

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

<b>The C/OH Instruction Guide explains how to complete this form.</b>		<b>1</b> Filer ID (Ethics Commission Filers) 00057411	<b>2</b> Total pages filed: 67		
<b>3</b> CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR The Honorable	FIRST Ana E.	MI	<b>OFFICE USE ONLY</b>	
	NICKNAME	LAST Hernandez	SUFFIX		Date Received <b>ELECTRONICALLY FILED</b> 01/15/2025
<b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; P.O. Box 15538  Houston, TX 77220		ZIP CODE	Date Hand-delivered or Date Postmarked	
				Receipt #	
				Amount	
				Date Processed	
				Date Imaged	
<b>5</b> CAMPAIGN TREASURER NAME	MS / MRS / MR Ms.	FIRST Maria S.	MI		
	NICKNAME	LAST Delgado	SUFFIX		
<b>6</b> CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 406 Baldinger  Houston, TX 77011		APT / SUITE #;	CITY; STATE; ZIP CODE	
<b>7</b> CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		
	(713)	505-5922			
<b>8</b> REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)				
	<input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)				
<b>9</b> PERIOD COVERED	Month	Day	Year	Month	
	07	01	2024	12	
		THROUGH	12/31/2024		
<b>10</b> ELECTION	ELECTION DATE		ELECTION TYPE		
	Month	Day	Year	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff
	11	05	2024	<input checked="" type="checkbox"/> General	<input type="checkbox"/> Other
				<input type="checkbox"/> Special	
<b>11</b> OFFICE	OFFICE HELD (if any) State Representative District 143			<b>12</b> OFFICE SOUGHT (if known) State Representative District 143	

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

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<b>13 C / OH NAME</b> Hernandez, Ana E. (The Honorable)	<b>14 Filer ID</b> (Ethics Commission Filers) 00057411
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<b>15 NOTICE FROM POLITICAL COMMITTEE(S)</b>  <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
	<b>COMMITTEE TYPE</b>  <input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	<b>COMMITTEE NAME</b>  <hr/> <b>COMMITTEE ADDRESS</b>  <hr/> <b>COMMITTEE CAMPAIGN TREASURER NAME</b>  <hr/> <b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b>  <hr/>

<b>16 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 157,510.00
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 756.77
	4. <b>TOTAL POLITICAL EXPENDITURES</b>	\$ 33,586.29
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 448,309.68
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

**17 AFFIDAVIT**

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

\_\_\_\_\_  
 The Honorable Ana E. Hernandez  
 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

**SUBTOTALS - C/OH****FORM C/OH  
COVER SHEET PG 3**

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<b>18 FILER NAME</b> Hernandez, Ana E. (The Honorable)		<b>19 Filer ID</b> (Ethics Commission Filers) 00057411
<b>20 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 157,510.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 33,586.29
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/35 Rpt: 4/67
<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00057411
<b>4</b> Date 10/10/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) AT&T Texas PAC <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78701	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/22/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00536573</u> ) Abbie PAC <hr/> Contributor address; City; State; Zip Code  North Chicago, IL 60064	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Adediran, Maria <hr/> Contributor address; City; State; Zip Code  Houston, TX 77015	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Alanis, Joe <hr/> Contributor address; City; State; Zip Code  Houston, TX 77089	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) law enforcement		Employer (See Instructions) Harris County Precinct 6
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Allen Boone Humphries Robinson LLP <hr/> Contributor address; City; State; Zip Code  Houston, TX 77027	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/35 Rpt: 5/67
<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00057411
<b>4</b> Date 12/10/2024	<b>5</b> Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00089136 ) Altria Group Inc. PAC <hr/> <b>6</b> Contributor address; City; State; Zip Code  Washington, DC 20001	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) American Council of Engineering Companies of Texas PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Associated General Contractors of Texas PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78768	Amount of Contribution (\$)  \$2,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Atmos Energy Corporation PAC <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75240	Amount of Contribution (\$)  \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Baiardi, Norma <hr/> Contributor address; City; State; Zip Code  Houston, TX 77007	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 3/35 Rpt: 6/67
2 FILER NAME Hernandez, Ana E. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00057411
4 Date 08/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bates, Lucia	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code  Houston, TX 77049	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Beer Alliance of Texas PAC	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code  Austin, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Briones, Lesley	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Houston, TX 77008	
Principal occupation / Job title (See Instructions) Commissioner		Employer (See Instructions) Harris County
Date 08/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Burns & McDonnell Texas PAC	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  Houston, TX 77024	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/08/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00002089 ) CWA - COPE PCC PAC	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  Washington, DC 20001	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/35 Rpt: 7/67
<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00057411
<b>4</b> Date 12/12/2024	<b>5</b> Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00002089 ) CWA - COPE PCC PAC <hr/> <b>6</b> Contributor address; City; State; Zip Code  Washington, DC 20001	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 08/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Calpine PAC <hr/> Contributor address; City; State; Zip Code  Houston, TX 77002	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Caterpillar Inc. PAC <hr/> Contributor address; City; State; Zip Code  Irving, TX 75039	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Centerpoint Energy, Inc. Political Action Committee <hr/> Contributor address; City; State; Zip Code  Houston, TX 77210-4567	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Charter Communications Inc. Texas PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 5/35 Rpt: 8/67
2 FILER NAME Hernandez, Ana E. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00057411
4 Date 10/03/2024	5 Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00035006 ) Chevron Employees PAC	7 Amount of Contribution (\$) \$1,500.00
6 Contributor address; City; State; Zip Code  San Ramon, CA 94583		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/04/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00085316 ) Cigna PAC	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code  Philadelphia, PA 19192		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Clark, Byron	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code  Houston, TX 77042		
Principal occupation / Job title (See Instructions) law enforcement		Employer (See Instructions) Harris County Precinct 6
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Coleman, Garnet	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code  Houston, TX 77288		
Principal occupation / Job title (See Instructions) consultant		Employer (See Instructions) self-employed
Date 12/10/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00248716 ) Comcast PAC	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code  Philadelphia, PA 19103		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/35 Rpt: 9/67
<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00057411
<b>4</b> Date 09/13/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Congress Avenue Partners <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78701	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00793711</u> ) Constellation Energy Corp. Employee PAC <hr/> Contributor address; City; State; Zip Code  Washington, DC 20001	Amount of Contribution (\$)  \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cortez, Maria <hr/> Contributor address; City; State; Zip Code  Galena Park, TX 77547	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/05/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00585885</u> ) CovestroPAC <hr/> Contributor address; City; State; Zip Code  Pittsburgh, PA 15205	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Crenshaw, Jan <hr/> Contributor address; City; State; Zip Code  Houston, TX 77015	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/35 Rpt: 10/67
<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00057411
<b>4</b> Date 08/01/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Crenshaw, Jan	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77015		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Crenshaw, Jan	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Houston, TX 77015		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Crenshaw, Jan	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Houston, TX 77015		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Crenshaw, Jan	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Houston, TX 77015		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Crenshaw, Jan	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Houston, TX 77015		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 8/35 Rpt: 11/67
2 FILER NAME Hernandez, Ana E. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00057411
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) DEC PAC	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code  Houston, TX 77046	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Danielle Delgadillo Consulting	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  Austin, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Diaz Law Firm PC	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Houston, TX 77011	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dinkins, James	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code  Houston, TX 77023	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/04/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00074096 ) Dow Inc. PAC	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Midland, MI 48674	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/35 Rpt: 12/67
<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00057411
<b>4</b> Date 12/10/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) ENPAC Texas <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78701	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Enchanted Rock Holdings Employee PAC <hr/> Contributor address; City; State; Zip Code  Houston, TX 77002	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Energy Transfer Partners Texas PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Evbagharu, Odus <hr/> Contributor address; City; State; Zip Code  Katy, TX 77449	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Felgner, Alice (Mrs.) <hr/> Contributor address; City; State; Zip Code  La Porte, TX 77571	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 10/35 Rpt: 13/67
<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00057411
<b>4</b> Date 12/10/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foley & Lardner LLP <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75201	<b>7</b> Amount of Contribution (\$)  \$2,500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fort Bend United <hr/> Contributor address; City; State; Zip Code  Houston, TX 77242	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fraga, Bolivar <hr/> Contributor address; City; State; Zip Code  Houston, TX 77003	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Perla <hr/> Contributor address; City; State; Zip Code  Houston, TX 77015	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Roland <hr/> Contributor address; City; State; Zip Code  Houston, TX 77042	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Greenberg Traurig

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 11/35 Rpt: 14/67
<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00057411
<b>4</b> Date 08/02/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrison, Michael	<b>7</b> Amount of Contribution (\$) \$500.00
<b>6</b> Contributor address; City; State; Zip Code  Allen, TX 75013		
<b>8</b> Principal occupation / Job title (See Instructions) Engineer		<b>9</b> Employer (See Instructions) CBRE
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gomez, Israel & Martha	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  Houston, TX 77040		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Anna	Amount of Contribution (\$) \$75.00
Contributor address; City; State; Zip Code  Houston, TX 77020		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Janet	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  Houston, TX 77020		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez Fusilier, Paola	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  Pasadena, TX 77504		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 12/35 Rpt: 15/67
<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00057411
<b>4</b> Date 08/16/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gregory, Bob <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78747	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Principal occupation / Job title (See Instructions) CEO		<b>9</b> Employer (See Instructions) Texas Disposal Systems
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Guerra, Reynaldo <hr/> Contributor address; City; State; Zip Code  Houston, TX 77009	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gulf States Toyota Inc. State PAC <hr/> Contributor address; City; State; Zip Code  Houston, TX 77077	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) HCA Texas Good Government Fund <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75240	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) HEB PAC <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78204	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 13/35 Rpt: 16/67
<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00057411
<b>4</b> Date 08/13/2024	<b>5</b> Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00386029 ) HNTB Holdings PAC <hr/> <b>6</b> Contributor address; City; State; Zip Code  Kansas City, MO 64105	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Health Care Service Corporation PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hillco PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) HomePac of Texas <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Houston Associated General Contractors PAC <hr/> Contributor address; City; State; Zip Code  Houston, TX 77092	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 14/35 Rpt: 17/67
<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00057411
<b>4</b> Date 11/25/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Houston Pilots PAC <hr/> <b>6</b> Contributor address; City; State; Zip Code  Deer Park, TX 77536	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Houston Pilots PAC <hr/> Contributor address; City; State; Zip Code  Deer Park, TX 77536	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Houston Police Officers Union PAC <hr/> Contributor address; City; State; Zip Code  Houston, TX 77007	Amount of Contribution (\$)  \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) IBAT PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) IDS Engineering Group PAC <hr/> Contributor address; City; State; Zip Code  Houston, TX 77040	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 15/35 Rpt: 18/67
<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00057411
<b>4</b> Date 12/10/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) IEC of Texas PAC Fund <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78701	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Incline PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/18/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C001852775 ) Invenergy Investment Company <hr/> Contributor address; City; State; Zip Code  Chicago, IL 60606	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/29/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00128512 ) JPMorgan Chase & Co. PAC <hr/> Contributor address; City; State; Zip Code  Washington, DC 20005	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jimenez, Jose Luis <hr/> Contributor address; City; State; Zip Code  Houston, TX 77015	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) State Farm Agent		Employer (See Instructions) self-employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 16/35 Rpt: 19/67
<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00057411
<b>4</b> Date 08/22/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Khan, Amir & Sabrina <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77056	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions) President		<b>9</b> Employer (See Instructions) Ashland Hospitality
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kickapoo Traditional Tribe of Texas <hr/> Contributor address; City; State; Zip Code  Eagle Pass, TX 78852	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kirby Corp PAC <hr/> Contributor address; City; State; Zip Code  Houston, TX 77007	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kroll, John <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Linebarger Goggan Blair & Sampson, LLP <hr/> Contributor address; City; State; Zip Code  Austin, TX 78760	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 17/35 Rpt: 20/67
2 FILER NAME Hernandez, Ana E. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00057411
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Longbow Partners ..... 6 Contributor address; City; State; Zip Code  Austin, TX 78701	7 Amount of Contribution (\$)  \$350.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/23/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00496307</u> ) Marathon Employees PAC ..... Contributor address; City; State; Zip Code  Findley, OH 45840	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Matz and Company ..... Contributor address; City; State; Zip Code  Austin, TX 78703	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mehmeti, Nick ..... Contributor address; City; State; Zip Code  Dallas, TX 75230	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Nightclub Owner		Employer (See Instructions) Self-employed
Date 07/11/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00097485</u> ) Merck PAC ..... Contributor address; City; State; Zip Code  Washington, DC 20004	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 18/35 Rpt: 21/67
<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00057411
<b>4</b> Date 10/01/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Miller, Robert	<b>7</b> Amount of Contribution (\$) \$500.00
<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75201		
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Locke Lord LLP
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Morin, Thomas	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code  Houston, TX 77005		
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Daily Court Review
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Navarro, Guadalupe	Amount of Contribution (\$) \$350.00
Contributor address; City; State; Zip Code  Houston, TX 77096		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00064774</u> ) NextEra Energy PAC	Amount of Contribution (\$) \$1,500.00
Contributor address; City; State; Zip Code  Juno Beach, FL 33408		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Noriega, Rick	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code  Houston, TX 77023		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 19/35 Rpt: 22/67
<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00057411
<b>4</b> Date 09/30/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Oncor Texas PAC <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75202	<b>7</b> Amount of Contribution (\$)  \$3,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) PAC of the Independent Insurance Agents of Texas <hr/> Contributor address; City; State; Zip Code  Austin, TX 78768	Amount of Contribution (\$)  \$750.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pace, Michael <hr/> Contributor address; City; State; Zip Code  Hartwell, GA 30646	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions) Chairman		Employer (See Instructions) Pace-O-Matic
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Parreno Taylor, Mishell <hr/> Contributor address; City; State; Zip Code  Cypress, TX 77433	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Akerman
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Partida, Gloria <hr/> Contributor address; City; State; Zip Code  Houston, TX 77029	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 20/35 Rpt: 23/67
<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00057411
<b>4</b> Date 12/10/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) PharmPAC <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78757	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Phelps, Jana <hr/> Contributor address; City; State; Zip Code  Pasadena, TX 77505	Amount of Contribution (\$)  \$300.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Plumbers Local Union No. 68 PAC <hr/> Contributor address; City; State; Zip Code  Houston, TX 77249	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Purser, Ray <hr/> Contributor address; City; State; Zip Code  Houston, TX 77006	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) RS&H PAC Texas <hr/> Contributor address; City; State; Zip Code  Austin, TX 78759	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 21/35 Rpt: 24/67
<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00057411
<b>4</b> Date 08/22/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ramabhadran, Sanjay <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77077	<b>7</b> Amount of Contribution (\$)  \$200.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ramirez, Rene <hr/> Contributor address; City; State; Zip Code  Edinburg, TX 78539	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) consultant		Employer (See Instructions) self-employed
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Red Rock Texas PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Riceland Consulting <hr/> Contributor address; City; State; Zip Code  Eagle Lake, TX 77434	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rios, Dolores <hr/> Contributor address; City; State; Zip Code  McAllen, TX 78504	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 22/35 Rpt: 25/67
<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00057411
<b>4</b> Date 08/22/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Robert Gallegos Campaign <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77223	<b>7</b> Amount of Contribution (\$)  \$150.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Robinson, Douglas <hr/> Contributor address; City; State; Zip Code  Abilene, TX 79605	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Natura Resources
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rodas, Eric & Claudia <hr/> Contributor address; City; State; Zip Code  Shenandoah, TX 77384	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rodriguez, Clemente <hr/> Contributor address; City; State; Zip Code  Houston, TX 77044	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rodriguez, James <hr/> Contributor address; City; State; Zip Code  Houston, TX 77062	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 23/35 Rpt: 26/67
<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00057411
<b>4</b> Date 12/10/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ron Lewis & Associates <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78701	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rural Friends of Electric Cooperatives <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$)  \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rydman, John <hr/> Contributor address; City; State; Zip Code  Houston, TX 77007	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Spec's
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sameh, Mohamed <hr/> Contributor address; City; State; Zip Code  League City, TX 77573	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Managing Director		Employer (See Instructions) Sesco
Date 08/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Service Corporation International PAC <hr/> Contributor address; City; State; Zip Code  Houston, TX 77219	Amount of Contribution (\$)  \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 24/35 Rpt: 27/67
<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00057411
<b>4</b> Date 08/22/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Shafaii, Raj	<b>7</b> Amount of Contribution (\$) \$350.00
<b>6</b> Contributor address; City; State; Zip Code  Pasadena, TX 77505		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Soto, James	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code  Sugar Land, TX 77479		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Soto Law Firm
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Southern Glazer's PAC of Texas	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code  Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sreerama, Karun	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code  Houston, TX 77059		
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) Concept Engineers
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) TEXPAC Texas Medical Association PAC	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code  Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 25/35 Rpt: 28/67
<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00057411
<b>4</b> Date 12/10/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) TREPAC/Texas Association of Realtors PAC <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78768	<b>7</b> Amount of Contribution (\$)  \$5,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) TREPAC/Texas Association of Realtors PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78768	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) TSAPAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$)  \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) TXCPA PAC <hr/> Contributor address; City; State; Zip Code  Addison, TX 75061	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) TXTA TruckPAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 26/35 Rpt: 29/67
<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00057411
<b>4</b> Date 11/05/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tamez, Adriana <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77023	<b>7</b> Amount of Contribution (\$)  \$150.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Targa Resources Corp. Texas PAC <hr/> Contributor address; City; State; Zip Code  Houston, TX 77002	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/24/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00479998 ) Tenaska Employees Texas PAC <hr/> Contributor address; City; State; Zip Code  Omaha, NE 68154	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texans for Lawsuit Reform PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texans for Reasonable Solutions PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78741	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 27/35 Rpt: 30/67
<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00057411
<b>4</b> Date 12/10/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas AFL-CIO STATE COPE FUND	<b>7</b> Amount of Contribution (\$) \$500.00
<b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78711		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Academy of Family Physicians	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code  Austin, TX 78727		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Apartment Association PAC	Amount of Contribution (\$) \$750.00
Contributor address; City; State; Zip Code  Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Association of Health Plans PAC	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code  Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Association of Pawn Brokers PAC	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code  Crawford, TX 76638		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 28/35 Rpt: 31/67
2 FILER NAME Hernandez, Ana E. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00057411
4 Date 08/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Automobile Dealers Association PAC ..... 6 Contributor address; City; State; Zip Code  Austin, TX 78701	7 Amount of Contribution (\$)  \$2,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Automotive Recylcers Association ..... Contributor address; City; State; Zip Code  Midland, TX 79706	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Bankers Association PAC ..... Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Beverage Alliance ..... Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$)  \$2,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Building Branch AGC PAC ..... Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 29/35 Rpt: 32/67
<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00057411
<b>4</b> Date 09/09/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Consumer Lenders PAC <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75201	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Cornerstone Credit Union League PAC <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75265	Amount of Contribution (\$)  \$2,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Democratic Women <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Dental Association PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Food & Fuel Association PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 30/35 Rpt: 33/67
<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00057411
<b>4</b> Date 11/20/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Land Title Association PAC	<b>7</b> Amount of Contribution (\$) \$2,500.00
<b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78703		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Leads PAC	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code  Austin, TX 78767		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas McDonald's Operators Association PAC	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code  Athens, TX 75751		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Mortgage Bankers PAC	Amount of Contribution (\$) \$2,000.00
Contributor address; City; State; Zip Code  Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Optometric PAC	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code  Austin, TX 78705		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 31/35 Rpt: 34/67
<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00057411
<b>4</b> Date 12/10/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Sands PAC <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78701	<b>7</b> Amount of Contribution (\$)  \$4,500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Society of Architects Committee <hr/> Contributor address; City; State; Zip Code  Austin, TX 78702	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas State Association of Fire Fighters Action Committee <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$)  \$750.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas State Teachers Association PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78759	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Towing & Storage Association <hr/> Contributor address; City; State; Zip Code  Spring, TX 77386	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 32/35 Rpt: 35/67
<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00057411
<b>4</b> Date 12/10/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Trial Lawyers Association PAC	<b>7</b> Amount of Contribution (\$) \$5,000.00
<b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78701		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) The Garcia Group	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code  Austin, TX 78767		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00284885 ) The Home Depot PAC	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code  Washington, DC 20004		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) The Storage Place	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code  Corpus Christi, TX 78412		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) TxANA PAC	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code  Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 33/35 Rpt: 36/67
<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00057411
<b>4</b> Date 08/06/2024	<b>5</b> Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00010470 ) Union Pacific Corporation Fund for Effective Government	<b>7</b> Amount of Contribution (\$) \$2,000.00
<b>6</b> Contributor address; City; State; Zip Code  Washington, DC 20005		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C001853716 ) United Airlines PAC	Amount of Contribution (\$) \$750.00
Contributor address; City; State; Zip Code  Chicago, IL 60622		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) University of Houston PAC	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code  Houston, TX 77046		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Valdez, Jerry	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code  Austin, TX 78711		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self-employed
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Verizon Communications Inc. Good Government Club - Texas	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code  Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 34/35 Rpt: 37/67
<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00057411
<b>4</b> Date 08/22/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Vilandos, Marilyn	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77082		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Vistra Employee PAC	Amount of Contribution (\$)  \$2,500.00
Contributor address; City; State; Zip Code  Irving, TX 75039		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00093054 ) Walmart Inc. PAC	Amount of Contribution (\$)  \$1,500.00
Contributor address; City; State; Zip Code  Bentonville, AR 72716		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wantman, David	Amount of Contribution (\$)  \$500.00
Contributor address; City; State; Zip Code  Wellington, FL 33414		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) WGI
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Whitmire & Munoz Political Fund	Amount of Contribution (\$)  \$500.00
Contributor address; City; State; Zip Code  Houston, TX 77007		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 35/35 Rpt: 38/67
<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00057411
<b>4</b> Date 12/10/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wholesale Beer Distributors of Texas PAC <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78701	<b>7</b> Amount of Contribution (\$)  \$1,500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wine and Spirits Wholesalers of Texas PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Yanamandala, Ravi (Mr.) <hr/> Contributor address; City; State; Zip Code  Pearland, TX 77584	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Geotest Engineering, Inc.
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zenteno, Gloria <hr/> Contributor address; City; State; Zip Code  Houston, TX 77061	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/29 Rpt: 39/67	<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00057411
<b>4</b> Date 11/01/2024	<b>5</b> Payee name 4Imprint USA	
<b>6</b> Amount (\$) \$1,483.99	<b>7</b> Payee address; City; State; Zip Code 101 Commerce St.  Oshkosh, WI 54901	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office equipment
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2024	Payee name ActBlue	
Amount (\$) \$19.75	Payee address; City; State; Zip Code P.O. Box 441146  Somerville, MA 02144	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online fundraising fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2024	Payee name ActBlue	
Amount (\$) \$59.65	Payee address; City; State; Zip Code P.O. Box 441146  Somerville, MA 02144	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online fundraising fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 2/29 Rpt: 40/67	<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00057411
<b>4</b> Date 11/05/2024	<b>5</b> Payee name ActBlue	
<b>6</b> Amount (\$) \$16.21	<b>7</b> Payee address; City; State; Zip Code P.O. Box 441146  Somerville, MA 02144	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online fundraising fee
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/06/2024	Payee name ActBlue	
Amount (\$) \$24.10	Payee address; City; State; Zip Code P.O. Box 441146  Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online fundraising fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/08/2024	Payee name ActBlue	
Amount (\$) \$0.40	Payee address; City; State; Zip Code P.O. Box 441146  Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online fundraising fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 3/29 Rpt: 41/67	<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00057411
<b>4</b> Date 09/01/2024	<b>5</b> Payee name ActBlue	
<b>6</b> Amount (\$) \$19.75	<b>7</b> Payee address; City; State; Zip Code P.O. Box 441146  Somerville, MA 02144	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online fundraising fee
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/25/2024	Payee name ActBlue	
Amount (\$) \$203.46	Payee address; City; State; Zip Code P.O. Box 441146  Somerville, MA 02144	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online fundraising fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/18/2024	Payee name ActBlue	
Amount (\$) \$19.75	Payee address; City; State; Zip Code P.O. Box 441146  Somerville, MA 02144	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online fundraising fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 4/29 Rpt: 42/67	<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00057411
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<b>4</b> Date 08/04/2024	<b>5</b> Payee name ActBlue
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<b>6</b> Amount (\$) \$0.40	<b>7</b> Payee address; City; State; Zip Code P.O. Box 441146  Somerville, MA 02144
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online fundraising fee
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/07/2024	Payee name ActBlue
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Amount (\$) \$0.40	Payee address; City; State; Zip Code P.O. Box 441146  Somerville, MA 02144
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online fundraising fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/11/2024	Payee name Agave Democratic Infrastructure Fund
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Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 1100 13th St. NW  Washington, DC 20005
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense gotv donation
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F1: Sch: 5/29 Rpt: 43/67	<b>2</b>	FILER NAME Hernandez, Ana E. (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00057411
<b>4</b>	Date 07/16/2024	<b>5</b>	Payee name American Express		
<b>6</b>	Amount (\$) \$160.00	<b>7</b>	Payee address; City; State; Zip Code P.O. Box 650448  Dallas, TX 75265		
<b>8</b>	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense membership fee		
<b>9</b>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held			
	Date 10/17/2024		Payee name Area 5 Democrats		
	Amount (\$) \$250.00		Payee address; City; State; Zip Code 3800 Spencer Hwy., Ste. L  Pasadena, TX 77503		
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense GOTV donation		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held			
	Date 12/03/2024		Payee name Avas Flowers		
	Amount (\$) \$205.58		Payee address; City; State; Zip Code 200 Continental Divide  Newark, DE 19713		
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense flowers for constituent's funeral		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held			

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 6/29 Rpt: 44/67	<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00057411
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<b>4</b> Date 08/29/2024	<b>5</b> Payee name Batres, Jose
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<b>6</b> Amount (\$) \$350.00	<b>7</b> Payee address; City; State; Zip Code 7402 Lawndale  Houston, TX 77012
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contract labor
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/16/2024	Payee name Baytown Chamber of Commerce
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Amount (\$) \$300.00	Payee address; City; State; Zip Code 1300 Rollingbrook Dr.  Baytown, TX 77521
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense membership dues
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/20/2024	Payee name CVPE Educational Forum
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Amount (\$) \$500.00	Payee address; City; State; Zip Code 619 E. 11 1/2 St.  Houston, TX 77008
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense donation
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 7/29 Rpt: 45/67	<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00057411
<b>4</b> Date 08/26/2024	<b>5</b> Payee name Cadillac Bar	
<b>6</b> Amount (\$) \$2,541.91	<b>7</b> Payee address; City; State; Zip Code 1802 Shepherd  Houston, TX 77007	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense reception
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/23/2024	Payee name Campaign Strategies, Inc.	
Amount (\$) \$3,750.00	Payee address; City; State; Zip Code P.O. Box 3308  Houston, TX 77253	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense GOTV mailer
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/03/2024	Payee name Capitol Gift Shop	
Amount (\$) \$541.25	Payee address; City; State; Zip Code 1400 N. Congress  Austin, TX 78701	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense constituent gifts
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F1: Sch: 8/29 Rpt: 46/67	<b>2</b>	FILER NAME Hernandez, Ana E. (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00057411
<b>4</b>	Date 10/25/2024	<b>5</b>	Payee name Criminal Justice Reform Caucus		
<b>6</b>	Amount (\$) \$1,000.00	<b>7</b>	Payee address; City; State; Zip Code 2601 N. Stanton, Ste. A  El Paso, TX 79902		
<b>8</b>	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense donation		
<b>9</b>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 12/20/2024		Payee name Delgado, Maria		
	Amount (\$) \$250.00		Payee address; City; State; Zip Code 406 Baldinger  Houston, TX 77011		
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contract labor		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 12/16/2024		Payee name Delgado, Maria		
	Amount (\$) \$500.00		Payee address; City; State; Zip Code 406 Baldinger  Houston, TX 77011		
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contract labor		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 9/29 Rpt: 47/67	<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00057411
<b>4</b> Date 11/04/2024	<b>5</b> Payee name Delgado, Maria	
<b>6</b> Amount (\$) \$500.00	<b>7</b> Payee address; City; State; Zip Code 406 Baldinger  Houston, TX 77011	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contract labor
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 10/02/2024	Payee name Delgado, Maria	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 406 Baldinger  Houston, TX 77011	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contract labor
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 09/10/2024	Payee name Delgado, Maria	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 406 Baldinger  Houston, TX 77011	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contract labor
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 10/29 Rpt: 48/67	<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00057411
<b>4</b> Date 08/26/2024	<b>5</b> Payee name Delgado, Maria	
<b>6</b> Amount (\$) \$1,000.00	<b>7</b> Payee address; City; State; Zip Code 406 Baldinger  Houston, TX 77011	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contract labor
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/13/2024	Payee name East End Alliance	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 1209 Elliston  Houston, TX 77023	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense gotv donation
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name El Ahorro Supermarket	
Amount (\$) \$190.40	Payee address; City; State; Zip Code 10341 Palestine  Jacinto City, TX 77029	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense refreshments for district office open house
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 11/29 Rpt: 49/67	<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00057411
<b>4</b> Date 10/17/2024	<b>5</b> Payee name El Centro de Corazon	
<b>6</b> Amount (\$) \$250.00	<b>7</b> Payee address; City; State; Zip Code 7037 Capitol  Houston, TX 77011	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense donation
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/11/2024	Payee name Family Dollar	
Amount (\$) \$35.02	Payee address; City; State; Zip Code 514 Normandy  Houston, TX 77015	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/06/2024	Payee name From you Flowers	
Amount (\$) \$57.35	Payee address; City; State; Zip Code 143 Mill Rock Rd. East  Old Saybrook, CT 06475	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense flowers for constituent funeral
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 12/29 Rpt: 50/67	<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00057411
<b>4</b> Date 10/07/2024	<b>5</b> Payee name Galena Park/Jacinto City Rotary Club	
<b>6</b> Amount (\$) \$300.00	<b>7</b> Payee address; City; State; Zip Code P.O. Box 736  Galena Park, TX 77547	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense luncheon sponsorship
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/09/2024	Payee name Go Daddy.com	
Amount (\$) \$166.17	Payee address; City; State; Zip Code 14455 N. Hayden  Scottsdale, AZ 85251	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense website domain
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/14/2024	Payee name HEB	
Amount (\$) \$157.94	Payee address; City; State; Zip Code 3663 Washington Ave.  Houston, TX 77007	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 13/29 Rpt: 51/67	<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00057411
<b>4</b> Date 11/02/2024	<b>5</b> Payee name HEB	
<b>6</b> Amount (\$) \$316.30	<b>7</b> Payee address; City; State; Zip Code 3663 Washington Ave.  Houston, TX 77007	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food for volunteers
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/22/2024	Payee name HEB	
Amount (\$) \$319.57	Payee address; City; State; Zip Code 3663 Washington Ave.  Houston, TX 77007	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/02/2024	Payee name JW Marriott	
Amount (\$) \$1,226.11	Payee address; City; State; Zip Code 23808 Resort Parkway  San Antonio, TX 78261	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MALC annual conference
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 14/29 Rpt: 52/67	<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00057411
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<b>4</b> Date 12/20/2024	<b>5</b> Payee name Jacobco, Ann
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<b>6</b> Amount (\$) \$250.00	<b>7</b> Payee address; City; State; Zip Code 3401 W. Parmer Ln.  Austin, TX 78727
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contract labor
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/03/2024	Payee name Jacobco, Ann
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Amount (\$) \$100.00	Payee address; City; State; Zip Code 3401 W. Parmer Ln.  Austin, TX 78727
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contract labor
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/20/2024	Payee name Jamail, Linda
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Amount (\$) \$250.00	Payee address; City; State; Zip Code 10710 Flaxman St.  Houston, TX 77029
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contract labor
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 15/29 Rpt: 53/67	<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00057411
<b>4</b> Date 12/12/2024	<b>5</b> Payee name Jamail, Linda	
<b>6</b> Amount (\$) \$100.00	<b>7</b> Payee address; City; State; Zip Code 10710 Flaxman St.  Houston, TX 77029	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contract labor
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 08/26/2024	Payee name Jamail, Linda	
Amount (\$) \$250.00	Payee address; City; State; Zip Code 10710 Flaxman St.  Houston, TX 77029	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contract labor
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 08/08/2024	Payee name KPC #139	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 12719 Northcase Ridge Ln  Houston, TX 77044	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense donation for scholarship fund
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 16/29 Rpt: 54/67	<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00057411
<b>4</b> Date 08/06/2024	<b>5</b> Payee name Kindness Empowers You	
<b>6</b> Amount (\$) \$1,000.00	<b>7</b> Payee address; City; State; Zip Code 1406 Godwin  Houston, TX 77023	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense donation
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/11/2024	Payee name Kindness Empowers You	
Amount (\$) \$700.00	Payee address; City; State; Zip Code 1406 Godwin  Houston, TX 77023	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense golf tournament sponsorship
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/05/2024	Payee name Kroger	
Amount (\$) \$113.80	Payee address; City; State; Zip Code 12620 Woodforest  Houston, TX 77015	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 17/29 Rpt: 55/67	<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00057411
<b>4</b> Date 12/20/2024	<b>5</b> Payee name Livaudais, Christopher	
<b>6</b> Amount (\$) \$250.00	<b>7</b> Payee address; City; State; Zip Code 11623 Q Ranch Rd.  Austin, TX 78755	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contract labor
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/15/2024	Payee name Luna Produce	
Amount (\$) \$461.44	Payee address; City; State; Zip Code 2576 Airline Dr.  Houston, TX 77009	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense goodie bags for seniors
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/13/2024	Payee name Magnolia Park Sharks	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 541 S. 75th St.  Houston, TX 77023	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense team sponsorship
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 18/29 Rpt: 56/67	<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00057411
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<b>4</b> Date 12/30/2024	<b>5</b> Payee name MailChimp
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<b>6</b> Amount (\$) \$57.56	<b>7</b> Payee address; City; State; Zip Code 675 Ponce De Leon Ave. NE  Atlanta, GA 30308
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense email distribution fee
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/29/2024	Payee name MailChimp
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Amount (\$) \$57.56	Payee address; City; State; Zip Code 675 Ponce De Leon Ave. NE  Atlanta, GA 30308
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense email distribution fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/28/2024	Payee name MailChimp
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Amount (\$) \$57.56	Payee address; City; State; Zip Code 675 Ponce De Leon Ave. NE  Atlanta, GA 30308
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense email distribution fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 19/29 Rpt: 57/67	<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00057411
<b>4</b> Date 09/30/2024	<b>5</b> Payee name MailChimp	
<b>6</b> Amount (\$) \$57.56	<b>7</b> Payee address; City; State; Zip Code 675 Ponce De Leon Ave. NE  Atlanta, GA 30308	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense email distribution fee
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/28/2024	Payee name MailChimp	
Amount (\$) \$57.56	Payee address; City; State; Zip Code 675 Ponce De Leon Ave. NE  Atlanta, GA 30308	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense email distribution fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/29/2024	Payee name MailChimp	
Amount (\$) \$57.56	Payee address; City; State; Zip Code 675 Ponce De Leon Ave. NE  Atlanta, GA 30308	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense email distribution fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 20/29 Rpt: 58/67	<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00057411
<b>4</b> Date 12/04/2024	<b>5</b> Payee name Mexican American Legislative Caucus	
<b>6</b> Amount (\$) \$1,500.00	<b>7</b> Payee address; City; State; Zip Code 202 West 13th Street  Austin, TX 78701	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense membership dues
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 10/22/2024	Payee name Michael Gomez Campaign	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code P.O. Box 56386  Houston, TX 77256	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 08/08/2024	Payee name Nashville Wraps	
Amount (\$) \$228.80	Payee address; City; State; Zip Code 242 Molly Walton Dr.  Hendersonville, TN 37075	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense gifts for seniors
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 21/29 Rpt: 59/67	<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00057411
<b>4</b> Date 09/02/2024	<b>5</b> Payee name Navidad en el Barrio	
<b>6</b> Amount (\$) \$375.00	<b>7</b> Payee address; City; State; Zip Code 8223 Bo Jack Drive  Houston, TX 77040	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense gala sponsorship
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/09/2024	Payee name North Channel Chamber of Commerce	
Amount (\$) \$225.00	Payee address; City; State; Zip Code 13301 I-10 East Freeway, Ste. 100  Houston, TX 77015	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense membership dues
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/01/2024	Payee name North Channel Chamber of Commerce	
Amount (\$) \$250.00	Payee address; City; State; Zip Code 13301 I-10 East Freeway, Ste. 100  Houston, TX 77015	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense veterans luncheon sponsorship
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 22/29 Rpt: 60/67	<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00057411
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<b>4</b> Date 09/26/2024	<b>5</b> Payee name North Channel Chamber of Commerce
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<b>6</b> Amount (\$) \$360.00	<b>7</b> Payee address; City; State; Zip Code 13301 I-10 East Freeway, Ste. 100  Houston, TX 77015
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense luncheon sponsorship
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/08/2024	Payee name North Channel Chamber of Commerce
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Amount (\$) \$50.00	Payee address; City; State; Zip Code 13301 I-10 East Freeway, Ste. 100  Houston, TX 77015
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense monthly luncheon
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/18/2024	Payee name North Channel Star
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Amount (\$) \$190.00	Payee address; City; State; Zip Code 5906 Star Lane  Houston, TX 77057
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense holiday advertisement
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 23/29 Rpt: 61/67	<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00057411
<b>4</b> Date 11/07/2024	<b>5</b> Payee name Office Depot	
<b>6</b> Amount (\$) \$24.03	<b>7</b> Payee address; City; State; Zip Code 13435 East Freeway  Houston, TX 77015	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supplies
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/08/2024	Payee name Petra Guillen Foundation	
Amount (\$) \$100.00	Payee address; City; State; Zip Code P.O. Box 9114  Houston, TX 77261	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense donation
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/19/2024	Payee name Pizzini's	
Amount (\$) \$36.12	Payee address; City; State; Zip Code 927 Mercury Dr.  Jacinto City, TX 77029	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense staff lunch
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 24/29 Rpt: 62/67	<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00057411
<b>4</b> Date 09/30/2024	<b>5</b> Payee name Pizzini's	
<b>6</b> Amount (\$) \$43.00	<b>7</b> Payee address; City; State; Zip Code 927 Mercury Dr.  Jacinto City, TX 77029	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense staff lunch
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/07/2024	Payee name Porras Prontito, Inc.	
Amount (\$) \$400.00	Payee address; City; State; Zip Code 6301 Market St.  Houston, TX 77020	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food for community forum
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/02/2024	Payee name Sam's Club	
Amount (\$) \$82.04	Payee address; City; State; Zip Code 13600 East Freeway  Houston, TX 77015	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 25/29 Rpt: 63/67	<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00057411
<b>4</b> Date 10/31/2024	<b>5</b> Payee name Sam's Club	
<b>6</b> Amount (\$) \$70.21	<b>7</b> Payee address; City; State; Zip Code 13600 East Freeway  Houston, TX 77015	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supplies
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/07/2024	Payee name Sam's Club	
Amount (\$) \$45.61	Payee address; City; State; Zip Code 13600 East Freeway  Houston, TX 77015	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/30/2024	Payee name Sam's Club	
Amount (\$) \$55.94	Payee address; City; State; Zip Code 13600 East Freeway  Houston, TX 77015	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 26/29 Rpt: 64/67	<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00057411
<b>4</b> Date 08/14/2024	<b>5</b> Payee name Sam's Club	
<b>6</b> Amount (\$) \$174.65	<b>7</b> Payee address; City; State; Zip Code 13600 East Freeway  Houston, TX 77015	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense gifts for seniors
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/13/2024	Payee name Sam's Club	
Amount (\$) \$106.04	Payee address; City; State; Zip Code 13600 East Freeway  Houston, TX 77015	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense offices supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/03/2024	Payee name Subway	
Amount (\$) \$103.47	Payee address; City; State; Zip Code 11013 Market St  Jacinto City, TX 77029	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense refreshments for distict office open house
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 27/29 Rpt: 65/67	<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00057411
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<b>4</b> Date 12/11/2024	<b>5</b> Payee name Target
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<b>6</b> Amount (\$) \$114.74	<b>7</b> Payee address; City; State; Zip Code 5621 N. Interstate Hwy 35  Austin, TX 78723
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supplies
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/03/2024	Payee name Texas House Democratic Caucus
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Amount (\$) \$1,500.00	Payee address; City; State; Zip Code P.O. Box 12453  Austin, TX 78711
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense membership dues
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/10/2024	Payee name U.S. Postmaster
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Amount (\$) \$102.60	Payee address; City; State; Zip Code 5901 Market St.  Houston, TX 77020
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense postage
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 28/29 Rpt: 66/67	<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00057411
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<b>4</b> Date 11/07/2024	<b>5</b> Payee name U.S. Postmaster
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<b>6</b> Amount (\$) \$34.50	<b>7</b> Payee address; City; State; Zip Code 5901 Market St.  Houston, TX 77020
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense postage
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/18/2024	Payee name U.S. Postmaster
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Amount (\$) \$436.00	Payee address; City; State; Zip Code 5901 Market St.  Houston, TX 77020
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PO Box rental fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/16/2024	Payee name Volunteer Services Council of Richmond SSLC
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Amount (\$) \$100.00	Payee address; City; State; Zip Code 2100 Preston  Richmond, TX 77469
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense donation
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 29/29 Rpt: 67/67	<b>2</b> FILER NAME Hernandez, Ana E. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00057411
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<b>4</b> Date 10/31/2024	<b>5</b> Payee name Walgreens
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<b>6</b> Amount (\$) \$288.15	<b>7</b> Payee address; City; State; Zip Code 11107 Market  Jacinto City, TX 77029
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense gifts for seniors
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/13/2024	Payee name Walmart
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Amount (\$) \$697.56	Payee address; City; State; Zip Code 1107 Shaver  Pasadena, TX 77506
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense bicycles for toy giveaway
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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