CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to complete	e this form.	1 Filer ID (Ethics Commi 00054795		2 Total pages file	
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE U	SE UNI A
OFFICEHOLDER NAME	The Honorable	Hubert			Date Received	SE ONL I
					ELECTRONICAL	LLY FILED
	NICKNAME L	 LAST		SUFFIX	10/28/2024	
		Vo		C2.		
4 CANDIDATE /	ADDRESS / PO BOX; APT / S	SUITE#; CIT	Y;	ZIP CODE	Date Hand-delivered or D	Date Postmarked
OFFICEHOLDER MAILING ADDRESS	11360 Bellaire Blvd., Suite 8	380			Receipt #	Amount
Change of Address	Houston, TX 77072				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS/MRS/MR F	IRST		MI		
TREASURER NAME		Shadrick Damo	one			
	NICKNAME L	 .AST		SUFFIX		
		Bogany		30117		
				· · · · · · · · · · · · · · · · ·		=:= 2005
6 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BO 9121-C Stella Link	OX PLEASE);	AP	T / SUITE #; CITY	; STAT	TE; ZIP CODE
(Residence or Business)	Houston, TX 77025					
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE (713) 667-1000	NUMBER E	EXTENSION			
8 REPORT TYPE	January 15	30th day before	election	Runoff	15th day after cam appointment (office	
	July 15	8th day before e	election	Exceeded modified reporting limit	Final Report (Attac	h C/OH-FR)
9 PERIOD COVERED	Month Day Year	TL	'DOLICII	Month Day	Year	
	09/27/2024		IROUGH	10/26/202	24	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	∐ ^{Pi}	rimary	Runoff	Other	
	11/05/2024	XG	eneral	Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT	T (if known)	
	State Representative Distric	t 149			tative District 149	
	4					
		GO T	O PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 16

13 C / OH NAME Vo, Hubert (The Honorable) 14 Filer ID 00054795					(Ethics Com	mission Filers)	
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	These expenditures n	accepted or political expenditu nay have been made without t uired to report this information	he candidate's or office	eholder's kn	owledge or	
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME					
_	GENERAL						
		COMMITTEE ADDR	ESS				
	SPECIFIC						
		COMMITTEE CAMP	AIGN TREASURER NAME				
		COMMITTEE CAMP	AIGN TREASURER ADDRES	SS			
16 CONTRIBUTION TOTALS			NTRIBUTIONS (OTHER THAI ONTRIBUTIONS MADE ELEC		\$	945.00	
		CAL CONTRIBUTIONS PLEDGES, LOANS, O	S PR GUARANTEES OF LOANS	<i>i</i>)	\$	6,750.00	
EXPENDITURE TOTALS	3. TOTAL UNITEM	IIZED POLITICAL EXF	PENDITURES		\$	0.00	
	4. TOTAL POLITIC	CAL EXPENDITURES			\$	6,966.84	
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE		MAINTAINED AS OF THE LA	AST DAY OF THE	\$	102,112.15	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR		OUTSTANDING LOANS AS	OF THE LAST DAY	\$	0.00	
17 AFFIDAVIT		tro	swear, or affirm, under penalty ue and correct and includes al nder Title 15, Election Code.				
			The Ho	onorable Hubert Vo			
		_	Signature of	Candidate or Officehol	der		
AFFIX NO	TARY STAMP / SEAL AB	OVE					
				, this the		day	
of	, 20, to co	ertify which, witness m	ny hand and seal of office.				
Signature of office	cer administering	Printed name of	officer administering	Title of officer	r administeri	ng oath	

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

				J V L I (3 of 16
	ubert	t (The Honorable)	19 Filer ID 00054795	(Ethics	Commission Filers)
20 SCHEE NAME	SL	JBTOTAL AMOUNT			
1.	X	\$	6,750.00		
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$	5,320.92
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		\$			
9.	9. X SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS				1,645.92
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS FOR TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL CONTRIBUTIO		SCHEDULE A1			
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 1/4 Rpt: 4/16		
2	FILER NAME Vo, Hubert (The Honorable)	3	Filer ID (Ethics Commission Filers) 00054795			
4	Date 10/16/2024				Amount of Contribution (\$) \$1,000.00		
_	<u> </u>	Austin, TX 78768					
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	;)			
	Date 10/07/2024	Full name of contributor out-of-state PAC (ID#:_ Bul, Hung Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$300.00		
	Principal occu	Houston, TX 77072 pation / Job title (See Instructions)	Employer (See Instructions	:)			
	Retired		Not Employed	,			
	Date 10/23/2024	Full name of contributor out-of-state PAC (ID#:_ Houston Associated General Contractors PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$1,000.00		
		Houston, TX 77092					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	()			
	Date 10/06/2024	Full name of contributor out-of-state PAC (ID#:_ Huynh, Thi Contributor address; City; State; Zip Code Houston, TX 77014)		Amount of Contribution (\$) \$25.00		
	Principal occu Not Employe	pation / Job title (See Instructions)	Employer (See Instructions Not Employed	()			
	Date 10/24/2024	Full name of contributor out-of-state PAC (ID#:_ IBAT PAC Contributor address; City; State; Zip Code Austin, TX 78701)		Amount of Contribution (\$) \$500.00		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			

MONETARY POLITICAL CONTRIBUTIONS						SCHEDULE A1			
	The Instruc	ction Guide explains how to complete this	1	Total pages Schedule A1: Sch: 2/4 Rpt: 5/16					
2	FILER NAME Vo, Hubert (The Honorable)					Filer ID (Ethics Commissio 00054795	n Filers)		
4	Date 10/06/2024	Date 5 Full name of contributor out-of-state PAC (ID#:)			7	Amount of Contribution (\$)	\$50.00		
8	Principal occu	Meadows Place, TX 77477 pation / Job title (See Instructions)	9	Employer (See Instructions	 s)				
	Not Employe			Not Employed					
	Date 10/06/2024	Full name of contributor out-of-state PAC (ID# Kieu, Steven Contributor address; City; State; Zip Code			•	Amount of Contribution (\$)	\$25.00		
	Dringing conu	marietta, GA 30062	_	Employer (See Instructions	<u>''</u>				
	Lockheed	pation / Job title (See Instructions)		Employer (See Instructions Worker	o)				
	Date 10/07/2024	Full name of contributor out-of-state PAC (ID) Le, Van Contributor address; City; State; Zip Code)	•	Amount of Contribution (\$)	\$200.00		
		Houston, TX 77074							
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	s)				
	Date 10/07/2024	Full name of contributor out-of-state PAC (ID) Le, Van Contributor address; City; State; Zip Code Houston, TX 77074)	•	Amount of Contribution (\$)	\$100.00		
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)				
	Date 10/07/2024	Full name of contributor out-of-state PAC (ID#Loan, Tran Contributor address; City; State; Zip Code Houston, TX 77072			•	Amount of Contribution (\$)	\$150.00		
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	s)				
			1						

MONETARY POLITICAL CONTRIBUTIONS						SCHEDULE A1		
	The Instruc	ction Guide explains how to complete this f	1	Total pages Schedule A1: Sch: 3/4 Rpt: 6/16				
2	FILER NAME Vo, Hubert (The Honorable)					Filer ID (Ethics Commission 00054795	on Filers)	
4	Date 10/07/2024	ate 5 Full name of contributor out-of-state PAC (ID#:)			7	Amount of Contribution (\$)	\$400.00	
8	Principal occu Retired	Pearland, TX 77584 pation / Job title (See Instructions)	9	Employer (See Instructions Not Employed	<u> </u> s)			
	Date 10/06/2024	Full name of contributor out-of-state PAC (ID#:_ Nguyen, Antigone Contributor address; City; State; Zip Code Huntington Beach, CA 92646			•	Amount of Contribution (\$)	\$25.00	
	Principal occu sav-on	pation / Job title (See Instructions)		Employer (See Instructions Pharmacist	<u>l</u> 5)			
	Date 10/07/2024	Full name of contributor out-of-state PAC (ID#:_Nguyen, Mylynn Contributor address; City; State; Zip Code)	•	Amount of Contribution (\$)	\$100.00	
	Principal occu Retired	Houston, TX 77072 pation / Job title (See Instructions)		Employer (See Instructions Not Employed	<u> </u> s)			
	Date 09/30/2024	Full name of contributor out-of-state PAC (ID#:_ Phan, Laura Contributor address; City; State; Zip Code San Tan Valley, AZ 85144)		Amount of Contribution (\$)	\$25.00	
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	<u>l</u> 5)			
	Date 10/23/2024	Full name of contributor out-of-state PAC (ID#:_PharmPac Contributor address; City; State; Zip Code Austin, TX 78757				Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)			
			•					

MONETARY POLITICAL CONTRIBUTIONS						SCHEDULE A1		
	The Instruc	ction Guide explains how to complete this fo	1	Total pages Schedule A1: Sch: 4/4 Rpt: 7/16				
2	FILER NAME Vo, Hubert (The Honorable)					Filer ID (Ethics Commission 00054795	n Filers)	
4	Date 09/28/2024	Date 5 Full name of contributor out-of-state PAC (ID#:)				Amount of Contribution (\$)	\$50.00	
8	Principal occu Teacher	pation / Job title (See Instructions)	9	Employer (See Instructions Alief ISD	<u> </u> s)			
	Date 10/07/2024	Full name of contributor out-of-state PAC (ID#:_ Tai Anh, Nhguyen Contributor address; City; State; Zip Code Houston, TX 77099)	•	Amount of Contribution (\$)	\$150.00	
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)			
	Date 10/15/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Farm Bureau AGFUND Contributor address; City; State; Zip Code)	•	Amount of Contribution (\$)	\$500.00	
	Principal occu	Waco, TX 76702 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)			
	Date 10/07/2024	Full name of contributor out-of-state PAC (ID#: Tran, Kim Contributor address; City; State; Zip Code Houston, TX 77036)		Amount of Contribution (\$)	\$200.00	
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	<u>l</u> S)			
	Date 10/06/2024	Full name of contributor out-of-state PAC (ID#:_ Tran, Tuan Contributor address; City; State; Zip Code Irvine, CA 92606			•	Amount of Contribution (\$)	\$5.00	
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	s)			

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment	d Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 1/3 Rpt: 8/16	Vo, Hubert (The Honorable) 00054795
4	Date	5 Payee name
	09/30/2024	Diep, Suong
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,520.00	27806 Burchfield Grove Ln
		Katy, TX 77494
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Salary
		Sulary
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
⊨	Date	Payee name
	10/15/2024	Diep, Suong
┝	Amount (\$)	Payee address; City; State; Zip Code
	\$1,010.00	27806 Burchfield Grove Ln
	φ1,010.00	27000 Bulchillelu Grove Eli
		Katy TV 77404
L	DUDDOOF	Katy, TX 77494
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Salary
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	H
	Date	Payee name
	09/30/2024	Tan, Thao
	Amount (\$)	Payee address; City; State; Zip Code
	\$690.00	11918 Troulon Dr
		Houston, TX 77072
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Salary
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
1	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
\vdash		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

Advertising Expense Evaccounting/Banking Fe Consulting Expense Fo Contributions/ Donations Made By - Gi

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services	Salaries/V	Wages	s/Contract Labor		OTHER (enter a	category not listed above)
				The Instruction Guide	e explains how to co	mpl	ete this form.	_		
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commission Filers)
	Sch: 2/3 Rpt: 9/16		Vo, Hubert (The Honorable)					00054795	
4	Date	5	Payee name							
	10/17/2024		Tan, Thao							
6	Amount (\$)	7	Payee addres	ss; City;	State; Zip Co	ode				
	\$455.00		11918 Troul	on Dr						
			Houston, TX	/ 77072						
Ļ		_								
8	PURPOSE OF	(a)		e Categories listed at the to		(b)	Description			
	EXPENDITURE		Salaries/Wa	ges/Contract Labo	or					plete Schedule T.
							Salary	, 1,	officeholder living	j experise
							Juliury			
_	0 1: 01 1/4 1	<u> </u>	0 1:1 : (0.00		0,11	<u> </u>			0	11
9	Complete ONLY if direct expenditure to benefit C/OI		Jandidate/Offic	ceholder name	Office sou	ıgnt			Office he	eid
	Date		Payee name							
	10/15/2024		Vo, Kathy							
	Amount (\$)		Payee addres	ss; City;	State; Zip Co	ode				
	\$635.54		11360 Bella	ire Blvd, Ste 880						
			STE 800							
			Houston, TX	(77072						
		_				[<i>a</i> ,				
	PURPOSE OF	(a)		e Categories listed at the to		(b)	Description	outoi	de of Toyloo Com	nlata Cabadula T
	EXPENDITURE		Loan Repay	ment/Reimbursem	nent		=		officeholder living	plete Schedule T.
							Reimburseme			,
_	Complete ONLY if direct			ceholder name	Office sou	ıaht			Office he	7l4
	expenditure to benefit C/OI		Janara actor Onn	seriolaer riame	000 000	ag.ii			Omoo m	Sid
		_								
	Date		Payee name							
	10/15/2024		Vo, Kathy							
	Amount (\$)		Payee addres	ss; City;	State; Zip Co	ode				
	\$597.08		11360 Bella	ire Blvd, Ste 880						
			STE 800							
			Houston, TX	(77072						
	PURPOSE	(a)		e Categories listed at the to		(h)	Description			
	OF	(۳)		rment/Reimbursem		(5)		outsi	de of Texas. Com	plete Schedule T.
	EXPENDITURE		Loan Repay	mentrembursen	icit		Check if Austin,	, TX,	officeholder living	g expense
							Reimburseme	ent		
	Complete ONLY if direct	_		ceholder name	Office sou	ıght			Office he	eld
	expenditure to benefit C/OI					-				
_										

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment	Al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 3/3 Rpt: 10/16	Vo, Hubert (The Honorable) 00054795
4	Date	5 Payee name
	10/15/2024	Vo, Kathy
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$387.32	11360 Bellaire Blvd, Ste 880
		STE 800
		Houston, TX 77072
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Loan Repayment/Reimbursement Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Reimbursement
		Treimbarsement
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/15/2024	Vo, Kathy
	Amount (\$)	Payee address; City; State; Zip Code
	\$25.98	11360 Bellaire Blvd, Ste 880
		STE 800
		Houston, TX 77072
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Loan Repayment/Reimbursement
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Reimbursement
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
İ		
l		
l		

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule G:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 1/6 Rpt: 11/16	Vo, Hubert (The Honorable)	00054795
4	Date	5 Payee name	
	10/15/2024	Big Mart	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$40.00	12298 Beechnut St	
	Reimbursement from		
	X political contributions intended	Houston, TX 77072	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Transportation Equipment And Related	Check if Austin, TX, officeholder living expense
		Expense	
9	Complete ONLY if direct expenditure to benefit	Candidate/Officeholder name Office sought	Office held
	C/OH		
	Date	Payee name	
	10/15/2024	Circle K	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$45.00	13197 Bellaire Blvd	
	Reimbursement from		
	X political contributions intended	Houston, TX 77072	
	PURPOSE	Category (See Categories listed at the top of this schedule) Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Transportation Equipment And Related	Check if Austin, TX, officeholder living expense
		Expense	
	Complete ONLY if direct expenditure to benefit	Candidate/Officeholder name Office sought	Office held
	C/OH		
	Date	Payee name	
	10/15/2024	Circle K	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$43.00	13197 Bellaire Blvd	
	Reimbursement from		
	X political contributions intended	Houston, TX 77072	
Г	PURPOSE	Category (See Categories listed at the top of this schedule) Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Transportation Equipment And Related	Check if Austin, TX, officeholder living expense
		Expense Gas	
	Complete ONLY if direct expenditure to benefit	Candidate/Officeholder name Office sought	Office held
	C/OH		

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			Expense s/Wages/Contract Labor	Travel Out of District OTHER (enter a category not listed above)
_		1.	· · · · · · · · · · · · · · · · · · ·	complete this form.	
1		2	FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 2/6 Rpt: 12/16		Vo, Hubert (The Honorable)		00054795
4	Date	5	Payee name		
	10/14/2024		Comcast		
6	Amount (\$)	7	Payee address; City; State; Zip (Code	
	\$274.69		9602 S 300 W.		
	Reimbursement from		STE B		
	X political contributions intended		Sandy, UT 84070		
_		<u> </u>	<u> </u>		7
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule)	(b) Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	EXPENDITURE		Office Overhead/Rental Expense	L	_
				Campaign Interne	et
9	Complete <u>ONLY</u> if direct expenditure to benefit	Cai	ndidate/Officeholder name	Office sought	Office held
	C/OH				
		_			
	Date		Payee name		
	10/14/2024		Costco Wholesale		
	Amount (\$)		Payee address; City; State; Zip (Code	
	\$266.26		3836 Richmond Ave		
	Reimbursement from political contributions				
	X political contributions intended		Houston, TX 77027		
	PURPOSE	H	Category (See Categories listed at the top of this schedule)	Description	Check if travel outside of Texas. Complete Schedule T.
	OF		Office Overhead/Rental Expense		Check if Austin, TX, officeholder living expense
	EXPENDITURE		•	Office Supplies	
	Complete ONLY if direct	Cai	ndidate/Officeholder name	Office sought	Office held
	expenditure to benefit			· ·	
	C/OH				
	Date		Payee name		
	10/04/2024		Flash Parking		
	Amount (\$)	H	Payee address; City; State; Zip (Code	
	\$25.98		910 Brazos St		
	Reimbursement from				
	x political contributions intended		Austin, TX 78701		
		┡		1 a =	7
	PURPOSE OF		Category (See Categories listed at the top of this schedule)	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	EXPENDITURE		Transportation Equipment And Related Expense	L Dorling	Check if Addding 174, Ginecholder living expense
			Expense	Parking	
		Ļ	W. L. 1989		200
	Complete <u>ONLY</u> if direct expenditure to benefit	Cai	ndidate/Officeholder name	Office sought	Office held
	C/OH				

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. FILER NAME Total pages Schedule G: Filer ID (Ethics Commission Filers) Sch: 3/6 Rpt: 13/16 Vo, Hubert (The Honorable) 00054795 Date Payee name 10/15/2024 Harbor Freight Amount (\$) Payee address; City; State; Zip Code \$292.37 6806 Highway 6 S Ste C Reimbursement from political contributions Х intended Houston, TX 77083 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if Austin, TX, officeholder living expense **Event Expense EXPENDITURE Event Supplies** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 10/15/2024 Home Depot Amount (\$) Payee address; City; State; Zip Code \$343.17 6800 W Sam Houston Parkway South Reimbursement from political contributions Χ Houston, TX 77072 intended **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense **Event Expense EXPENDITURE Event Supplies** Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 10/15/2024 Qmart Payee address; State; Zip Code Amount (\$) City; \$44.00 11202 Beechnut Reimbursement from Χ political contributions intended Houston, TX 77072 **PURPOSE** Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Description OF Check if Austin, TX, officeholder living expense Transportation Equipment And Related **EXPENDITURE** Expense Gas

Candidate/Officeholder name

Complete ONLY if direct

expenditure to benefit

C/OH

Office sought

Office held

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	d/Beverage Expense Polling Expense Awards/Memorials Expense Printing Expense al Services Salaries/Wages/Contract Labor			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 G:	2 FILER NAMI	≣			3 F	iler ID	(Ethics Commission Filers)		
	Sch: 4/6 Rpt: 14/16	Vo, Hubert	(The Honorable)			(0005479	5		
4	Date	5 Payee name								
	10/15/2024	Road Trip								
6	Amount (\$)	7 Payee address; City; State; Zip Code								
	\$45.00	9226 S Kirkwood Road								
	Reimbursement from									
	y political contributions intended	Houston, T	× 77099							
8	PURPOSE	(a) Category (S	ee Categories listed at the top of this sch	edule)	(b) Description	Che	ck if travel o	utside of Texas. Complete Schedule T.		
	OF EXPENDITURE	Transporta	tion Equipment And Related			Che	ck if Austin,	TX, officeholder living expense		
	LAFENDITORE	Expense			Gas					
9	Complete ONLY if direct	Candidate/Office	holder name		Office sought			Office held		
	expenditure to benefit C/OH	enditure to benefit								
	Date	Payee name								
	10/15/2024	Shell								
	Amount (\$) Payee address; City; State; Zip Code									
	\$20.84 15795 Bellaire Blvd									
		TO LAD DELIGITE DIVU								
Reimbursement from political contributions intended Houston, TX 77083										
	PURPOSE OF	Category (S	ee Categories listed at the top of this scho	edule)	Description	=		utside of Texas. Complete Schedule T.		
EXPENDITURE			tion Equipment And Related		L	Che	ck if Austin,	TX, officeholder living expense		
		Expense	Gas							
		Candidate/Officeholder name Office sought Office held								
	expenditure to benefit C/OH									
		ī								
	Date	Payee name								
	10/15/2024	Shell								
	Amount (\$) Payee address; City; State; Zip Code									
	\$20.00 15795 Bellaire Blvd									
	Reimbursement from									
X political contributions intended		Houston, TX 77083								
Н	PURPOSE	Category (S	ee Categories listed at the top of this sche	edule)	Description	Che	ck if travel or	utside of Texas. Complete Schedule T.		
	OF	Transporta	tion Equipment And Related	, 		Che	ck if Austin,	TX, officeholder living expense		
EXPENDITURE		Expense Equipment 7 that Related			Gas					
	Complete ONLY if direct	L Candidate/Office	holder name		Office sought			Office held		
	expenditure to benefit	2			220 00 ag. it					
L	C/OH									

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Travel in District Travel Out of District OTHER (enter a category not listed above)				
1 Total pages Schedule G:		2 FILER NAME	Filer ID (Ethics Commission Filers)				
	Sch: 5/6 Rpt: 15/16	Vo, Hubert (The Honorable)		00054795			
4	Date	5 Payee name					
	10/15/2024	Shell					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$29.48	15795 Bellaire Blvd					
	X Reimbursement from political contributions intended						
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T.					
	EXPENDITURE	Transportation Equipment And Related Expense	Gas □ □ □	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					
	10/15/2024	0/15/2024 Shell					
	Amount (\$) Payee address; City; State; Zip Code						
	\$22.92	2 15795 Bellaire Blvd					
Reimbursement from political contributions intended Houston, TX 77083							
	PURPOSE OF	Category (See Categories listed at the top of this schedule)	ı <u></u>	Check if travel outside of Texas. Complete Schedule T.			
EXPENDITURE		Transportation Equipment And Related Expense	Gas	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	Payee name					
	10/15/2024	Shell					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$25.00	15795 Bellaire Blvd					
	X Reimbursement from political contributions intended	Houston, TX 77083					
	PURPOSE OF	Category (See Categories listed at the top of this schedule)	· · =	Check if travel outside of Texas. Complete Schedule T.			
EXPENDITURE		Transportation Equipment And Related Expense		Check if Austin, TX, officeholder living expense			
			- 043				
	Complete ONLY if direct expenditure to benefit C/OH	I Candidate/Officeholder name	Office sought	Office held			

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense Polling Expense Gitt/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.		Expense Wages/Contract Labor	Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule G:	2 FILER NAM	E			3 Filer ID	(Ethics Commission Filers)	
	Sch: 6/6 Rpt: 16/16	Vo, Hubert	(The Honorable)			00054	795	
4	Date	5 Payee name)					
	10/15/2024	Shell						
6	Amount (\$)	7 Payee addre	ess; City; Sta	ate; Zip C	ode			
	\$25.00	15795 Bell	aire Blvd					
	Reimbursement from political contributions intended	Houston, T	X 77083					
8	PURPOSE	(a) Category (s	See Categories listed at the top of this	schedule)	(b) Description	Check if trav	vel outside of Texas. Complete Schedule T.	
	OF EXPENDITURE	Transporta Expense	tion Equipment And Rela	ted	Gas	Check if Aus	stin, TX, officeholder living expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH						Office held	
	Date	Payee name)					
	10/15/2024	Shell						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$27.08	15795 Bellaire Blvd						
	Reimbursement from political contributions intended	Houston, T	X 77083					
	PURPOSE OF	Category (s	See Categories listed at the top of this	schedule)	Description	=	vel outside of Texas. Complete Schedule T.	
EXPENDITURE		Transporta Expense	tion Equipment And Rela	ted	Gas	Check if Aus	stin, TX, officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	I Candidate/Office	holder name		Office sought		Office held	
	Date	Payee name)					
	10/14/2024	T-Mobile						
	Amount (\$) \$56.13	Payee addre	. ,,	ate; Zip Co	ode			
	Reimbursement from political contributions intended	Cincinnati,	OH 45274					
	PURPOSE OF	1 ,	See Categories listed at the top of this	schedule)	Description		vel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Office Ove	rhead/Rental Expense		Check if Austin, TX, officeholder living expense Campaign Data Services			
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Office	sholder name		Office sought		Office held	