpt: 7/26	Rivas-Molloy, Veronica (The Honorable)	00083869
4	Date 09/26/2023	Payee name Amazon	
6	Amount (\$) \$383.76	Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109	
8	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense pplies
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	09/26/2023	Amazon	
	Amount (\$) \$108.09	Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109	
	PURPOSE OF EXPENDITURE	<ul> <li>a) Category (See Categories listed at the top of this schedule)</li> <li>b) Description</li> <li>check if travel o</li> </ul>	utside of Texas. Complete Schedule T. TX, officeholder living expense pplies
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	10/18/2023	Amazon	
	Amount (\$) \$62.76	Payee address;City;State;Zip Code410 Terry Ave N	
		Seattle, WA 98109	
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense <b>?S</b>
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense mmittee Legal Services The Instruction Guide explains h	Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)
	Sch: 5/17 Rpt: 8/26		Rivas-Molloy, Veronica (The Honorable	e)			00083869
4	Date	5	Payee name				
	09/25/2023		Any Occasion Tents & Events				
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de		
	\$1,209.00		5714 Bissonnet St,				
			Houston, TX 77081				
8	PURPOSE	(a)			(b) Description		
ľ	OF	(4)	Category (See Categories listed at the top of this sche Event Expense	edule)		outsi	ide of Texas. Complete Schedule T.
	EXPENDITURE		Event Expense		Check if Austin	, тх	, officeholder living expense
					Investiture Ev	/en	t Staging
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name O	ffice sou	yht		Office held
	Date		Payee name				
	11/09/2023		Brasserie 19				
	Amount (\$)		Payee address; City; State;	Zip Co	de		
	\$335.78		1962 W Gray St	2.0 00			
	\$555.15						
			Houston, TX 77019				
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description		
	EXPENDITURE		Food/Beverage Expense				ide of Texas. Complete Schedule T. , officeholder living expense
					Intern Lunch	, 1	, unicendider living expense
	Complete ONLY if direct		Candidate/Officeholder name O	office sour	aht		Office held
	expenditure to benefit C/OI	H					
	Date		Payee name				
	11/17/2023		Bush Seyferth PLLC				
-	Amount (\$)		-	Zip Co			
	\$150.00		5810 Wilson Road	210 00			
	φ130.00						
			Suite 125				
			Humble, TX 77338				
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description		
	EXPENDITURE		Contributions/Donations Made By				ide of Texas. Complete Schedule T.
			Candidate/Officeholder/Political Commi	ittee			, officeholder living expense
						5.01	Donation
_		Ľ	Condidate/Officeholder name	office carry			Office hold
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office soug	JIIL		Office held

		EXPENDITURE CATEGORIES FOR BOX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
		The Instruction Guide explains how to complete this form.			
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)		
	Sch: 6/17 Rpt: 9/26	Rivas-Molloy, Veronica (The Honorable)	00083869		
4	Date 12/11/2023	5 Payee name Caf Ginger			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$47.89	1574 W Gray St Houston, TX 77019			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF       EXPENDITURE         Food/Beverage Expense       Check if travel outside of Texas. Complete Schedule T.         Check if Austin, TX, officeholder living expense       Lunch with former Intern				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held		
	Date	Payee name			
	09/28/2023	Costco			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$158.06	21802 Townsen Blvd W Humble, TX 77338			
_	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Event Expense	outside of Texas. Complete Schedule T. , TX, officeholder living expense atering		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held		
	Date	Payee name			
	09/25/2023	Cuevas, Eliseo			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$500.00	424 S Bender Ave			
		Humble, TX 77338			
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense graphy Deposit		
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held		

			EXPENDITURE CATEGOR	RIES FOR	8 BOX 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		-	Office Ove Polling Exp Printing Ex Salaries/W	pense /ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
_		_	The Instruction Guide explains h	now to col	npiete this form.	-	
1	Total pages Schedule F1: Sch: 7/17 Rpt: 10/26	2	FILER NAME Rivas-Molloy, Veronica (The Honorable	e)		3	Filer ID (Ethics Commission Filers) 00083869
4				- )			
4	Date 10/02/2023	5	Payee name Cuevas, Eliseo				
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de		
	\$1,350.00		424 S Bender Ave				
			Humble, TX 77338				
_	51155005				<b>4</b> X		
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description		de ef Teurse, Oerendede Oelendude T
	EXPENDITURE		Salaries/Wages/Contract Labor				de of Texas. Complete Schedule T. officeholder living expense
					Event Photog		
						9. orp	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Officeholder name O	)ffice sou	ght		Office held
	Date		Payee name				
	07/21/2023		Dainobu USA, Inc.				
			· · · · · · · · · · · · · · · · · · ·	Zin Co	do		
	Amount (\$)			Zip Co	ue		
	\$12.50		129 E 47th St				
			New York, NY 10017				
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description		
	OF EXPENDITURE		Food/Beverage Expense				de of Texas. Complete Schedule T.
						, TX,	officeholder living expense
					Travel Meal		
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name O	Office sou	ght		Office held
	Date		Pavee name				
	10/02/2023		Edgar El Turko DJ				
			5	Zin Co	do		
	Amount (\$)			Zip Co	ue		
	\$300.00		7126 Lawndale				
			Houston, TX 77023				
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description		
	OF EXPENDITURE		Salaries/Wages/Contract Labor	ŕ	Check if travel	outsi	de of Texas. Complete Schedule T.
	EXPENDITORE		-				officeholder living expense
					DJ Performa	nce	for Investiture
	Complete ONLY if direct		Candidate/Officeholder name O	Office sou	ght		Office held
	expenditure to benefit C/OI	4					

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)				
	Sch: 8/17 Rpt: 11/26	Rivas-Molloy, Veronica (The Honorable)	00083869				
4	Date	Payee name					
	10/16/2023	Frost Bank					
6	Amount (\$)	Payee address; City; State; Zip Code					
	\$2.00	811 Main St					
		Ste 100					
		Houston, TX 77002					
8	PURPOSE	Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE		outside of Texas. Complete Schedule T.				
		Bank Fees	n, TX, officeholder living expense				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	12/07/2023	Hispanic Bar Association of Houston					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$50.00	P.O. Box 3611					
		Houston, TX 77253					
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense bership				
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	08/07/2023	Houston Bar Appellate Section					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$10.00	1112 Bagby St.					
		FLB 201					
		Houston, TX 77003					
-	PURPOSE	Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Food/Beverage Expense       Check if travel         Check if Austir       Check if Austir	outside of Texas. Complete Schedule T. n, TX, officeholder living expense ncheon Ticket				
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought	Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains h	Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME		-	3	Filer ID (Ethics Commission Filers)		
-	Sch: 9/17 Rpt: 12/26		Rivas-Molloy, Veronica (The Honorable	e)			00083869		
4	Date	5	Payee name						
	09/01/2023		Houston Bar Appellate Section						
6	Amount (\$)	7	Payee address; City; State;	Zip Co	le				
	\$10.00		1112 Bagby St.						
			FLB 201						
			Houston, TX 77003						
8	PURPOSE	(a)			(b) Description				
ľ	OF	(4)	Category (See Categories listed at the top of this sche Food/Beverage Expense	edule)		outsi	ide of Texas. Complete Schedule T.		
	EXPENDITURE				Check if Austin	, тх	, officeholder living expense		
					Appellate Lu	nch	eon Ticket		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name O	office sou	Jht		Office held		
	Date		Payee name						
	10/10/2023		Houston Bar Appellate Section						
	Amount (\$)		Payee address; City; State;	Zip Co	le				
	\$20.00		1112 Bagby St.						
			FLB 201						
			Houston, TX 77002						
_	PURPOSE	(0)			(b) Description				
	OF	(a)	Category (See Categories listed at the top of this sche Food/Beverage Expense	edule)	(b) Description	outs	ide of Texas. Complete Schedule T.		
	EXPENDITURE		Food/Beverage Expense				, officeholder living expense		
					Appellate Luncheon Ticket				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	Jht		Office held		
_	Date		Payee name						
	11/08/2023		Houston Bar Appellate Section						
	Amount (\$)			Zip Co	10				
	\$20.00		1112 Bagby St.	210 000					
	φ20.00		FLB 201						
			Houston, TX 77002						
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description	outo	ida of Tayloo, Complete Cebedule T		
	EXPENDITURE		Food/Beverage Expense				ide of Texas. Complete Schedule T. , officeholder living expense		
					Appellate Lui				
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Officeholder name O	)ffice sou	ıht		Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Office Overhead/Rental Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)				
	Sch: 10/17 Rpt: 13/26	Rivas-Molloy, Veronica (The Honorable)	00083869				
4	Date 10/03/2023	Payee name Houston Bar Association					
6	Amount (\$)       7       Payee address;       City;       State;       Zip Code         \$520.00       1111 Bagby St.       FLB 200       Houston, TX 77002						
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. I, TX, officeholder living expense orship				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	09/29/2023	Hugo's					
	Amount (\$)     Payee address;     City;     State;     Zip Code       \$3,253.06     1600 Westheimer Rd						
		Houston, TX 77006					
	PURPOSE OF EXPENDITURE	Check if Austin	outside of Texas. Complete Schedule T. h, TX, officeholder living expense atering Deposit				
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	10/02/2023	Hugo's					
	Amount (\$) \$3,253.06	Payee address;City;State;Zip Code1600 Westheimer Rd					
		Houston, TX 77006					
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. h, TX, officeholder living expense atering Balance				
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held				

				EXPENDITUR	E CATEGO	RIES FOR	BOX 8	(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fe Fe G nmittee Le	vent Expense ees bod/Beverage Expens ift/Awards/Memorials egal Services <b>he Instruction Gu</b>	Expense	Office Ove Polling Exp Printing Ex Salaries/W	head/Rent ense pense ages/Contr		ר ר ר	Solicitation/Func Transportation E Travel in District Travel Out of Dis DTHER (enter a	Equipment & strict	Related Expense
_	Tatal warma Oak adula E4			The Instruction Gt	nue explains		ipiete tri					
1	Total pages Schedule F1: Sch: 11/17 Rpt: 14/26			Veronica (The	e Honorable	e)				-iler ID 00083869	(Ethics (	Commission Filers)
4	Date	5	Payee name									
	09/28/2023		Instacart									
6	Amount (\$) \$193.53		Payee address 50 Beale Stre San Francisc	et	State;	; Zip Co	le					
8	PURPOSE	(a)	Category (Soo	Categories listed at th	an top of this sch	uodulo)	(b) Des	cription				
-	OF EXPENDITURE		Event Expens			leddie)		Check if travel o	, TX, o	e of Texas. Com fficeholder living NG	•	iule T.
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Office	holder name	C	Office sou	lht			Office he	eld	
	Date		Payee name									
	09/29/2023		Instacart									
	Amount (\$)		Payee address	; City;	State;	; Zip Co	le					
	\$193.53		50 Beale Stre	et		r I						
			San Francisc	o, CA 94105								
	PURPOSE OF EXPENDITURE		Category (See Event Expens	Categories listed at th	ne top of this sch	edule)		Check if travel o	, TX, o	e of Texas. Com fficeholder livinç <b>ES</b>		tule T.
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Office	holder name	C	Office sou	lht			Office he	eld	
	Date		Payee name									
	09/07/2023	I	Irma's Restau	ırant								
	Amount (\$) \$138.83	I	Payee address 1475 Texas A	-	State;	; Zip Co	le					
			Houston, TX	77002								
	PURPOSE OF EXPENDITURE		Category _{(See} Food/Beverag	Categories listed at th ge Expense	ne top of this sch	edule)		Check if travel of		e of Texas. Com fficeholder living		dule T.
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Office	holder name	C	Dffice sou	lht			Office he	eld	

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2 EII ER NAME	<b>3</b> Filer ID (Ethics Commission Filers)			
-	Sch: 12/17 Rpt: 15/26	Rivas-Molloy, Veronica (The Honorable)	00083869			
4	Date	5 Payee name				
	07/12/2023	JW Marriott Main Kitchen				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$163.48	806 Main St				
		Houston, TX 77002				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE		outside of Texas. Complete Schedule T.			
	EXPENDITORE		TX, officeholder living expense			
		Staff Lunch				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	10/19/2023	JW Marriott Main Kitchen				
⊢						
	Amount (\$)	Payee address; City; State; Zip Code				
	\$80.20	806 Main St				
		Houston, TX 77002				
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	07/24/2023	LGA Eli Zabar DD				
-						
	Amount (\$)					
	\$29.36	9400 Ditmars Blvd				
		East Elmhurst, NY 11369				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF		outside of Texas. Complete Schedule T.			
	EXPENDITURE		TX, officeholder living expense			
		Travel Meal				
-	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held			
	expenditure to benefit C/Oł	6				

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		-	Office Ov Polling E Printing B Salaries/	verhea xpens Expens Wages	se s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
_	Tatal same Oak adula E1.		The Instruction Guide explain		ompi	ete this form.		Film ID (Ethics Commission Films)
1	Total pages Schedule F1: Sch: 13/17 Rpt: 16/26	2	FILER NAME Rivas-Molloy, Veronica (The Honora	ble)			3	Filer ID       (Ethics Commission Filers)         00083869
4	Date	5	Payee name					
	07/20/2023		Los Tacos No. 1					
6	Amount (\$) \$28.46	7	Payee address; City; Sta 75 9th Ave	te; Zip C	ode			
			New York, NY 10011					
8	PURPOSE	(a)	Category (See Categories listed at the top of this s	schedule)	(b)	Description		
	OF EXPENDITURE		Food/Beverage Expense					ide of Texas. Complete Schedule T.
							, TX,	, officeholder living expense
						Travel Meal		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	Office so	l ught			Office held
	Date		Payee name					
	10/02/2023		Lulu					
	Amount (\$)		Payee address; City; Sta	te; Zip C	ode			
	\$105.00		7708 Avenue F	ie, zip c	oue			
	\$105.00							
			Houston, TX 77012					
	PURPOSE	(a)	Category (See Categories listed at the top of this s	schedule)	(b)	Description		
	OF EXPENDITURE		Event Expense					ide of Texas. Complete Schedule T.
								, officeholder living expense
						Investiture Ca	atei	nng
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	Office so	ught			Office held
	Date		Payee name					
	09/29/2023		Mariachis					
	Amount (\$)		Payee address; City; Sta	te; Zip C	ode			
	\$1,000.00		8236 Lenore St					
			Houston, TX 77017		ĩ			
	PURPOSE OF	(a)	Category (See Categories listed at the top of this s	schedule)	(b)	Description		
	EXPENDITURE		Salaries/Wages/Contract Labor					ide of Texas. Complete Schedule T. , officeholder living expense
								rmance for Investiture
	Complete ONLY if direct		Candidate/Officeholder name	Office so	ught			Office held
	expenditure to benefit C/OI				5			

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials E Legal Services The Instruction Gui	xpense	Office Overh Polling Expe Printing Exp Salaries/Wa	ense ges/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FI	LER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 14/17 Rpt: 17/26		ivas-Molloy, Veronica (The	Honorable	e)			00083869
4	Date	<b>5</b> Pa	ayee name					
	07/19/2023	M	orandi Restaurant					
6	Amount (\$)	<b>7</b> Pa	ayee address; City;	State;	; Zip Cod	9		
	\$58.69	2	L1 Waverly Pl					
		N	ew York, NY 10014					
0	DUDDOCE							
8	PURPOSE OF		ategory (See Categories listed at the	top of this sche	edule)	Description Check if travel	outsi	de of Texas. Complete Schedule T.
	EXPENDITURE	F	ood/Beverage Expense					officeholder living expense
						Travel Meal		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		ndidate/Officeholder name	C	Office soug	nt		Office held
	Date	Pa	ayee name					
	07/19/2023		ami Nori					
⊢	Amount (\$)		ayee address; City;	Stato:	; Zip Cod	2		
	\$69.24		3 Carmine St	State,	, Zip Cou	5		
	\$09.24	3.	S Calline St					
		N	ew York, NY 10014					
	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the bod/Beverage Expense	top of this sch	edule) (			de of Texas. Complete Schedule T. . officeholder living expense
	Complete ONLY if direct expenditure to benefit C/O		ndidate/Officeholder name	C	Dffice soug	nt		Office held
F	Date	Pa	ayee name					
	09/27/2023		ational Association of Wom	ien				
	Amount (\$)	Pi	ayee address; City;	State [.]	; Zip Cod	2		
	\$150.00		.O. Box 3363	otato,	, <u>Lip</u> 000			
	\$100.00	•	O. DOX 0000					
		N	arrenton, VA 20188					
	PURPOSE	<b>(a)</b> C	ategory (See Categories listed at the	top of this sche	iedule) (	b) Description		
	OF EXPENDITURE		ontributions/Donations Mac		. I			de of Texas. Complete Schedule T.
		С	andidate/Officeholder/Politi	cal Comm	nittee			officeholder living expense
						Event Spons	ors	nıp
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	C	Office soug	nt		Office held
⊢								

		EXPENDITURE CATEGORIES FOR BOX 8(a)	
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Sabadula E1:	· · · · · · · · · · · · · · · · · · ·	2 Eiler ID (Ethics Commission Eilers)
1	Total pages Schedule F1: Sch: 15/17 Rpt: 18/26	Rivas-Molloy, Veronica (The Honorable)	3         Filer ID         (Ethics Commission Filers)           00083869         00083869
4	Date 09/25/2023	5 Payee name Overshown, Chloe	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$150.00	13830 Canyon Hill St #133 Houston, TX 77083	
	DUDDOCE		
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense for Investiture
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	09/29/2023	Party City	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$277.01	20542 US-59	
		Humble, TX 77338	
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense IpplieS
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	10/02/2023	Patron Grill	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$500.00	9710 Farm to Market 1960 Bypass Rd W	
		Humble, TX 77338	
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense ttering
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Imittee Legal Services The Instruction Guide explains	Office Ove Polling Ex Printing E Salaries/W	xpense Vages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	· · · · ·			3	Filer ID (Ethics Commission Filers)
1	Sch: 16/17 Rpt: 19/26	2	Rivas-Molloy, Veronica (The Honorab	le)			00083869
4	Date	5	Payee name				
	09/29/2023		Specs				
6	Amount (\$)	7	Payee address; City; State	e; Zip Co	ode		
	\$110.11		19322 US-59				
			Humble, TX 77338				
_	BUBBOOF	(-)			(L)		
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this sc	hedule)	(b) Description		aida of Toylog, Complete Cabadula T
	EXPENDITURE		Event Expense				side of Texas. Complete Schedule T. X, officeholder living expense
					Investiture		
						0 0110	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Officeholder name	Office sou	l ıght		Office held
-	Date		Payee name				
	09/29/2023		Tacos Monce Rivas				
	Amount (\$)			e; Zip Co	ode		
	\$150.00		7708 Avenue F				
			Houston, TX 77012				
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sci Event Expense	hedule)	Check if Au	stin, TX	side of Texas. Complete Schedule T. X, officeholder living expense ering Deposit
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name	Office sou	ıght		Office held
	Date		Payee name				
	09/29/2023		Tacos Monce Rivas				
	Amount (\$)		Payee address; City; State	; Zip Co	ode		
	\$700.00		7708 Avenue F				
			Houston, TX 77012				
	PURPOSE	(a)	Category (See Categories listed at the top of this sci	hedule)	(b) Description		
	OF EXPENDITURE		Event Expense				side of Texas. Complete Schedule T.
							X, officeholder living expense
					investiture	Cate	ering Balance
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	Office sou	ight		Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Imittee Legal Services The Instruction Guide expla	Office Pollin Printii Salari	Overhea g Expens ng Exper es/Wage	ise s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
-	Tatal pages Caledula F1		· · ·		comp			Filer ID (Ethics Commission Filers)
L.	Total pages Schedule F1: Sch: 17/17 Rpt: 20/26		Rivas-Molloy, Veronica (The Honor	able)			3	Filer ID       (Ethics Commission Filers)         00083869
4	Date	5	Payee name					
	10/02/2023		Target					
6	Amount (\$) \$86.60		Payee address; City; St 2580 Shearn St Houston, TX 77007	ate; Zip	Code			
8	PURPOSE	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description		
	OF EXPENDITURE		Office Overhead/Rental Expense			Check if travel	ı, TX,	de of Texas. Complete Schedule T. . officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	Office	sought			Office held
	Date		Payee name					
	07/24/2023		Walker Hotel					
	Amount (\$)		Payee address; City; St	ate; Zip	Code			
	\$1,279.80		52 W 13th St New York, NY 10011					
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this Travel Out of District	schedule)	(b)			de of Texas. Complete Schedule T. officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	Office	sought			Office held
	Date		Payee name					
	07/24/2023		Walker Hotel					
	Amount (\$) \$11.97		Payee address; City; St 52 W 13th St	ate; Zip	Code			
			New York, NY 10011					
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this Food/Beverage Expense	schedule)	(b)			de of Texas. Complete Schedule T. officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	Office	sought			Office held

F	POLITICAL EX	PENDITURES FROM PERSON	IAL FUNDS	SCHEDULE G		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office O Food/Beverage Expense Polling E Gift/Awards/Memorials Expense Printing P	payment/Reimbursement verhead/Rental Expense xpense Expense Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
	otal pages Schedule G: Sch: 1/4 Rpt: 21/26	2 FILER NAME Rivas-Molloy, Veronica (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00083869		
4 C	Date 07/16/2023	5 Payee name Uber				
	Amount (\$) \$29.55 Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1515 Third Street				
8	PURPOSE OF EXPENDITURE	San Francisco, CA 94158 (a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense r Judicial Seminar		
e	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
F	Date	Payee name				
	)7/16/2023	Uber				
	Amount (\$) \$60.36	Payee address; City; State; Zip C 1515 Third Street	ode			
	Reimbursement from           political contributions           intended	San Francisco, CA 94158				
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel Out of District	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
e	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
	Date 07/16/2023	Payee name Uber				
A	Amount (\$) \$11.36	Payee address; City; State; Zip C 1515 Third Street	ode			
	Reimbursement from political contributions intended	San Francisco, CA 94158				
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel Out of District	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Chicial Seminar		
e	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		

	POLITICAL EX	PENDITURES FROM PERSON	AL FUNDS SCHEDULE G				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ove Food/Beverage Expense Polling Exp Gift/Awards/Memorials Expense Printing Exp	ayment/Reimbursement     Solicitation/Fundraising Expense       rhead/Rental Expense     Transportation Equipment & Related Expense       pense     Travel in District       gees/Contract Labor     OTHER (enter a category not listed above)				
1	Total pages Schedule G: Sch: 2/4 Rpt: 22/26	2 FILER NAME Rivas-Molloy, Veronica (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00083869				
4	Date 07/17/2023	5 Payee name Uber					
6	Amount (\$) \$10.96 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1515 Third Street San Francisco, CA 94158					
8	PURPOSE OF EXPENDITURE	Travel Out of District	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense NY Travel for Judicial Seminar				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held				
F	Date	Payee name					
L	07/18/2023	Uber					
⊢			do				
	Amount (\$) \$11.98 Reimbursement from political contributions	Payee address; City; State; Zip Co 1515 Third Street	ue				
L	X political contributions intended	San Francisco, CA 94158					
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel Out of District	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense NY Travel for Judicial Seminar				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held				
	Date 07/19/2023	Payee name Uber					
	Amount (\$) \$13.94	Payee address;City;State;Zip Co1515 Third Street	de				
	X Reimbursement from political contributions intended	San Francisco, CA 94158					
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel Out of District	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense NY Travel for Judicial Seminar				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held				
F							

POLITICAL EX	(PENDITURES FROM PERSON	IAL FUNDS	SCHEDULE G			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y Gift/Awards/Memorials Expense Printing I	payment/Reimbursement verhead/Rental Expense xpense Expense Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1 Total pages Schedule G: Sch: 3/4 Rpt: 23/26	2 FILER NAME Rivas-Molloy, Veronica (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083869			
4 Date 07/19/2023	5 Payee name Uber					
6 Amount (\$) \$25.92 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1515 Third Street San Francisco, CA 94158					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held			
Date	Payee name					
07/20/2023	Uber					
Amount (\$) \$19.91	Payee address; City; State; Zip C 1515 Third Street	ode				
X Reimbursement from political contributions intended	San Francisco, CA 94158					
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel Out of District	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense dicial Seminar			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held			
Date 07/20/2023	Payee name Uber					
Amount (\$) \$26.95	Payee address;City;State; Zip C1515 Third Street	ode				
X Reimbursement from political contributions intended	San Francisco, CA 94158					
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel Out of District	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held			

POLITICAL EX	(PENDITURES FROM PERSON	IAL FUNDS	SCHEDULE G			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing E	payment/Reinbursement verhead/Rental Expense xpense Expense Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1 Total pages Schedule G: Sch: 4/4 Rpt: 24/26	2 FILER NAME Rivas-Molloy, Veronica (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00083869			
4 Date 07/21/2023	5 Payee name Uber					
6 Amount (\$) \$13.68 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1515 Third Street San Francisco, CA 94158					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held			
Date	Payee name					
07/21/2023	Uber					
Amount (\$) \$59.95	Payee address; City; State; Zip C	ode				
Reimbursement from political contributions intended	San Francisco, CA 94158					
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel Out of District	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held			
Date 08/10/2023	Payee name Uber					
Amount (\$) \$5.87	Payee address; City; State; Zip C 1515 Third Street	ode				
Reimbursement from political contributions intended	San Francisco, CA 94158					
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel In District	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held			

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

SCHEDULE K

The Instruc	ction Guide explains how to complete this form.	1 Total pages Schedule K: Sch: 1/2 Rpt: 25/26		
2 FILER NAME		3 Filer ID (Ethics Commission Filers	s)	
	Rivas-Molloy, Veronica (The Honorable) 00083			
4 Date 07/17/2023	5 Name of person from whom amount is received Frost Bank	8 Amount (\$) \$3	3.64	
	6 Address of person from whom amount is received; City; State; Zip Code			
	Houston, TX 77002 7 Purpose for which amount is received Check if p			
	political contribution returned to filer			
Date	Name of person from whom amount is received	Amount (\$)		
08/14/2023	Frost Bank	\$2	2.99	
	Address of person from whom amount is received; City; State; Zip Code Houston, TX 77002			
		political contribution returned to filer		
	IOD Interest			
Date	Name of person from whom amount is received	Amount (\$)		
09/15/2023	Frost Bank		3.37	
	Address of person from whom amount is received; City; State; Zip Code			
	Houston, TX 77002			
	Purpose for which amount is received Check if p	political contribution returned to filer		
Date	Name of person from whom amount is received	Amount (\$)	0	
10/16/2023	Frost Bank		2.73	
	Address of person from whom amount is received; City; State; Zip Code			
	Houston, TX 77002			
		political contribution returned to filer	_	
	IOD Interest			
Date	Name of person from whom amount is received	Amount (\$)		
11/17/2023	Frost Bank	\$2	2.10	
	Address of person from whom amount is received; City; State; Zip Code			
	Houston, TX 77002			
		political contribution returned to filer		
	IOD Interest			

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

SCHEDULE K

	The Instruction Guide explains how to complete this form					ages Schedule K: /2 Rpt: 26/26
2						(Ethics Commission Filers)
		Rivas-Molloy, Veronica (The Honorable) 0008				-
4	Date	5	Name of person from whom amount is received			8 Amount (\$)
	12/14/2023		Frost Bank			\$2.15
		6	Address of person from whom amount is received; City; State; Zip Code			
			Houston, TX 77002			
		7		ck if politi	cal contr	I ibution returned to filer
			IOD Interest			