# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

# FORM C/OH COVER SHEET PG 1

The C/OH Instruction	Guide explains how to complet	e this form.	1 Filer ID (Ethics Commis 00087889	· · ·	2 Total page	s filed: 32
3 CANDIDATE /	MS / MRS / MR	FIRST		MI		E USE ONLY
OFFICEHOLDER NAME		Carlos			Date Received	EUSEUNLT
						ICALLY FILED
					02/05/2024	
	-	LAST		SUFFIX	02/03/2024	
		Lopez				
4 CANDIDATE /	ADDRESS / PO BOX; APT /	SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivere	ed or Date Postmarked
OFFICEHOLDER MAILING	941 Timberwood Lane					
ADDRESS					Receipt #	Amount
Change of Address	Uvalde, TX 78801					
					Date Processed	
					Date Imaged	
					Date imageu	
5 CAMPAIGN	MS / MRS / MR F	IRST		MI		
TREASURER		Adrianna T.				
NAME	,					
	NICKNAME L	AST		SUFFIX		
		Granados		JUFFIX		
		Jianauus				
			4.07			
6 CAMPAIGN TREASURER	STREET ADDRESS (NO PO B	OX PLEASE);	AP	T / SUITE #; CITY;		STATE; ZIP CODE
ADDRESS	305 Studer Circle					
(Residence or Business)						
	Uvalde, TX 78801					
7 CAMPAIGN	AREA CODE PHONE	NUMBER I	EXTENSION			
TREASURER	(830) 275-2785					
PHONE	(000) 210 2100					
8 REPORT						
TYPE	January 15 X	30th day before	e election	Runoff		campaign treasurer
					-	(officeholder only)
	July 15	8th day before	election	Exceeded modified reporting limit	Final Report (	Attach C/OH-FR)
9 PERIOD COVERED	Month Day Year			Month Day	Year	
COVERED	01/01/2024	11	IROUGH	01/25/2024	4	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year 03/05/2024	XP	rimary	Runoff	Other	
	03/05/2024		General	Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT	(if known)	
	County Party Chair			State Representa	ative District 8	0
	1			1		
		601	O PAGE 2			
Forms provided by Te	exas Ethics Commission	www.et	hics.state.tx.u	S	Ve	ersion V3.5.1.9000c471

### CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

### FORM C/OH COVER SHEET PG 2 2 of 32

13 C / OH NAME	Lopez, Carlos		14 Filer ID 00087889	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expendition These expenditures may have been made without d officeholders are required to report this information	the candidate's or office	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS	
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.00
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	S)	<b>\$</b> 1,383.55
EXPENDITURE TOTALS		IZED POLITICAL EXPENDITURES		<b>\$</b> 0.00
		CAL EXPENDITURES		<b>\$</b> 10,169.68
CONTRIBUTION BALANCE	REPORTING PE			<b>\$</b> 335.41
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOANS AS	S OF THE LAST DAY	<b>\$</b> 0.00
<b>17</b> AFFIDAVIT		I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.		
			Carlos Lopez	
		Signature o	f Candidate or Officeho	lder
AFFIX NO	TARY STAMP / SEAL AB	OVE		
Sworn to and subso	cribed before me, by the s	aid	, this the	day
of	, 20, to c	ertify which, witness my hand and seal of office.		
Signature of offic	cer administering	Printed name of officer administering	Title of office	r administering oath
orms provided by Te	xas Ethics Commissior	www.ethics.state.tx.us		Version V3.5.1.9000c47

SUBTOTALS - C/OH	C	FORM C/OH OVER SHEET PG 3 3 of 32
18 FILER NAME Lopez, Carlos	19 Filer ID 00087889	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT	
1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		<b>\$</b> 1,383.55
2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 0.00
3. X SCHEDULE B: PLEDGED CONTRIBUTIONS		\$ 0.00
4. X SCHEDULE E: LOANS		\$ 0.00
5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	<b>\$</b> 3,578.97
6. X SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$ 0.00
7. X SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$ 0.00
8. X SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 0.00
9. X SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		<b>\$</b> 6,590.71
10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$

MONET	ARY POLITICAL CONTRIBU	TIONS	SCHEDULE A1
The Instruc	ction Guide explains how to complete th	his form.	1 Total pages Schedule A1: Sch: 1/10 Rpt: 4/32
2 FILER NAME Lopez, Carlos	5		3 Filer ID (Ethics Commission Filers) 00087889
01/20/2024	<ul> <li>5 Full name of contributor out-of-state PAC Alvarez, Jose</li> <li>6 Contributor address; City; State; Zip Code</li> </ul>		7 Amount of Contribution (\$) \$10.00
	Jupiter, FL 33477		
Principal occup	pation / Job title (See Instructions)	9 Employer (See Instructions	5)
Date 01/18/2024	Ardington, Amy	(ID#:)	Amount of Contribution (\$) 
Principal occup	Bellville, TX 77418 Dation / Job title (See Instructions)	s)	
Date 01/19/2024	Full name of contributor out-of-state PAC Berman, Betsy Contributor address; City; State; Zip Code	(ID#:)	Amount of Contribution (\$) 
Principal occup	Alanta, GA 30306 pation / Job title (See Instructions)	Employer (See Instructions	s)
Date 01/14/2024	Full name of contributor out-of-state PAC Bernhardt, Lara Contributor address; City; State; Zip Code	(ID#:)	Amount of Contribution (\$) \$20.00
	Bedford, TX 76022		
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	s)
Date 01/19/2024	Full name of contributor out-of-state PAC Boriack, John Contributor address; City; State; Zip Code		Amount of Contribution (\$) 
Dringingloggur	Austin, TX 78759	Employer (See Instruction	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	5)

MONET	ARY POLITICAL (	DNS	SCHEDULE A1	
The Instruc	ction Guide explains how	v to complete this f	form.	1 Total pages Schedule A1: Sch: 2/10 Rpt: 5/32
2 FILER NAME Lopez, Carlos	S			3 Filer ID (Ethics Commission Filers) 00087889
01/19/2024			7 Amount of Contribution (\$) \$10.00	
	San Fransico, CA 94107			
B Principal occup	pation / Job title (See Instructions	3)	9 Employer (See Instructions	L;)
Date 01/19/2024	Full name of contributor Bueno, Craig Contributor address; City; St	out-of-state PAC (ID#:_	)	Amount of Contribution (\$) \$20.00
Principal occup	Waylivermore, CA 94550         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Date       Full name of contributor       out-of-state PAC (ID#:)         01/11/2024       Cassidy, James       Contributor address; City; State; Zip Code         Incorinth, TX 76210       Incorinth, TX 76210		;)	
			Amount of Contribution (\$) \$20.00	
Principal occup	pation / Job title (See Instructions	5)	Employer (See Instructions	L
Date 01/19/2024	Full name of contributor Cohen, Michael Contributor address; City; St Reseda Ranch, CA 91335	tate; Zip Code	)	Amount of Contribution (\$) \$5.00
Principal occup	pation / Job title (See Instructions		Employer (See Instructions	<u>ا</u> پ
Date 01/19/2024	Full name of contributor Costigan, Cheryl Contributor address; City; St	out-of-state PAC (ID#:		Amount of Contribution (\$) \$5.00
Driveinel ecour	Spirit Lake, ID 83869			
Principal occup	pation / Job title (See Instructions	\$)	Employer (See Instructions	;)

MONET	ARY POLITICAL CONTRIBUTIO	ONS	SCHEDULE A1
The Instruc	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 3/10 Rpt: 6/32
2 FILER NAME Lopez, Carlo	s		3 Filer ID (Ethics Commission Filers) 00087889
01/22/2024	<ul> <li>5 Full name of contributor out-of-state PAC (ID# Crary, Jill</li> <li>6 Contributor address; City; State; Zip Code</li> </ul>		7 Amount of Contribution (\$) \$100.00
	San Diego, CA 92117		
8 Principal occur	pation / Job title (See Instructions)	9 Employer (See Instructions	;)
Date 01/15/2024	Full name of contributor out-of-state PAC (ID# Daniels, Laurie Contributor address; City; State; Zip Code	<u>+:)</u>	Amount of Contribution (\$) \$25.00
Principal occur	Dallas , TX 75287         Principal occupation / Job title (See Instructions)         Employer (See Instructions)         Date         Full name of contributor         Out-of-state PAC (ID#:)         Daniels, Laurie         Contributor address; City; State; Zip Code         Dallas , TX 75287		\$)
			Amount of Contribution (\$) \$25.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>
Date 01/22/2024	Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) \$20.00
Principal occu	Universal City, TX 78148 pation / Job title (See Instructions)	Employer (See Instructions	3)
Date 01/19/2024	Full name of contributor out-of-state PAC (ID# Eckert, Ingrid Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$100.00
Principal occur	Santa Monica, CA 90403 pation / Job title (See Instructions)	Employer (See Instructions	s)
			,

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 4/10 Rpt: 7/32 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Lopez, Carlos 00087889 Date 4 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 01/17/2024 Farr, Gerald \$20.00 6 Contributor address; City; State; Zip Code San Marcos, TX 78666 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 01/19/2024 Farrar, Vicki \$5.00 Contributor address; City; State; Zip Code Garden City, ID 83714 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 01/17/2024 Gaeta, Marilyn \$20.00 Contributor address; City; State; Zip Code San Antonio, TX 78249 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 01/17/2024 \$100.00 Garza, Lupe Contributor address; City; State; Zip Code Driftwood, TX 78619 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 01/17/2024 \$20.00 Godfrey, Justin Contributor address; City; State; Zip Code Austin, TX 78721 Principal occupation / Job title (See Instructions) Employer (See Instructions)

aw, Annette	)	<ol> <li>Total pages Schedule A1: Sch: 5/10 Rpt: 8/32</li> <li>Filer ID (Ethics Commiss 00087889</li> <li>Amount of Contribution (\$)</li> </ol>	
aw, Annette htributor address; City; State; Zip Code		00087889	
aw, Annette htributor address; City; State; Zip Code		7 Amount of Contribution (\$)	
hattan Beach, CA 90266	Date       5 Full name of contributor       out-of-state PAC (ID#:)         D1/19/2024       Graw, Annette         6 Contributor address; City; State; Zip Code		
Job title (See Instructions)	9 Employer (See Instructions	s)	
aydon, Robert		Amount of Contribution (\$)	\$10.00
n Antonio, TX 78248 Job title (See Instructions)	Employer (See Instructions	ls)	
Date       Full name of contributor       out-of-state PAC (ID#:)         01/19/2024       Haines, Randall         Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$10.55
Job title (See Instructions)	Employer (See Instructions	s)	
dge, Betty		Amount of Contribution (\$)	\$5.00
nverse, TX 78109 Job title (See Instructions)	Employer (See Instructions	lis)	
		-	
name of contributor out-of-state PAC (ID#: kson, Rogers tributor address; City; State; Zip Code	)	Amount of Contribution (\$)	\$25.00
e Pegram, TN 37143			
Job title (See Instructions)	Employer (See Instructions	s)	
	aydon, Robert  httributor address; City; State; Zip Code  h Antonio, TX 78248 Job title (See Instructions)  name of contributor name of contributor name of contributor  name of	Aydon, Robert  tributor address; City; State; Zip Code  Antonio, TX 78248  Job title (See Instructions)  Imame of contributor  name of	aydon, Robert   atributor address; City; State; Zip Code   a Antonio, TX 78248   Job title (See Instructions)   Iname of contributor   out-of-state PAC (ID#:)   Amount of Contribution (\$)   stin, TX 78750   Job title (See Instructions)   Employer (See Instructions)   aname of contributor   out-of-state PAC (ID#:)   Amount of Contribution (\$)   stin, TX 78750   Job title (See Instructions)   Iname of contributor   out-of-state PAC (ID#:)   Amount of Contribution (\$)   tributor address; City; State; Zip Code   nverse, TX 78109   Job title (See Instructions)   Employer (See Instructions)   Imme of contributor   out-of-state PAC (ID#:)   Amount of Contribution (\$)   itributor address; City; State; Zip Code   name of contributor   out-of-state PAC (ID#:)   Amount of Contribution (\$)   itributor address; City; State; Zip Code   name of contributor   out-of-state PAC (ID#:)   Amount of Contribution (\$)   kson, Rogers   ttributor address; City; State; Zip Code   e Pegram, TN 37143

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 6/10 Rpt: 9/32 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Lopez, Carlos 00087889 Date 4 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 01/19/2024 Lucas, Owen \$50.00 6 Contributor address; City; State; Zip Code Carmel, IN 46033 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 01/22/2024 \$100.00 Montalvo, Jose Contributor address; City; State; Zip Code Del Rio, TX 78840 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 01/12/2024 Moore, Ellen \$20.00 Contributor address; City; State; Zip Code Houston, TX 77079 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 01/05/2024 \$30.00 Ovalle, Diego Contributor address; City; State; Zip Code Uvalde, TX 78801 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 01/19/2024 \$50.00 Padiana, Ace Contributor address; City; State; Zip Code Houston, TX 77005 Principal occupation / Job title (See Instructions) Employer (See Instructions)

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 7/10 Rpt: 10/32 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Lopez, Carlos 00087889 Date 4 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 01/01/2024 Perez, Mario \$50.00 6 Contributor address; City; State; Zip Code Fort Worth, TX 76110 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 01/20/2024 \$10.00 Resendez, Joe Contributor address; City; State; Zip Code Houston, TX 77062 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 01/19/2024 Rogers, Pamela \$10.00 Contributor address; City; State; Zip Code Santa Fe, NH 87505 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 01/22/2024 \$50.00 Rosenthal, Karen Contributor address; City; State; Zip Code Claremont, CA 91711 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 01/06/2024 \$20.00 Ruiz, Anthony Contributor address; City; State; Zip Code San Antonio, TX 78254 Principal occupation / Job title (See Instructions) Employer (See Instructions)

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 8/10 Rpt: 11/32 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Lopez, Carlos 00087889 Date 4 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 01/07/2024 Schram, Mark \$25.00 6 Contributor address; City; State; Zip Code Austin, TX 78736 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 01/19/2024 \$20.00 Segura, Bernadette Contributor address; City; State; Zip Code El Paso, TX 79903 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 01/21/2024 Shellist, Dan \$10.00 Contributor address; City; State; Zip Code Houston, TX 77056 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 01/09/2024 Silguero, Jose \$15.00 Contributor address; City; State; Zip Code San Marcos, TX 78666 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 01/17/2024 \$100.00 Smith, Jason Contributor address; City; State; Zip Code Fort Worth, TX 76104 Principal occupation / Job title (See Instructions) Employer (See Instructions)

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 9/10 Rpt: 12/32 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Lopez, Carlos 00087889 Date 4 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 01/05/2024 Soulas, Justin \$50.00 6 Contributor address; City; State; Zip Code Laredo, TX 78043 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 01/14/2024 \$10.00 Strayn, Darlene Contributor address; City; State; Zip Code Chandler, TX 75758 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 01/19/2024 Strayn, Darlene \$20.00 Contributor address; City; State; Zip Code Chandler, TX 75758 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 01/19/2024 \$25.00 Vogel, Sally Contributor address; City; State; Zip Code Selacy, WA 98503 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 01/19/2024 \$2.00 Weinstein, David Contributor address; City; State; Zip Code Santa Monica, CA 90403 Principal occupation / Job title (See Instructions) Employer (See Instructions)

### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 10/10 Rpt: 13/32 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Lopez, Carlos 00087889 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 01/07/2024 Weyrens, Sharon \$10.00 6 Contributor address; City; State; Zip Code Dallas, TX 75243 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 01/19/2024 \$50.00 Williams, Mike Contributor address; City; State; Zip Code Kodiak, AR 99616 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 01/21/2024 Wright, Benjamin \$10.00 ..... Contributor address; City; State; Zip Code Fort Worth, TX 76123 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 01/17/2024 \$20.00 Zephie, Darin Contributor address; City; State; Zip Code San Angelo, TX 76904 Principal occupation / Job title (See Instructions) Employer (See Instructions)

PLEDGED CONTRIBU	JTIONS		SCHEDULE	EB	
The Instruction Guide ex	The Instruction Guide explains how to complete this form.				
2 FILER NAME Lopez, Carlos			3 Filer ID (Ethics Commission Filers) 00087889		
<sup>4</sup> TOTAL OF UNITEMIZED PLED	GES		\$	0.00	
5 Date 6 Full name of pledgor 7 Pledgor Address;	out-of-state PAC (ID#:		) 8 Amount of 9 In-kind description pledge (\$) (If applicable)	1	
10 Drinning accuration / Job title (Coo loot	wettoool		Check if travel outside of Texas. Complete S	chedule T.	
<b>10</b> Principal occupation / Job title (See Inst	ructions)	11 Employer (See Inst	rructions)		

LOANS		SCHEDU	JLE E		
The Instruction Guide explains how to complete this form.	ages Schedule E: /1 Rpt: 15/32				
2 FILER NAME Lopez, Carlos					
<sup>4</sup> TOTAL OF UNITEMIZED LOANS		\$	0.00		
5 Date of loan 7 Name of lender out-of-state PAC (ID#:	)	9 Loan Amount (\$	)		
6 Is lender a 8 Lender address; City; State; Zip Code financial institution?		10 Interest Rate			
		<b>11</b> Maturity Date			
<b>12</b> Principal occupation / Job title (See Instructions) <b>13</b> Employer (See Instruction)	ns)				
14 Description of Collateral       15 Check if personal funds v         None	vere deposite	d into political accoun (See Instructions			
16 GUARANTOR 17 Name of guarantor INFORMATION		19 Amount Guarant	teed (\$)		
not applicable <b>18</b> Guarantor address; City; State; Zip Code					
20 Principal occupation     21 Employer (See Instruction	ns)	1			

	POLITICAL EXI	PENDITURES FROM POLITICAL NS	SCHEDULE F1
	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: Sch: 1/12 Rpt: 16/32	2 FILER NAME 3 Lopez, Carlos	Filer ID     (Ethics Commission Filers)       00087889
4	Date 01/04/2024	5 Payee name Act Blue	
6	Amount (\$) \$4.76	<ul> <li>7 Payee address; City; State; Zip Code</li> <li>TX</li> </ul>	
8	PURPOSE OF EXPENDITURE		side of Texas. Complete Schedule T. K, officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought <sup>H</sup> Lopez, Carlos State Representative Place	Office held
	Date 01/04/2024 Amount (\$)	Payee name Act Blue Payee address; City; State; Zip Code	
	\$7.33	тх	
	PURPOSE OF EXPENDITURE		side of Texas. Complete Schedule T. , officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought <sup>H</sup> Lopez, Carlos State Representative Place	Office held
	Date 01/09/2024	Payee name Act Blue	
	Amount (\$) \$649.50	Payee address; City; State; Zip Code	
	PURPOSE OF EXPENDITURE		side of Texas. Complete Schedule T. K, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought <sup>H</sup> Lopez, Carlos State Representative Place	Office held

	POLITICAL EXI CONTRIBUTIO	PENDITURES FROM POLITICAL NS	SCHEDULE F1
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Overhead/Rental Expense Ti Food/Beverage Expense Polling Expense Ti Gft/Awards/Memorials Expense Printing Expense Ti	olicitation/Fundraising Expense ransportation Equipment & Related Expense ravel in District ravel Out of District THER (enter a category not listed above)
1	Total pages Schedule F1: Sch: 2/12 Rpt: 17/32		iler ID (Ethics Commission Filers) 0087889
4	Date 01/15/2024	5 Payee name Arc Group	
6	Amount (\$) \$11.63	<ul> <li>7 Payee address; City; State; Zip Code</li> <li>TX</li> </ul>	
8	PURPOSE OF EXPENDITURE		of Texas. Complete Schedule T. ïceholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Lopez, Carlos State Representative Place	Office held
	Date 01/15/2024 Amount (\$)	Payee name Arc Group Payee address; City; State; Zip Code	
	\$31.52	TX	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside Check if Austin, TX, off TST Charge	of Texas. Complete Schedule T. ïceholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought <sup>H</sup> Lopez, Carlos State Representative Place	Office held
	Date 01/02/2024	Payee name BWR Laredo 127	
	Amount (\$) \$120.86	Payee address; City; State; Zip Code 9651 McPherson Rd	
	PURPOSE OF EXPENDITURE		of Texas. Complete Schedule T. ïceholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Lopez, Carlos State Representative Place	Office held

	POLITICAL EXI CONTRIBUTIO	PENDITURES FROM POLITICAL SCHEDULE	F1
		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/Reinbursement         Solicitation/Fundraising Expense           Fees         Office Overhead/Rental Expense         Transportation Equipment & Related Expense           Food/Beverage Expense         Polling Expense         Travel out of District           y -         Gift/Awards/Memorials Expense         Printing Expense	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission	Filers)
	Sch: 3/12 Rpt: 18/32	Lopez, Carlos 00087889	
4	Date 01/08/2024	5 Payee name Canva	
6	Amount (\$) \$16.23	7 Payee address; City; State; Zip Code	
		ТХ	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Ads	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder nameOffice soughtOffice heldHLopez, CarlosState Representative Place	
Γ	Date	Payee name	
	01/12/2024	Circle K	
	Amount (\$) \$66.63	Payee address; City; State; Zip Code	
		тх	
	PURPOSE OF EXPENDITURE	(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 Fuel	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder nameOffice soughtOffice heldHLopez, CarlosState Representative Place	
	Date		
	01/16/2024	Payee name Deb Bond	
	Amount (\$) \$440.00	Payee address; City; State; Zip Code	
		тх	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Signs	
F	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder nameOffice soughtOffice heldHLopez, CarlosState Representative Place	
Γ			

	POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1						
		EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees         Office Overhead/Rental Expense         Transportation           Food/Beverage Expense         Polling Expense         Travel in Distric           Gift/Awards/Memorials Expense         Printing Expense         Travel Out of D					
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID	(Ethics Commission Filers)				
	Sch: 4/12 Rpt: 19/32	Lopez, Carlos 00087889					
4	Date 01/12/2024	5 Payee name EZ Texting					
6	Amount (\$) \$333.27	<ul> <li>7 Payee address; City; State; Zip Code</li> <li>TX</li> </ul>					
8	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 outside of Texas. Cor</li> <li>Check if Austin, TX, officeholder livin</li> <li>Phone Service</li> </ul>					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office h Lopez, Carlos State Representative Place	eld				
	Date	Payee name					
	01/16/2024	Facebook					
	Amount (\$) \$148.80	Payee address; City; State; Zip Code					
	DUDDOOD						
	PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Advertising Expense</li> <li>(b) Description</li> <li>Check if travel outside of Texas. Cor</li> <li>Check if Austin, TX, officeholder livin</li> <li>Social Media</li> </ul>					
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder nameOffice soughtOffice hHLopez, CarlosState Representative Place	eld				
Γ	Date	Payee name					
	01/02/2024	Go Daddy					
	Amount (\$) \$47.96	Payee address; City; State; Zip Code					
		Uvalde, TX 78801					
	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 outside of Texas. Cor</li> <li>Check if Austin, TX, officeholder livin</li> <li>Subscription</li> </ul>					
╞	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office h <sup>H</sup> Lopez, Carlos State Representative Place	eld				
╞							

	POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees     Office Overhead/Rental Expense       Food/Beverage Expense     Polling Expense       / -     Gift/Awards/Memorials Expense       I Committee     Legal Services	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Trave! Out of District DTHER (enter a category not listed above)				
1	Total pages Schedule F1: Sch: 5/12 Rpt: 20/32		Filer ID (Ethics Commission Filers) 00087889				
4	Date 01/12/2024	5 Payee name Go Daddy					
6	Amount (\$) \$159.87	<ul> <li>7 Payee address; City; State; Zip Code</li> <li>TX</li> </ul>					
8	PURPOSE OF EXPENDITURE		e of Texas. Complete Schedule T. fficeholder living expense				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought H Lopez, Carlos State Representative Place	Office held				
	Date 01/08/2024	Payee name Jalisco's					
	Amount (\$) \$91.18	Payee address; City; State; Zip Code Pearsall, TX					
	PURPOSE OF EXPENDITURE		e of Texas. Complete Schedule T. fficeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought <sup>H</sup> Lopez, Carlos State Representative Place	Office held				
	Date 01/16/2024	Payee name Las Flores					
	Amount (\$) \$56.78	Payee address; City; State; Zip Code TX					
	PURPOSE OF EXPENDITURE		e of Texas. Complete Schedule T. fficeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Lopez, Carlos State Representative Place	Office held				
1							

	POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1 CONTRIBUTIONS						
F		EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		9				
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission File	ers)				
	Sch: 6/12 Rpt: 21/32	Lopez, Carlos 00087889					
4	Date 01/15/2024	5 Payee name Las Flores					
6	Amount (\$) \$46.78	<ul> <li>7 Payee address; City; State; Zip Code</li> <li>TX</li> </ul>					
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         Meals					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder nameOffice soughtOffice heldHLopez, CarlosState Representative Place					
	Date	Payee name					
	01/13/2024	Las Flores					
	Amount (\$) \$46.78	Payee address; City; State; Zip Code					
		ТХ					
	PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Food/Beverage Expense</li> <li>(b) Description</li> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> <li>Meals</li> </ul>					
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder nameOffice soughtOffice heldHLopez, CarlosState Representative Place					
	Date 01/14/2024	Payee name Miguelitos					
	Amount (\$) \$103.61	Payee address; City; State; Zip Code N 1st Ave					
		Crystal City, TX 78839					
	PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Food/Beverage Expense</li> <li>(b) Description</li> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> <li>Meals</li> </ul>					
╞	Complete <u>ONLY</u> if direct expenditure to benefit C/O	I     I       Candidate/Officeholder name     Office sought     Office held       H     Lopez, Carlos     State Representative Place					
F							

	POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1						
	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)				
	Total pages Schedule F1:		<b>3</b> Filer ID (Ethics Commission Filers)				
ľ	Sch: 7/12 Rpt: 22/32	Lopez, Carlos	00087889				
4	Date 01/16/2024	5 Payee name Miguelitos					
6	Amount (\$) \$103.61	<ul> <li>Payee address; City; State; Zip Code</li> <li>N 1st Ave</li> <li>Crystal Clty, TX 78839</li> </ul>					
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description	outside of Texas. Complete Schedule T. TX, officeholder living expense				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Lopez, Carlos State Representative Place	Office held				
	Date	Payee name					
	01/18/2024	Miguelitos					
	Amount (\$) \$77.15	Payee address; City; State; Zip Code N 1st Ave Crystal Clty, TX 78839					
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	outside of Texas. Complete Schedule T. TX, officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Lopez, Carlos State Representative Place	Office held				
	Date 01/17/2024	Payee name Miguelitos					
	Amount (\$) \$77.15	Payee address; City; State; Zip Code N 1st Ave					
		Crystal Clty, TX 78839					
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Lopez, Carlos State Representative Place	Office held				

	POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1						
	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)				
	Total pages Schedule F1:		<b>3</b> Filer ID (Ethics Commission Filers)				
	Sch: 8/12 Rpt: 23/32	Lopez, Carlos	00087889				
4	Date 01/16/2024	5 Payee name Miguelitos					
6	Amount (\$) \$103.61	<ul> <li>7 Payee address; City; State; Zip Code</li> <li>N 1st Ave</li> <li>Crystal CIty, TX 78839</li> </ul>					
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	utside of Texas. Complete Schedule T. TX, officeholder living expense				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Lopez, Carlos State Representative Place	Office held				
	Date	Payee name					
	01/02/2024	Peter Rabbits					
	Amount (\$) \$83.64	Payee address; City; State; Zip Code 638 S Getty Uvalde, TX 78801					
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Lopez, Carlos State Representative Place	Office held				
	Date 01/05/2024	Payee name Peter Rabbits					
	Amount (\$) \$51.72	Payee address; City; State; Zip Code 638 S Getty Uvalde, TX 78801					
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Lopez, Carlos State Representative Place	Office held				

	POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1						
		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/Reimursement     Solicitation/Fundraising Expense       Fees     Office Overhead/Rental Expense     Transportation Equipment & Related Expense       Food/Beverage Expense     Polling Expense     Travel in District       Glift/Awards/Memorials Expense     Printing Expense     Travel Out of District					
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
	Sch: 9/12 Rpt: 24/32	Lopez, Carlos 00087889					
4	Date 01/08/2024	5 Payee name Peter Rabbits					
6	Amount (\$) \$91.96	7 Payee address; City; State; Zip Code 638 S Getty Uvalde, TX 78801					
L							
8	PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Travel In District</li> <li>(b) Description         <ul> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> <li>Fuel</li> </ul> </li> </ul>					
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/OI	<sup>+</sup> Lopez, Carlos State Representative Place					
⊨	Date	Pavee name	=				
	01/15/2024	Peter Rabbits					
	Amount (\$) \$76.85	Payee address; City; State; Zip Code 638 S Getty Uvalde, TX 78801					
-	PURPOSE						
	OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule) Travel In District</li> <li>(b) Description         Check if travel outside of Texas. Complete Schedule T.         Check if Austin, TX, officeholder living expense         Fuel     </li> </ul>					
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_				
	expenditure to benefit C/OI						
	Date	Payee name					
	01/19/2024	Peter Rabbits					
	Amount (\$) \$76.85	Payee address; City; State; Zip Code 638 S Getty					
		Uvalde, TX 78801					
	PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule) Travel In District</li> <li>(b) Description         <ul> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> <li>Fuel</li> </ul> </li> </ul>					
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/OI						

	POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1 CONTRIBUTIONS						
	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         Solicitation/Fundraising Expense           Fees         Office Overhead/Rental Expense         Transportation Equipment & Related Expense           Food/Beverage Expense         Polling Expense         Travel in District           Gitt/Awards/Memorials Expense         Printing Expense         Travel Out of District					
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
	Sch: 10/12 Rpt: 25/32	Lopez, Carlos 00087889					
4	Date 01/19/2024	5 Payee name Peter Rabbits					
6	Amount (\$) \$74.00	<ul> <li>Payee address; City; State; Zip Code</li> <li>638 S Getty</li> <li>Uvalde, TX 78801</li> </ul>					
8	PURPOSE						
0	OF	<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Travel In District</li> <li>(b) Description</li> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> <li>Fuel</li> </ul>					
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/O						
╞	Date	Payee name					
	01/16/2024	Peter Rabbits					
-	Amount (\$)	Payee address; City; State; Zip Code					
	\$31.52	TX					
	PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Travel In District</li> <li>(b) Description</li> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> <li>Fuel</li> </ul>					
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/O	<sup>1</sup> Lopez, Carlos State Representative Place					
⊨	Date	Payee name	_				
	01/09/2024	Starbucks					
	Amount (\$) \$30.88	Payee address; City; State; Zip Code					
		тх					
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)       (b) Description         Food/Beverage Expense       Check if travel outside of Texas. Complete Schedule T.         Check if Austin, TX, officeholder living expense       Meeting in Pearsal					
┢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/O						

	POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees         Office Overhead/Rental Expense           Food/Beverage Expense         Polling Expense           -         Gift/Awards/Memorials Expense         Printing Expense	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: 11/12 Rpt: 26/32		00087889				
4	Date 01/08/2024	5 Payee name TexBest					
6	Amount (\$) \$89.38	<ul> <li>Payee address; City; State; Zip Code</li> <li>3250 E Main St B</li> <li>Uvalde, TX 78801</li> </ul>					
8	PURPOSE OF EXPENDITURE		e of Texas. Complete Schedule T. officeholder living expense				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Lopez, Carlos State Representative Place	Office held				
	Date	Payee name					
	01/14/2024	TexBest					
	Amount (\$) \$74.00	Payee address; City; State; Zip Code TX 78801					
	PURPOSE OF EXPENDITURE		e of Texas. Complete Schedule T. Ifficeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Lopez, Carlos State Representative Place	Office held				
	Date 01/15/2024	Payee name TexBest					
	Amount (\$) \$74.00	Payee address; City; State; Zip Code					
	PURPOSE OF EXPENDITURE		e of Texas. Complete Schedule T. officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Lopez, Carlos State Representative Place	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/Politica Credit Card Payment	-	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explai	Office Ov Polling E Printing E Salaries/	Expense Wages/Contract Labor	Tra Tra Tra	ansportation E avel in District avel Out of Dis	raising Expense quipment & Related Expense trict category not listed above)
4	Total names Cabadula E1.		The instruction Guide explai					(Ethics Commission Filoro)
1	Total pages Schedule F1:					3 Fil		(Ethics Commission Filers)
	Sch: 12/12 Rpt: 27/32	Lopez, Carlo	JS				0087889	
4	Date 01/13/2024	5 Payee name Tilted						
	Amount (\$) \$31.52	7 Payee addres	<ul> <li>Payee address; City; State; Zip Code</li> <li>TX</li> </ul>					
8	PURPOSE OF EXPENDITURE		e Categories listed at the top of this age Expense	schedule)	(b) Description	n, TX, offi		olete Schedule T. expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Offic Lopez, Carlos		Office sou State Re	ight presentative Plac	е	Office he	ld
	Date	Payee name						
	01/15/2024	Twitter						
	Amount (\$) \$23.82	Payee addres	s; City; Sta	ate; Zip Co	ode			
	PURPOSE OF EXPENDITURE	(a) Category <sub>(Se</sub> Advertising	e Categories listed at the top of this Expense	schedule)	(b) Description	n, TX, offi		olete Schedule T. expense
	Complete ONLY if direct	Candidate/Offic	eholder name	Office sou	ught		Office he	eld
	expenditure to benefit C/OF	<sup>I</sup> Lopez, Carlos	3	State Re	presentative Plac	е		
	Date 01/16/2024	Payee name Twitter						
	Amount (\$) \$23.82	Payee addres	s; City; Sta	ate; Zip C	ode			
		ТХ			I			
	PURPOSE OF EXPENDITURE	(a) Category <sub>(Se</sub> Advertising	e Categories listed at the top of this Expense	schedule)	(b) Description	n, TX, offi		plete Schedule T. expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Offic Lopez, Carlos		Office sou State Re	ught presentative Plac	е	Office he	ld

POLITICAL EX	(PENDITURES FROM PERSON	IAL FUNDS SCHEDULE G		
	EXPENDITURE CATEGORIES FC	R BOX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Event Expense Loan Re Fees Office O Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing	payment/Reimbursement     Solicitation/Fundraising Expense       verhead/Rental Expense     Transportation Equipment & Related Expense       xpense     Travel in District       Expense     Travel Out of District       Wages/Contract Labor     OTHER (enter a category not listed above)		
1 Total pages Schedule G: Sch: 1/5 Rpt: 28/32	2 FILER NAME Lopez, Carlos	3 Filer ID (Ethics Commission Filers) 00087889		
4 Date 01/03/2024	5 Payee name 3-D Signs			
6 Amount (\$) \$746.93	7 Payee address; City; State; Zip Code			
X political contributions intended	тх			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Signs		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Lopez, Carlos	Office sought Office held State Representative		
	1			
Date 01/08/2024	Payee name 3-D Signs			
Amount (\$) \$941.77	Payee address; City; State; Zip C	ode		
X         Reimbursement from political contributions intended	тх			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	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 Lopez, Carlos	Office sought Office held State Representative		
Date 01/08/2024	Payee name 3-D Signs			
Amount (\$) \$1,288.17	Payee address; City; State; Zip C	ode		
X Reimbursement from political contributions intended	ТХ			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	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	Lopez, Carlos	Office sought Office held State Representative		

	POLITICAL EX	PENDITURES FROM PERSON	NAL FUNDS SCHEDULE G		
F		EXPENDITURE CATEGORIES FO	DR BOX 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Re Fees Office O Food/Beverage Expense Polling f y - Gift/Awards/Memorials Expense Printing	epayment/Reinbursement       Solicitation/Fundraising Expense         Dverhead/Rental Expense       Transportation Equipment & Related Expense         Expense       Travel in District         Expense       Travel Out of District         S/Wages/Contract Labor       OTHER (enter a category not listed above)		
1	Total pages Schedule G: Sch: 2/5 Rpt: 29/32	2 FILER NAME Lopez, Carlos	3 Filer ID (Ethics Commission Filers) 00087889		
4	Date	5 Payee name	I		
	01/20/2024	3-D Signs			
6	Amount (\$) \$949.35	7 Payee address;     City;     State; Zip Code       35			
	X Reimbursement from political contributions intended	тх			
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T.		
9	Complete ONLY if direct	L Candidate/Officeholder name	Office sought Office held		
	expenditure to benefit C/OH	Lopez, Carlos	State Representative		
F	Date	Payee name			
	01/23/2024	3-D Signs			
	Amount (\$) \$818.37	Payee address; City; State; Zip C	Code		
	X Reimbursement from political contributions intended	тх			
Γ	PURPOSE	Category (See Categories listed at the top of this schedule)	Description Check if travel outside of Texas. Complete Schedule T.		
	OF EXPENDITURE	Advertising Expense	Check if Austin, TX, officeholder living expense		
			Signs		
Γ		Candidate/Officeholder name	Office sought Office held		
	expenditure to benefit C/OH	Lopez, Carlos	State Representative		
Г	Date	Payee name			
	01/13/2024	Dominos			
	Amount (\$) \$103.92	Payee address; City; State; Zip C	Code		
	X Reimbursement from political contributions intended	тх			
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Food Event Expense		
┢	Complete ONLY if direct	L Candidate/Officeholder name	Office sought Office held		
	avpanditure to hanafit	Lopez, Carlos	State Representative		

	POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G					
F						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing F	payment/Reimbursement     Solicitation/Fundraising Expense       verhead/Rental Expense     Transportation Equipment & Related Expense       xpense     Travel in District       Expense     Travel Out of District       Wages/Contract Labor     OTHER (enter a category not listed above)			
1	Total pages Schedule G: Sch: 3/5 Rpt: 30/32	2 FILER NAME Lopez, Carlos	3 Filer ID (Ethics Commission Filers) 00087889			
4	Date 01/20/2024	5 Payee name Garcia's Cafe				
6	Amount (\$) \$32.71	7 Payee address; City; State; Zip Code				
	X Reimbursement from political contributions intended	тх				
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Check if travel outside of Texas. Complete Schedule T.			
9	expenditure to benefit	Candidate/Officeholder name Lopez, Carlos	Office sought Office held State Representative			
	Date 01/13/2024	Payee name HEB				
	Amount (\$) \$238.84	Payee address; City; State; Zip Code				
	X Reimbursement from political contributions intended	тх				
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Food Event Expense Webb			
	expenditure to benefit	Candidate/Officeholder name Lopez, Carlos	Office sought Office held State Representative			
	Date 01/12/2024	Payee name Miguelitos				
	Amount (\$) \$48.45	Payee address;     City;     State;     Zip Code       5     N 1st Ave				
	X Reimbursement from political contributions intended	Crystal City, TX 78839				
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Meals			
	expenditure to benefit	Candidate/Officeholder name Lopez, Carlos	Office sought Office held State Representative			

	POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G					
F	EXPENDITURE CATEGORIES FOR BOX 8(a)					
	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	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: 4/5 Rpt: 31/32	2 FILER NAME Lopez, Carlos	3	<b>3</b> Filer ID (Ethics Commission Filers) 00087889		
4	Date 01/24/2024	5 Payee name Peter Rabbits				
6	Amount (\$) \$50.00	7 Payee address; City; State; Zip Code				
	Reimbursement from political contributions intended	тх				
8	PURPOSE OF EXPENDITURE	(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		
9	expenditure to benefit	Candidate/Officeholder name Lopez, Carlos	Office sought State Represer	Office held ntative		
F	Date	Payee name				
	01/03/2024	QuikTrip				
	Amount (\$) \$51.11 Reimbursement from	Payee address; City; State; Zip Code				
	x political contributions intended	тх				
	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		
	expenditure to benefit	Candidate/Officeholder name Lopez, Carlos	Office sought State Represer	Office held ntative		
	Date 01/19/2024	Payee name Rositas				
	Amount (\$) Payee address; City; State; Zip Code \$75.00					
	X         Reimbursement from political contributions intended	тх				
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
	expenditure to benefit	Candidate/Officeholder name Lopez, Carlos	Office sought State Represer	Office held ntative		

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G					
EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Event Expense Loan Re Fees Office C Food/Beverage Expense Polling f y - Gift/Awards/Memorials Expense Printing	epayment/Reinbursement     Solicitation/Fundraising Expense       tverhead/Rental Expense     Transportation Equipment & Related Expense       Expense     Travel in District       Expense     Travel Out of District       /Wages/Contract Labor     OTHER (enter a category not listed above)			
1 Total pages Schedule G: Sch: 5/5 Rpt: 32/32	2 FILER NAME Lopez, Carlos	3 Filer ID (Ethics Commission Filers) 00087889			
4 Date	5 Payee name				
01/05/2024	Sign Repairs				
6 Amount (\$) \$3.79	7 Payee address;     City;     State;     Zip Code       \$3.79				
X Reimbursement from political contributions intended	тх				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T.			
9 Complete ONLY if direct	Candidate/Officeholder name	Office sought Office held			
expenditure to benefit C/OH	Lopez, Carlos	State Representative			
Date	Payee name				
01/25/2024	Sign Repairs				
Amount (\$)     Payee address;     City;     State;     Zip Code       \$11.30					
X         Reimbursement from political contributions intended	тх				
PURPOSE	Category (See Categories listed at the top of this schedule)	Description Check if travel outside of Texas. Complete Schedule T.			
OF EXPENDITURE	Advertising Expense	Check if Austin, TX, officeholder living expense			
		Sign Repairs			
Complete ONLY if direct	Candidate/Officeholder name	Office sought Office held			
expenditure to benefit C/OH	Lopez, Carlos	State Representative			
Date	Payee name				
01/05/2024	Tokyo Garden				
Amount (\$) Payee address; City; State; Zip Code \$1,231.00					
Reimbursement from political contributions intended	тх				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event Food			
Complete ONLY if direct	Candidate/Officeholder name	Office sought Office held			
expenditure to benefit C/OH	Lopez, Carlos	State Representative			