CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to comple	te this form.	1 Filer ID (Ethics Comm 0005479		2 Total pages filed: 17
3 CANDIDATE /	MS / MRS / MR	FIRST	<u> </u>	MI	OFFICE USE ONLY
OFFICEHOLDER NAME	The Honorable	Hubert			
INAME					Date Received
					ELECTRONICALLY FILED
	NICKNAME	LAST		SUFFIX	01/15/2025
		Vo			
4 CANDIDATE /	ADDRESS / PO BOX; APT /	SUITE#; CIT	Υ;	ZIP CODE	Date Hand-delivered or Date Postmarked
OFFICEHOLDER	11360 Bellaire Blvd., Suite	880			
MAILING ADDRESS					Receipt # Amount
Change of Address	Houston, TX 77072				
Gridings 677 darses	Tiousion, TX TTOTZ				Date Processed
					Date Imaged
E 044541041	140 / 14D0 / 14D	FIROT			
5 CAMPAIGN TREASURER		FIRST		MI	
NAME	Mr.	Shadrick Damo	one		
		LAST		SUFFIX	
		Bogany			
6 CAMPAIGN	STREET ADDRESS (NO PO E	BOX PLEASE);	AP	T / SUITE #; CITY	; STATE; ZIP CODE
TREASURER ADDRESS	9121-C Stella Link				
(Residence or Business)	Houston, TX 77025				
7 CAMPAIGN TREASURER		E NUMBER E	EXTENSION		
PHONE	(713) 667-1000				
8 REPORT TYPE		1		- <i></i> F	-
1176	X January 15	30th day before	election	Runoff	15th day after campaign treasurer appointment (officeholder only)
	July 15	8th day before 6	election	Exceeded modified	Final Report (Attach C/OH-FR)
		1		reporting limit	
9 PERIOD	Month Day Year			Month Day	Year
COVERED	10/27/2024	TH	IROUGH	12/31/20	
10 ELECTION	ELECTION DATE			ELECTION TYPE	
	Month Day Year		rimary	Runoff	Other
			eneral	Special	_
			enerai	Special	
				T	
11 OFFICE	OFFICE HELD (if any)	-+ 1 10		12 OFFICE SOUGH	T (if known)
	State Representative Distri	ct 149			
		GO T	O PAGE 2		

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 17

13 C / OH NAME	Vo, Hubert (The Hone	orable)	14 Filer ID (00054795	Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expendit These expenditures may have been made without officeholders are required to report this information	the candidate's or office	holder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS	
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	S)	\$ 22,600.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 23,935.18
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 100,998.77
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT		I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.		
		The H	onorable Hubert Vo	
		Signature o	f Candidate or Officehol	der
AFFIX NO	TARY STAMP / SEAL ABO	DVE		
Sworn to and subs	cribed before me, by the s	aid	, this the _	day
of	, 20, to ce	ertify which, witness my hand and seal of office.		
Signature of office	cer administering	Printed name of officer administering	Title of officer	administering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

			C	OVER SHE	ET PG 3 3 of 17
	ER NAN , Hubeı	(Ethics Commis	ssion Filers)		
		E SUBTOTALS SCHEDULE		SUBTOTA	AL AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	22,600.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.	5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS				20,860.11
6.	6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS				
7.	7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS				
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.	Х	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	3,075.07
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 1/5 Rpt: 4/17		
2	FILER NAME Vo, Hubert (The Honorable)		3	Filer ID (Ethics Commission 00054795	on Filers)	
4	Date 11/06/2024 5 Full name of contributor out-of-state PAC (ID#:) Bac Tran, Hoai 6 Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$100.00			
_	Deinsinal	Pearland, TX 77584	2 Farely (Carly Instruction				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)			
	Date Full name of contributor out-of-state PAC (ID#:) 12/05/2024 Beer Aliance of Texas PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00		
	Austin, TX 78701 Principal occupation / Job title (See Instructions) Employer (See Instructions)						
		, , , , , , , , , , , , , , , , , , , ,					
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ Comcast Corporation and NBC Universal PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$500.00	
		Philedelphia, PA 19103					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ HOMEPAC of Texas Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$250.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_Hillco PAC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			

MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1			
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 2/5 Rpt: 5/17		
2	FILER NAME Vo, Hubert (The Honorable)			3	Filer ID (Ethics Commission 00054795	on Filers)
4			Amount of Contribution (\$)	\$500.00			
		Austin, TX 78701					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions)		
	Date Full name of contributor out-of-state PAC (ID#:) 12/12/2024 Johnson, Michael Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00		
	Austin, TX 78701						
	Principal occupation / Job title (See Instructions) Consultant Employer (See Instructions Brentwood Public Affairs						
	Date Full name of contributor out-of-state PAC (ID#:) 11/25/2024 Legacy 44 Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00		
		Austin, TX 78756					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date Full name of contributor out-of-state PAC (ID#:) 12/11/2024 Linebarger Goggan Blair & Sampson LLP Contributor address; City; State; Zip Code Austin, TX 78760			Amount of Contribution (\$)	\$500.00		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date Full name of contributor out-of-state PAC (ID#:) Oncor Texas Political Action Committee of Oncor Electric Delivery Contributor address; City; State; Zip Code Dallas, TX 75202-1234			Amount of Contribution (\$)	\$2,000.00		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 3/5 Rpt: 6/17		
2	FILER NAME Vo, Hubert (The Honorable)		3	Filer ID (Ethics Commissio 00054795	n Filers)	
4	Date 11/25/2024 5 Full name of contributor		Amount of Contribution (\$)	\$1,000.00			
_		Irving, TX 75062					
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)			
	Date Full name of contributor out-of-state PAC (ID#:) 11/26/2024 Texas Apartment Association Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$750.00		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 10/29/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Association of Pawn Brokers PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00	
	Daine in all account	Austin, TX 78701	Farely (Contraction)				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 12/12/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Consumer Leaders PAC Contributor address; City; State; Zip Code Greenville, SC 29615			Amount of Contribution (\$)	\$500.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 11/12/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Dental Association PAC Contributor address; City; State; Zip Code Austin, TX 78704			Amount of Contribution (\$)	\$500.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDULE A1		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 4/5 Rpt: 7/17	
2	FILER NAME Vo, Hubert (The Honorable)		3	Filer ID (Ethics Commission 00054795	on Filers)
4	Date 5 Full name of contributor out-of-state PAC (ID#:) Texas McDonald's Operators Association PAC 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$2,500.00	
_		Athens, TX 75751	I			
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 11/04/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Mortgage Bankers PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,500.00
	Austin, TX 78701 Principal occupation / Job title (See Instructions) Employer (See Instructions)					
	· 	, , ,				
	Date 11/04/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Mortgage Bankers PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,500.00
		Austin, TX 78701				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/27/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Optometric PAC Contributor address; City; State; Zip Code Austin, TX 78705)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	()		
	Date 11/19/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Trial Lawyers Association PAC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$2,500.00
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		

	MONET	TARY POLITICAL CONTRIBU	JTIONS	SCHEDULE	■ A1
	The Instru	ction Guide explains how to complete t	1 Total pages Schedule A1: Sch: 5/5 Rpt: 8/17		
2	FILER NAME Vo, Hubert (The Honorable)		3 Filer ID (Ethics Commission 00054795	Filers)
4		 Full name of contributor	C (ID#:)	7 Amount of Contribution (\$)	\$1,000.00
		Minneapolis, MN 55402			
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instruction	ons)	
	Date 12/11/2024	Full name of contributor out-of-state PAC Wholesale Beer Distributors of Texas PAC Contributor address; City; State; Zip Code	· · · · · · · · · · · · · · · · · · ·	Amount of Contribution (\$)	\$1,000.00
	Principal occu	Austin, TX 78701 upation / Job title (See Instructions)	Employer (See Instruction	ons)	

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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)

Credit Card Pay	ment	The Instruction Gui	de explains how to co	omple	ete this form.		
1 Total pages S	Schedule F1:	2 FILER NAME			3	Filer ID	(Ethics Commission Filers)
Sch: 1/4 F	Rpt: 9/17	Vo, Hubert (The Honorable)				00054795	
4 Date		5 Payee name			<u>'</u>		
10/28/2024		Campaign Strategies					
6 Amount (\$)		7 Payee address; City;	State; Zip Co	ode			
\$	\$13,015.00	PO Box 3308					
		Houston, TX 77253					
8 PURPOS		(a) Category (See Categories listed at the	ton of this schedule)	(b)	Description		
OF	IDE	Advertising Expense	top of this schedule)	l` <i>′</i>	Check if travel outsi	de of Texas. Com	plete Schedule T.
EXPENDITU	JKE				Check if Austin, TX,	officeholder living	expense
					Mailer		
				<u> </u>			
9 Complete ON expenditure to		Candidate/Officeholder name	Office sou	ught		Office he	eld
Date		Payee name					
11/12/2024		Diep, Suong					
Amount (\$)		Payee address; City;	State; Zip Co	ode			
	\$700.00	27806 Burchfield Grove Ln					
		Katy, TX 77494					
PURPOS	E	(a) Category (See Categories listed at the	e top of this schedule)	(b)	Description		
OF EXPENDITU	JRE	Salaries/Wages/Contract Lal	oor		Check if travel outsi Check if Austin, TX,		
					Salary	officerolder living	expense
					Calary		
Complete ON	ILY if direct	Candidate/Officeholder name	Office sou	<u>l</u> ught		Office he	eld
expenditure to		+		J			
Date		Payee name					
11/12/2024		Ngo, Hanh					
Amount (\$)		Payee address; City;	State; Zip Co	ode			
γ ιποαπε (Φ)	\$480.00	27806 Burchfield Grove Land	•	ouc			
	, , , , , ,	_,					
		Katy, TX 77494					
PURPOS				(h)	Description		
OF		(a) Category (See Categories listed at the Salaries/Wages/Contract Lab		(6)	Check if travel outsi	de of Texas. Com	plete Schedule T.
EXPENDITU	JRE	Salanes/Wages/Contract Lat	501		Check if Austin, TX,	officeholder living	expense
					Salary		
Complete <u>ON</u> expenditure to		Candidate/Officeholder name	Office sou	ught		Office he	eld
CAPCHUILLIE II	o benefit C/OI	1					

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 2/4 Rpt: 10/17	Vo, Hubert (The Honorable) 00054795
4	Date	5 Payee name
	11/12/2024	Ngo, Hanh
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$235.52	27806 Burchfield Grove Lane
		Katy, TX 77494
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Loan Repayment/Reimbursement Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Reimbursement
		Keimbarsement
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Davies same
	11/12/2024	Payee name
		Ngo, Hanh
	Amount (\$)	Payee address; City; State; Zip Code
	\$690.00	27806 Burchfield Grove Lane
		Katy, TX 77494
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin TX officeholder living expenses.
		Check if Austin, TX, officeholder living expense Salary
		Salary
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
-	Date	Payee name
	11/15/2024	Payee name Sam Houston Security Corp.
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	815 Childers Court
		Stafford, TX 77477
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Event Security
		Liverit Octobrity
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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)

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 3/4 Rpt: 11/17	Vo, Hubert (The Honorable)	00054795
4	Date	5 Payee name	
	12/05/2024	Texas House Democratic Caucus	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$1,500.00	PO Box 12453	
		Austin, TX 78711	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	Loutside of Tourse Complete Cohedule T
	EXPENDITURE		l outside of Texas. Complete Schedule T. n, TX, officeholder living expense
		Caucus Due	s
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
L	expenditure to benefit C/OI	п	
	Date	Payee name	
	11/19/2024	Vo, Howard	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,377.61	11360 Bellaire Blvd	
		Ste 800	
		Houston, TX 77072	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	l outside of Texas. Complete Schedule T.
	EXPENDITURE	Loan Repayment Reimbarsement	n, TX, officeholder living expense
		Reimbursen	nent
L			
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
L	experience to benefit ever		
	Date	Payee name	
L	12/13/2024	Vo, Kathy	
	Amount (\$) \$661.98	Payee address; City; State; Zip Code 11360 Bellaire Blvd	
	\$001.90	Ste 800	
		Houston, TX 77072	
L	PURPOSE		
	OF	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement (b) Description Check if trave	l outside of Texas. Complete Schedule T.
	EXPENDITURE		n, TX, officeholder living expense
		Reimbursen	nent
\vdash	Complete ONII V if direct	Condidate/Officeholder name	Office hold
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought H	Office held
\vdash			

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Polling Expense Oitt/Awards/Memorials Expense Printing Expense Committee Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 4/4 Rpt: 12/17	Vo, Hubert (The Honorable)	00054795
4	Date	5 Payee name	
	11/14/2024	Walker, Brittne	
	Amount (\$) \$2,100.00	7 Payee address; City; State; Zip Code 8801 La Cresada Dr 1032 Austin, TX 78749	
8	PURPOSE OF EXPENDITURE	Consuming Expense	outside of Texas. Complete Schedule T. TX, officeholder living expense Consulting
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held

SCHEDULE G

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

Event Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		vxpense Travel (Vages/Contract Labor OTHER	n District Dut of District ((enter a category not listed above)				
1	Total pages Schedule G:	2 FILER NAME	3 Filer II	,				
	Sch: 1/5 Rpt: 13/17	Vo, Hubert (The Honorable)	0005	4795				
4	Date	5 Payee name						
	11/12/2024	Circle K						
6	Amount (\$)	7 Payee address; City; State; Zip Co	ode					
	\$43.00	13197 Bellaire Blvd						
	X Reimbursement from political contributions intended	Houston, TX 77072						
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	() = ***** <u> </u>	avel outside of Texas. Complete Schedule T.				
	OF EXPENDITURE	Transportation Equipment And Related Expense	Check if Au	ustin, TX, officeholder living expense				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held				
	Date	Payee name						
	11/12/2024	Circle K						
Amount (\$) Payee address; City; State; Zip Code								
	\$32.00	13197 Bellaire Blvd						
	X Reimbursement from political contributions intended	Houston, TX 77072						
	PURPOSE OF	Category (See Categories listed at the top of this schedule)		avel outside of Texas. Complete Schedule T.				
	EXPENDITURE	Transportation Equipment And Related Expense	Gas	ustin, TX, officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held				
	Date	Payee name						
	12/13/2024	Comcast						
	Amount (\$) \$274.86	Payee address; City; State; Zip Co 9602 S 300 W.	de					
	Reimbursement from political contributions intended	STE B Sandy, UT 84070						
	PURPOSE	Category (See Categories listed at the top of this schedule)	' <u>–</u>	avel outside of Texas. Complete Schedule T.				
	OF EXPENDITURE	Office Overhead/Rental Expense	Check if Austin, TX, officeholder living expense					
			Campaign Internet					
	Complete ONLY if direct expenditure to benefit C/OH	I Candidate/Officeholder name	Office sought	Office held				

SCHEDULE G

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politice Credit Card Payment		mmittee	Gift/Awards/Memorials Ex Legal Services The Instruction Guid			xpense Wages/Contract Labor		Travel Out of District OTHER (enter a category not listed	above)
1 Total pages Schedule G:		2	FILER NAME	≣				3	Filer ID (Ethics Commiss	sion Filers)
	Sch: 2/5 Rpt: 14/17	n: 2/5 Rpt: 14/17 Vo, Hub							00054795	
4	Date	5	Payee name					•		
	12/13/2024		Comcast							
6	Amount (\$)	7	Payee addre	ess; City;	State;	Zip Co	ode			
	\$274.86		9602 S 300) W.						
	Reimbursement from		STE B							
	X political contributions intended		Sandy, UT	84070						
8	PURPOSE	(a)	Category (s	ee Categories listed at the	top of this sche	edule)	(b) Description	Che	eck if travel outside of Texas. Comp	olete Schedule T.
	OF EXPENDITURE		Office Over	head/Rental Expe	ense			Che	eck if Austin, TX, officeholder living	expense
	EXPENDITORE						Campaign Intern	et		
9	Complete ONLY if direct expenditure to benefit C/OH	Car	ndidate/Office	holder name			Office sought		Office held	
	Date		Payee name	1						
	11/12/2024		Costco Wh	olesale						
Amount (\$)			Payee address; City; State; Zip Code							
\$29.56 3836 Richmond Ave										
	Reimbursement from									
	x political contributions intended		Houston, T	X 77027						
	PURPOSE		Category (S	ee Categories listed at the	top of this sche	edule)	Description	Che	eck if travel outside of Texas. Comp	olete Schedule T.
OF EXPENDITURE			Office Over	head/Rental Expe	ense			Che	eck if Austin, TX, officeholder living	expense
Office Supplies										
Complete ONLY if direct		Car	ndidate/Office	holder name			Office sought		Office held	
	expenditure to benefit C/OH									
	Data									
	Date 11/13/2024		Payee name Ihop							
		L	<u> </u>	Oit :	04-4	7:- 0:	- d -			
	Amount (\$) \$20.72		Payee addre	ss; City; 6 Presidio Square	State;	Zip Co	ode			
			0759 HWY	o Fresidio Square						
	X Reimbursement from political contributions intended		Houston, T	X 77083						
	PURPOSE		Category (S	ee Categories listed at the	top of this sche	edule)	Description	_	eck if travel outside of Texas. Comp	
	OF EXPENDITURE		Food/Bever	rage Expense				Che	eck if Austin, TX, officeholder living	expense
							Meeting			
		<u> </u>								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Car	ndidate/Office	holder name			Office sought		Office held	

SCHEDULE G

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule G:	2 FILER NAM				3 Filer ID (Ethics Commission Filers)				
	Sch: 3/5 Rpt: 15/17	Vo, Hubert	(The Honorable)			00054795				
4	Date	5 Payee name	•							
	11/13/2024	Ihop								
6	Amount (\$)	7 Payee addre		Zip Co	ode					
	\$56.90	6759 Hwy (6 Presidio Square							
	X Reimbursement from political contributions intended	Houston, T	X 77083							
8	PURPOSE	(a) Category (s	See Categories listed at the top of this sch	edule)	(b) Description	Check if travel outside of Texas. Complete Schedule T.				
	OF EXPENDITURE	Food/Beve	rage Expense		L	Check if Austin, TX, officeholder living expense				
					Meeting					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Office	holder name		Office sought	Office held				
	Date	Payee name								
	12/12/2024	Legislative	Solutions							
	Amount (\$)	Payee address; City; State; Zip Code								
	\$800.00	\$800.00 PO Box 5643								
	Reimbursement from political contributions intended	Austin, TX	78763							
	PURPOSE OF	Category (S	See Categories listed at the top of this sch	edule)	Description	Check if travel outside of Texas. Complete Schedule T.				
EXPENDITURE		Event Expe	ense		L	Check if Austin, TX, officeholder living expense				
					Fundraising Ever	TIL .				
	Complete ONLY if direct expenditure to benefit C/OH	 Candidate/Office	holder name		Office sought	Office held				
	Date	Payee name								
	11/12/2024	Now & Fore	ever							
	Amount (\$)	Payee addre		Zip Co	ode					
	\$45.00	13600 Bee	chnut Street							
	Reimbursement from political contributions	Ste A								
	intended	Houston, TX 77083								
	PURPOSE OF		See Categories listed at the top of this sch	•	Description	Check if travel outside of Texas. Complete Schedule T.				
	EXPENDITURE	Transporta Expense	tion Equipment And Related	d	Coo					
					Gas					
		L Candidate/Office	holder name		Office sought	Office held				
	expenditure to benefit C/OH									

SCHEDULE G

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

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Polling Ex Printing Ex		-	Transportation Equipment & Related Exper Travel out of District OTHER (enter a category not listed above)			
	Credit Card Payment		The Instruction Guide explains	how to co	mplete this form.					
1	Total pages Schedule G:	2 FILER NAM	E			3 F	Filer ID (Ethics Commission F	ilers)		
	Sch: 4/5 Rpt: 16/17	Vo, Hubert	(The Honorable)				00054795			
4	Date	5 Payee name	9							
	11/12/2024	Shell								
6	Amount (\$)	7 Payee addre	ess; City; State	; Zip Co	de					
	\$25.00	15795 Bell	aire Blvd							
	Reimbursement from political contributions									
	intended	Houston, T	X 77083							
8	PURPOSE OF	(a) Category (s	See Categories listed at the top of this sch	nedule)	(b) Description	=	eck if travel outside of Texas. Complete Sc			
	EXPENDITURE		tion Equipment And Relate	d	L	Che	eck if Austin, TX, officeholder living expense	e		
		Expense			Gas					
9	Complete ONLY if direct	Candidate/Office	sholder name		Office sought		Office held			
9	expenditure to benefit	Candidate/Onice	enoluer name		Office Sought		Office field			
	C/OH									
	Date	Payee name	;							
	11/12/2024	Shell								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$33.48	15795 Bell	aire Blvd							
	Reimbursement from political contributions									
	intended	Houston, T	X 77083							
	PURPOSE OF	1	See Categories listed at the top of this sch		Description	=	eck if travel outside of Texas. Complete Sc			
EXPENDITURE		Transporta Expense	tion Equipment And Relate	d	L	Che	eck if Austin, TX, officeholder living expense	е		
					Gas					
	Complete ONLY if direct	Candidate/Office	eholder name		Office sought		Office held			
	expenditure to benefit				g					
	C/OH									
	Date	Payee name	9							
	11/12/2024	Shell								
	Amount (\$)	Payee addre		; Zip Co	de					
	\$27.43	15795 Bell	aire Blvd							
	Reimbursement from political contributions	l								
	intended	Houston, T	X 77083							
	PURPOSE OF	1	See Categories listed at the top of this sch		Description [=	eck if travel outside of Texas. Complete Sc eck if Austin, TX, officeholder living expense			
	EXPENDITURE	Expense	tion Equipment And Relate	a	Gas		ok ii / dodiii, i / i oiiioonolaan ii viiig axpana			
					C 40					
	Complete ONLY if direct	Landidate/Office	eholder name		Office sought		Office held			
	expenditure to benefit C/OH				5 ·					
	COLL									

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Advertising Expense Accounting/Banking Consulting Expense

Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memorials Expense Printing I nmittee Legal Services Salaries/		: Contract Labor		Travel Out of District OTHER (enter a category not listed above)			
	oreal card raymone		The Instruction Guide explains how to c	omplet	te this form.					
1	Total pages Schedule G:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)			
	Sch: 5/5 Rpt: 17/17	Vo, Hubert (The Honorable)					00054795			
4	Date	5	Payee name							
	12/13/2024		T Mobile							
6	Amount (\$)	7	Payee address; City; State; Zip C							
	\$56.13		PO Box 742596							
	Reimbursement from political contributions intended		Cincinnati, OH 45274	nnati. OH 45274						
_		(-)		(6)	Dagawinstian		healt if travel outside of Toylor Complete Cohedule T			
8	PURPOSE OF	(a) 	Category (See Categories listed at the top of this schedule)	(a)	Description	=	heck if travel outside of Texas. Complete Schedule T. heck if Austin, TX, officeholder living expense			
	EXPENDITURE		Office Overhead/Rental Expense	Can	npaign Pho	ш				
				Can	iipaigii i iio	iic				
_	Complete ONL V if direct	Car	adidata (Office holder name		Office cought		Office hold			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Car	ndidate/Officeholder name		Office sought		Office held			
	Date		Payee name							
	12/13/2024		T Mobile							
	Amount (\$)	Payee address; City; State; Zip Code								
\$56.13 PO Box 742596										
	Reimbursement from political contributions intended		Cincinnati, OH 45274							
	PURPOSE		Category (See Categories listed at the top of this schedule)		Description	Пс	heck if travel outside of Texas. Complete Schedule T.			
OF			Office Overhead/Rental Expense	⊐c	heck if Austin, TX, officeholder living expense					
	EXPENDITURE		·	Can	npaign Pho	ne				
	Complete ONLY if direct expenditure to benefit C/OH	Car	ndidate/Officeholder name	C	Office sought		Office held			
	Date		Payee name							
	11/13/2024		Texas Democratic Party							
	Amount (\$)	\vdash	Payee address; City; State; Zip C	ode						
	\$1,300.00		314 Highland Blvd							
	Reimbursement from		3 44 4							
	political contributions intended		Austin, TX 78752	_						
	PURPOSE OF		Category (See Categories listed at the top of this schedule)		Description	_	heck if travel outside of Texas. Complete Schedule T.			
EXPENDITURE Office Overnead/Rental Expense					heck if Austin, TX, officeholder living expense					
				Vote	er File Acce	SS				
		Ĺ	N. 100 1 11	1			200			
	Complete ONLY if direct expenditure to benefit C/OH	Car	ndidate/Officeholder name	C	Office sought		Office held			
	5,511									