FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00081836 17 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Gloria NAME Date Received **ELECTRONICALLY FILED** 01/15/2025 NICKNAME LAST **SUFFIX** Lopez CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** 2121 Sage Rd., Ste. 110 MAILING Receipt # Amount **ADDRESS** Change of Address Houston, TX 77056 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Ms. Heidy NAME NICKNAME LAST **SUFFIX** Orellana STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE **CAMPAIGN** APT / SUITE #; CITY; STATE; **TREASURER** 2121 Sage Rd., Ste. 110 **ADDRESS** (Residence or Business) Houston, TX 77056 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (832) 821-5295 **PHONE** REPORT TYPE 30th day before election 15th day after campaign treasurer January 15 Runoff lx l appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) reporting limit PERIOD Month Month Day Year Day Year **COVERED THROUGH** 07/01/2024 12/31/2024 10 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special

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11 OFFICE

OFFICE HELD (if any)

Family District Court Judge District 308 Harris

12 OFFICE SOUGHT (if known)

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 17

13 C / OH NAME	Lopez, Gloria (The H	onorable)	14 Filer ID 00081836	(Ethics Commission Filers)					
15 NOTICE FROM POLITICAL COMMITTEE(S)	FROM candidate / officeholder. These expenditures may have been made without the candidate's or office POLITICAL consent. Candidates and officeholders are required to report this information only if they receive no								
Additional Pages	COMMITTEE TYPE COMMITTEE NAME								
	GENERAL								
		COMMITTEE ADDRESS							
	SPECIFIC								
		COMMITTEE CAMPAIGN TREASURER NAME							
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS S						
16 CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS(OTHER THAN ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.00					
		ICAL CONTRIBUTIONS		\$ 0.00					
EXPENDITURE	(OTHER THAN 3. TOTAL UNITEM	\$ 0.00							
TOTALS									
	4. TOTAL POLIT	ICAL EXPENDITURES		\$ 15,865.51					
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 76,743.32					
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF 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 penalty true and correct and includes a under Title 15, Election Code.							
		The Hor	norable Gloria Lopez	2					
		-	Candidate or Officeho						
AFFIX NO	TARY STAMP / SEAL AB	OVE							
Sworn to and subs	cribed before me, by the s	aid	, this the	day					
of	, 20, to c	ertify which, witness my hand and seal of office.							
Signature of offi	cor administoring oath	Drinted name of officer administering eath	Title of office	ar administoring costs					
Signature of office	cer administering oath	Printed name of officer administering oath	riue oi oifice	er administering oath					

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

		CC	OVER SHEET PG 3 3 of 17					
18 FILER NAM Lopez, Glo	(Ethics Commission Filers)							
20 SCHEDULE NAME OF S	SUBTOTAL AMOUNT							
1.	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)							
2.	2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS							
3.	SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$					
4.	SCHEDULE E(J): LOANS (JUDICIAL)		\$					
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$ 15,631.51					
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$					
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	\$						
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$						
9. X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 234.00						
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$					
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$					
12. X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$ 129.22					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense 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 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: 1/10 Rpt: 4/17	Lopez, Gloria (The Honorable) 00081836
4	Date	5 Payee name
	09/05/2024	American Airlines
6	Amount (\$) \$615.17	7 Payee address; City; State; Zip Code 1 Skyview Drive Fort Worth, TX 76155
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Cost of flight to speak at New Frontiers in Marital Property Law in NC.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
F	Date	Payee name
	08/13/2024	BRR Inn of Court
H	Amount (\$)	Payee address; City; State; Zip Code
	\$684.50	201 W. 16th Street
		Houston, TX 77008
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Membership fee for BRR American Inn of Court.
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/08/2024	Barnaby's Cafe
	Amount (\$) \$181.77	Payee address; City; State; Zip Code 801 Congress St.
		Houston, TX 77002
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Staff Luncheon.
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mittee Le	ft/Awards/Memorials E egal Services he Instruction Gui			ages	Contract Labor		Travel Out of Di OTHER (enter a	strict a category not listed a	bove)
1	Total pages Schedule F1:	2 -	II FR NAME					T T	3	Filer ID	(Ethics Commis	sion Filers)
	Sch: 2/10 Rpt: 5/17			(The Honorabl	e)					00081836	(Lunes Commis	0.01.1 110.0)
4	Date	5 P	Payee name									
	12/29/2024	C	Canva									
6	Amount (\$)	7 P	Payee address	; City;	State;	Zip Cod	de					
	\$15.00	3	3212 E. Cesa	r Chavez St								
		F	Building 1, Su	ite 1300								
			Austin, TX 78									
_	DUDDOCE			102			/l-\					
8	PURPOSE OF		,	Categories listed at the	top of this sche	dule)	(D)	Description	outci	do of Toyas Com	nplete Schedule T.	
	EXPENDITURE	-	Fees					=		officeholder living		
								—			sign tools/temp	lates to
								create presen	ntat	ions, fliers,	and announce	ments.
9	Complete ONLY if direct	Ca	andidate/Office	holder name	Ot	ffice soug	ght			Office h	eld	
	expenditure to benefit C/OI	1										
	Date	F	Payee name									
	11/29/2024	C	Canva									
	Amount (\$)	F	Payee address	; City;	State;	Zip Cod	de					
	\$15.00	3	3212 E. Cesa	r Chavez St								
		Е	Building 1, St	ite 1300								
		4	Austin, TX 78	702								
	PURPOSE	(a) (Category (See	Categories listed at the	top of this sche	dule)	(b)	Description				
	OF EXPENDITURE		Fees					Check if travel of	outsio	de of Texas. Con	plete Schedule T.	
	EXPENDITORE							—		officeholder living		
											sign tools/temp and announce	
	0 1: 0.11.7.7.1.		11 1 10 11		-	"						
	Complete ONLY if direct expenditure to benefit C/OI		andidate/Office	nolder name	Of	ffice soug	gnt			Office h	eia	
	Date	F	Payee name									
	10/29/2024	C	Canva									
	Amount (\$)	F	Payee address	; City;	State;	Zip Cod	de					
	\$15.00	3	3212 E. Cesa	r Chavez St								
		Е	Building 1, St	ite 1300								
		A	Austin, TX 78	702								
	PURPOSE	(a) (Category (See	Categories listed at the	top of this sche	dule)	(b)	Description				
	OF		Fees						outsio	de of Texas. Con	plete Schedule T.	
	EXPENDITURE							ш		officeholder living		
											sign tools/temp and announce	
								create preser	ııal			inchis.
	Complete ONLY if direct expenditure to benefit C/OI		andidate/Office	holder name	Ot	ffice souç	ght			Office h	eld	
_												

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Condidate/Officeholder/Politics

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	y - Gift/Awards/Memorials Expense Printing Expense Travel Out of District Al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers))
	Sch: 3/10 Rpt: 6/17	Lopez, Gloria (The Honorable) 00081836	
4	Date	5 Payee name	
	09/29/2024	Canva	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$15.00	3212 E. Cesar Chavez St	
		Building 1, Suite 1300	
		Austin, TX 78702	
8	PURPOSE	(b) 2 · · ·	
ľ	OF	(a) Category (See Categories listed at the top of this schedule) Fees Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Monthly subscription for design tools/templates to	
		create presentations, fliers, and announcements.	
9	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held	
_	Date	Payee name	_
	08/29/2024	Canva	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$15.00	3212 E. Cesar Chavez St	
	Φ13.00		
		Building 1, Suite 1300	
		Austin, TX 78702	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	LAI LINDITOIL		
	EXI ENDITORE		
	EX ENDITORE	Monthly subscription for design tools/templates to create presentations, fliers, and announcements.	
	Complete ONLY if direct expenditure to benefit C/Oł	Monthly subscription for design tools/templates to create presentations, fliers, and announcements. Candidate/Officeholder name Office sought Office held	
	Complete ONLY if direct	Monthly subscription for design tools/templates to create presentations, fliers, and announcements. Candidate/Officeholder name Office sought Office held	
	Complete ONLY if direct expenditure to benefit C/OlDate	Monthly subscription for design tools/templates to create presentations, fliers, and announcements. Candidate/Officeholder name Office sought Payee name	
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Monthly subscription for design tools/templates to create presentations, fliers, and announcements. Candidate/Officeholder name Office sought Office held Payee name Chipotle	
_	Complete ONLY if direct expenditure to benefit C/OhDate 09/06/2024 Amount (\$)	Monthly subscription for design tools/templates to create presentations, fliers, and announcements. Candidate/Officeholder name Office sought Payee name Chipotle Payee address; City; State; Zip Code	
=	Complete ONLY if direct expenditure to benefit C/OhDate 09/06/2024	Monthly subscription for design tools/templates to create presentations, fliers, and announcements. Candidate/Officeholder name Office sought Office held Payee name Chipotle	
_	Complete ONLY if direct expenditure to benefit C/OhDate 09/06/2024 Amount (\$)	Monthly subscription for design tools/templates to create presentations, fliers, and announcements. Candidate/Officeholder name Office sought Payee name Chipotle Payee address; City; State; Zip Code	
_	Complete ONLY if direct expenditure to benefit C/OhDate 09/06/2024 Amount (\$)	Monthly subscription for design tools/templates to create presentations, fliers, and announcements. Candidate/Officeholder name Office sought Office held Payee name Chipotle Payee address; City; State; Zip Code 909 Texas St.	
	Complete ONLY if direct expenditure to benefit C/OhDate 09/06/2024 Amount (\$)	Monthly subscription for design tools/templates to create presentations, fliers, and announcements. Candidate/Officeholder name Office sought Office held Payee name Chipotle Payee address; City; State; Zip Code 909 Texas St. Suite B Houston, TX 77002	
	Complete ONLY if direct expenditure to benefit C/OFDate 09/06/2024 Amount (\$) \$137.58	Monthly subscription for design tools/templates to create presentations, fliers, and announcements. Candidate/Officeholder name Office sought Office held Payee name Chipotle Payee address; City; State; Zip Code 909 Texas St. Suite B Houston, TX 77002	
	Complete ONLY if direct expenditure to benefit C/Oh Date 09/06/2024 Amount (\$) \$137.58	Monthly subscription for design tools/templates to create presentations, fliers, and announcements. Candidate/Officeholder name	
	Complete ONLY if direct expenditure to benefit C/OFDate 09/06/2024 Amount (\$) \$137.58	Monthly subscription for design tools/templates to create presentations, fliers, and announcements. Candidate/Officeholder name	
	Complete ONLY if direct expenditure to benefit C/On Date 09/06/2024 Amount (\$) \$137.58 PURPOSE OF EXPENDITURE	Monthly subscription for design tools/templates to create presentations, fliers, and announcements. Candidate/Officeholder name Office sought Office held Payee name Chipotle Payee address; City; State; Zip Code 909 Texas St. Suite B Houston, TX 77002 (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Staff Luncheon.	
	Complete ONLY if direct expenditure to benefit C/Onterest Complete O9/06/2024 Amount (\$) \$137.58 PURPOSE OF EXPENDITURE Complete ONLY if direct	Monthly subscription for design tools/templates to create presentations, fliers, and announcements. Candidate/Officeholder name Office sought Office held Payee name Chipotle Payee address; City; State; Zip Code 909 Texas St. Suite B Houston, TX 77002 (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Staff Luncheon. Candidate/Officeholder name Office sought Office held	
	Complete ONLY if direct expenditure to benefit C/On Date 09/06/2024 Amount (\$) \$137.58 PURPOSE OF EXPENDITURE	Monthly subscription for design tools/templates to create presentations, fliers, and announcements. Candidate/Officeholder name Office sought Office held Payee name Chipotle Payee address; City; State; Zip Code 909 Texas St. Suite B Houston, TX 77002 (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Staff Luncheon. Candidate/Officeholder name Office sought Office held	
	Complete ONLY if direct expenditure to benefit C/Onterest Complete O9/06/2024 Amount (\$) \$137.58 PURPOSE OF EXPENDITURE Complete ONLY if direct	Monthly subscription for design tools/templates to create presentations, fliers, and announcements. Candidate/Officeholder name Office sought Office held Payee name Chipotle Payee address; City; State; Zip Code 909 Texas St. Suite B Houston, TX 77002 (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Staff Luncheon. Candidate/Officeholder name Office sought Office held	

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to co	-	ete this form.					
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)					
	Sch: 4/10 Rpt: 7/17	Lopez, Gloria (The Honorable) 00081836							
4	Date	5 Payee name							
	12/20/2024	Eddie V's Prime Seafood							
6	Amount (\$) \$2,342.15	7 Payee address; City; State; Zip Co 2800 Kirby Dr. A100	ode						
		Houston, TX 77098							
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense 2024 Holiday Party for Court Staff.					
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office soul	ght	Office held					
	Date	Payee name							
	09/12/2024	Fajita Petes							
	Amount (\$) \$698.92	Payee address; City; State; Zip Co 5710 Memorial Dr. Houston, TX 77007	ode						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description					
	OF EXPENDITURE	Food/Beverage Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Presiding Judge Month. Lunch for Presiding Judges, Associate Judge, and Court Coordinators.					
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office soul	ght	Office held					
	Date 08/28/2024	Payee name Harris County Democratic Party							
	Amount (\$) \$3,000.00	Payee address; City; State; Zip Co 4609 Lyons Avenue Houston, TX 77020	de						
	PURPOSE		(h)	Description					
	OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(13)	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense JRR Gala Contribution.					
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office soul	ght	Office held					

SCHEDULE F1

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	al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)	
		The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:		
	Sch: 5/10 Rpt: 8/17	Lopez, Gloria (The Honorable) 00081836	_
4	Date	5 Payee name	
L	08/13/2024	Harris County Family Court Benevolent Fund	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$100.00	201 Caronline	
		Houston, TX 77002	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Contributions/Donations Made By	
	-	Candidate/Officeholder/Political Committee	
		Continuation to benevoient fund.	
_	Complete ONLY if alias -t	Condidate/Officeholder name Office cought	_
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
_	Dete	T _	_
	Date	Payee name	
	12/04/2024	Hearsay Market Square	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$38.48	218 Travis St.	
		Houston, TX 77002	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense	
		Lunch with Judges to discuss Joint Policies and Procedures.	
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI	v	
-	Date	Payee name	=
	11/27/2024	M&M Grill	
_			_
	Amount (\$)	Payee address; City; State; Zip Code	ĺ
	\$162.31	6921 Almeda Rd.	
		Houston TV 77024	
		Houston, TX 77021	_
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Catering of Thanksgiving Lunch for Staff.	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	-
	expenditure to benefit C/OI		
			_

SCHEDULE F1

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

Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Sift/Awards/Memorials Expense Legal Services Salaries/Wages/Contract Labor

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

	Credit Card Payment	The Instruction Guide explains how to co	ompl	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 6/10 Rpt: 9/17	Lopez, Gloria (The Honorable)	00081836	
4	Date	5 Payee name		•
	07/23/2024	Marriott		
6	Amount (\$)	7 Payee address; City; State; Zip C	ode	
	\$2,184.22	23808 Resort Pkwy		
		San Antonio, TX 78261		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF	Fees	``	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE			Check if Austin, TX, officeholder living expense
				Hotel fee for Advanced Family Law.
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	ught	Office held
	experiditure to beriefit C/Oi	1		
	Date	Payee name		
	08/13/2024	Marriott		
	Amount (\$)	Payee address; City; State; Zip C	ode	
	\$381.13	23808 Resort Pkwy		
		San Antonio, TX 78261		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Fees		Check if travel outside of Texas. Complete Schedule T.
	LAPENDITORE			Check if Austin, TX, officeholder living expense
				Expense of Court Coordinator to attend Advanced Family Law Conference.
	0 1: 0.11.7.7.1.	0.51.40%	<u> </u>	<u> </u>
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	ugnt	Office held
	·			
	Date	Payee name		
	08/22/2024	Muslim Bar Association of Houston		
	Amount (\$)	Payee address; City; State; Zip C	ode	
	\$1,500.00	1300 MCGOWEN ST STE 270		
		Houston, TX 77004		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Contributions/Donations Made By		Check if travel outside of Texas. Complete Schedule T.
	-	Candidate/Officeholder/Political Committee		Check if Austin, TX, officeholder living expense Contribution to Annual Awards Dinner for
				MBAHouston.
	Complete ONLY if direct	Candidate/Officeholder name Office so	ught	Office held
	Complete ONLY if direct expenditure to benefit C/OI		ugrit	Office field

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made (Candidate/Officeholder/Politic Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
4. Total manage Coloradula 54	
1 Total pages Schedule F1: Sch: 7/10 Rpt: 10/17	2 FILER NAME Lopez, Gloria (The Honorable) 3 Filer ID (Ethics Commission Filers) 00081836
4 Date	5 Payee name
12/16/2024	Omni Royal Orleans
	· · · · · · · · · · · · · · · · · · ·
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$769.44	621 Saint Louis St.
	New Orleans, LA 70130
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Fees Categories listed at the top of this scriedule) Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Cost of hotel to speak at Advanced Trial Skills for
	Family Lawyers.
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	-1
Date	Payee name
10/20/2024	Southwest Airlines
Amount (\$)	Payee address; City; State; Zip Code
\$137.96	2702 Love Field Drive
	Dallas, TX 75235
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees The Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Flight to Advanced Trial Skills for Family Lawyers.
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
12/23/2024	Southwest Airlines
Amount (\$)	Payee address; City; State; Zip Code
\$379.96	2702 Love Field Drive
,	
	Dallas, TX 75235
DUPPOSE	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Flight to El Paso to attend Council meeting for
	Hispanic Issues Section of Texas State Bar.
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee	Legal Services The Instruction	·		Vages	/Contract Labor		OTHER (enter a	strict a category not listed above	e)
ļ_	T. 1 0 1 1 54	_			- Culac explains	11011 10 00	шріс	1	_	E1 15	(Ethio - O i - i	E1
1	Total pages Schedule F1: Sch: 8/10 Rpt: 11/17	2		ia (The Honor	able)				3	Filer ID 00081836	(Ethics Commission	i Filers)
4	Date	5	Payee name									
	07/24/2024			ss to Justice I	oundation							
6	Amount (\$)	7	Payee address	ss; City;	State	e; Zip Co	de					
	\$1,000.00		1601 Rio G	ande St.								
			#351									
			Austin, TX 7	'8701								
8	PURPOSE	(a)	Category (St	ee Categories listed a	at the ton of this sc	hedule)	(b)	Description				
	OF	` `		s/Donations I		neudic)			outsi	de of Texas. Con	nplete Schedule T.	
	EXPENDITURE			Officeholder/P		nittee		—		officeholder livin		
								Contribution t	to T	exas Acces	ss to Justice Four	ndation.
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	ceholder name	1	Office sou	ght			Office h	eld	
	Date		Payee name									
	10/04/2024		Texas Asso	ciation of Cou	rt Administra	ation						
	Amount (\$)		Payee address	ss; City;	State	e; Zip Co	de					
	\$75.00		816 17th St	•								
			George J. B	eto Criminal 3	lustice Cente	er Sam H	ous	ton Stat				
			Huntsville, 7	TX 77341								
	PURPOSE	(a)	Category (Se	ee Categories listed	at the top of this sc	hedule)	(b)	Description				
	OF EXPENDITURE		Fees					=			nplete Schedule T.	
								_		officeholder livin	coordinator to be	2 TACA
								member.	icc	ioi court c	oordinator to be	u 17.07.
	Complete ONLY if direct expenditure to benefit C/Ol		Candidate/Offi	ceholder name	1	Office sou	ght			Office h	eld	
	Date		Payee name									
	10/21/2024		Texas Asso	ciation of Cou	rt Administra	ation						
	Amount (\$)		Payee addres	ss; City;	State	e; Zip Co	de					
	\$375.00		816 17th St									
			George J. B	eto Criminal 3	lustice Cente	er Sam H	ous	ton Stat				
			Huntsville, 7	X 77341								
	PURPOSE	(a)	Category (Se	ee Categories listed	at the top of this sc	hedule)	(b)	Description				
	OF EXPENDITURE		Fees					=			nplete Schedule T.	
								ш		officeholder livin	- '	na d
								TACA confere			oordinator to atte	nu
	Complete ONLY if direct		Candidate/Offi	ceholder name		Office sou	ght			Office h	eld	
	expenditure to benefit C/OI						-					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officenoider/Politica 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: 9/10 Rpt: 12/17	Lopez, Gloria (The Honorable) 00081836
4	Date	5 Payee name
	09/17/2024	Texas Association of District Court Judges
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$50.00	201 Caronline
		Houston, TX 77002
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Membership Fee.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	08/12/2024	Texas Latinx Judges
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	P.O. Box 90683
		San Antonio, TX 78209
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	EXPENDITORE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
		Donation for Texas Latinx Judges.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
	Date	Power name
	12/10/2024	Payee name Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$24.94	5714 Star Ln
	4=	
		Houston, TX 77057
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Uber fee from Airport to Hotel for Advanced Trial Skills for Family Lawyers.
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Political Committee Credit Card Payment			Legal Services The Instruction Guide e	Salaries/V	/ages	Contract Labor		OTHER (enter a	category not listed above)
1	Total pages Schedule F1:	2 FILER N	AME				3	Filer ID	(Ethics Commission Filers)
	Sch: 10/10 Rpt: 13/17		Gloria (The Honorable)					00081836	
4	Date	5 Payee na	ıme						
	12/10/2024	Uber							
6	Amount (\$) \$69.51	7 Payee at 5714 St		State; Zip Co	de				
		Houstor	ı, TX 77057						
8	PURPOSE	(a) Category	(See Categories listed at the top	of this schedule)	(b)	Description			
	OF EXPENDITURE	Fees						de of Texas. Com	
	LAI LINDITORL							officeholder living	
						Uber fee form Trial Skills for			Airport for Advanced rs.
9	Complete ONLY if direct expenditure to benefit C/O		/Officeholder name	Office sou	ght			Office he	eld
	Date	Payee na	ame						
	12/18/2024	Vic & Ar	nthony's Steakhouse						
	Amount (\$)	Payee ad	ldress; City;	State; Zip Co	de				
	\$148.47	1510 Te	exas Ave.						
		Houstor	n, TX 77002						
	PURPOSE	(a) Category	(See Categories listed at the top	of this schedule)	(b)	Description			
	OF EXPENDITURE	Food/Be	everage Expense			—		de of Texas. Com	
								officeholder living	
						Farewell dinn	er	for 507th Jud	age.
	Complete ONLY if direct expenditure to benefit C/O		/Officeholder name	Office sou	ght			Office he	eld

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

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/Political Con Credit Card Payment			nittee L	ood/Beverage Expens bift/Awards/Memorials egal Services The Instruction Gu	Expense		kpense /ages/Contract Labor	-	Travel in Di Travel Out (OTHER (en		
1 Total pages Schedule G:		2 FILER NAMI		<u> </u>			3 F	iler ID	(Ethics Commission Filers)		
			opez, Gloria	ppez, Gloria (The Honorable)						36	
4	Date	5 Pa	ayee name					1			
	07/12/2024	Schedulista									
6	Amount (\$)	7 Pa	ayee address	State;	de						
	\$39.00										
	Reimbursement from political contributions intended	Seattle, WA 98144									
8 PURPOSE (a)			,g-r), (g-r)							outside of Texas. Complete Schedule T.	
	OF EXPENDITURE	F	ees			L L		Check if Austin, TX, officeholder living expense			
										g service for online cket/hearings/trials.	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held						Office held			
	Date	Pa	ayee name								
	08/12/2024	S	chedulista								
Amount (\$)			Payee address; City; State; Zip Code								
	\$39.00 1419 S Jackson Street, Suite 111										
	Reimbursement from political contributions intended Seattle, WA 98144										
	PURPOSE OF	Ci	ategory (See	Categories listed at th	ne top of this sch	edule)	Description			outside of Texas. Complete Schedule T.	
EXPENDITURE		F	Fees			Check if Austin, TX, officeholder living expense					
						Cost of third party scheduling service for online scheduling of the Court's docket/hearings/trials.					
	Complete ONLY if direct expenditure to benefit C/OH	Candi	idate/Officeho	older name			Office sought			Office held	
	Date	Pa	ayee name								
			Schedulista								
	Amount (\$) \$39.00	l	ayee address	s; City;	•	Zip Co	de				
	Reimbursement from political contributions intended		Seattle, WA								
	PURPOSE OF	C	ategory (See	Categories listed at th	ne top of this scho	edule)	Description	_		outside of Texas. Complete Schedule T.	
EXPENDITURE		F	Fees			Check if Austin, TX, officeholder living expense Cost of third party scheduling service for online					
										g service for online cket/hearings/trials.	
	Complete ONLY if direct expenditure to benefit C/OH	Candi	idate/Officeho	older name			Office sought			Office held	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Candidate/Officeholder/Politica Credit Card Payment		mmittee Legal Services The Instruction Guide explains h		Wages/Contract Labor		OTHER (enter a category not listed above)					
				iow to co	ompiete tins form.							
1	. •	2	FILER NAME			3	Filer ID (Ethics Commission Filers)					
	Sch: 2/2 Rpt: 15/17		Lopez, Gloria (The Honorable)				00081836					
4	Date	5	Payee name									
	10/12/2024		Schedulista									
6	Amount (\$)	7	Payee address; City; State;	Zip Co	nde							
•	\$39.00	ľ	1419 S Jackson Street, Suite 111									
	,		1413 6 daokson Gireet, Gaile 111									
	Reimbursement from political contributions											
	intended		Seattle, WA 98144									
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	dule)	(b) Description	₹.	heck if travel outside of Texas. Complete Schedule T.					
	OF EXPENDITURE	(PENDITURE Fees			L	Check if Austin, TX, officeholder living expense						
						st of third party scheduling service for online						
					scheduling of the	C	ourt's docket/hearings/trials.					
9		Car	ndidate/Officeholder name		Office sought		Office held					
	expenditure to benefit C/OH											
	C/OTT											
	Date		Payee name									
	11/12/2024		Schedulista									
Amount (\$)			Payee address; City; State; Zip Code									
	\$39.00		1419 S Jackson Street, Suite 111									
	Reimbursement from											
political contributions intended			Seattle, WA 98144									
		L			Description F	7.0	handa itanan and and and a statument of the state of the					
	PURPOSE OF		Category (See Categories listed at the top of this sche	dule)	Description	=	heck if travel outside of Texas. Complete Schedule T. heck if Austin, TX, officeholder living expense					
EXPENDITURE			Fees									
					Cost of third party scheduling service for online scheduling of the Court's docket/hearings/trials.							
	2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Ļ										
	Complete <u>ONLY</u> if direct expenditure to benefit	Car	ndidate/Officeholder name		Office sought		Office held					
	C/OH											
	Dete	_	_									
	Date		Payee name									
	12/12/2024	L	Schedulista									
	Amount (\$)			Zip Co	ode							
	\$39.00		1419 S Jackson Street, Suite 111									
	Reimbursement from											
	political contributions intended		Seattle, WA 98144									
	PURPOSE	\vdash	Category (See Categories listed at the top of this sche	dule)	Description	CI	heck if travel outside of Texas. Complete Schedule T.					
	OF		Fees	ŕ		CI	neck if Austin, TX, officeholder living expense					
EXPENDITURE					Cost of third party scheduling service for online							
							ourt's docket/hearings/trials.					
	Complete ONLY if direct	Car	ndidate/Officeholder name		Office sought		Office held					
	expenditure to benefit	Jui	a.a.a.a., Omoorionor namo		Since sought		Cindo Holu					
	C/OH											

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 16/17 2 FILER NAME Filer ID (Ethics Commission Filers) Lopez, Gloria (The Honorable) 00081836 5 Name of person from whom amount is received 8 Amount (\$) Date 12/10/2024 \$129.22 State Bar of Texas 6 Address of person from whom amount is received; City; State; Zip Code Austin, TX 78701 Purpose for which amount is received Check if political contribution returned to filer Partial Reimbursement for Cost of Travel after Cancelation of New Frontiers in Marital Property Law.

IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES SCHEDULE T FOR TRAVEL OUTSIDE OF TEXAS 1 Total pages Schedule T: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 17/17 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Lopez, Gloria (The Honorable) 00081836 4 Name of Contributor / Corporation or Labor Organization / Pledgor /Payee Southwest Airlines 5 Contribution / Expenditure reported on: X Schedule F1 Schedule A2 Schedule B Schedule D Schedule B(J) Schedule C2 Schedule F4 Schedule COH-UC Schedule F2 Schedule G Schedule H 6 Dates of Travel 7 Name of person(s) traveling Lopez, Gloria (Judge) Departure city or name of departure location 12/10/2024 Houston 9 Destination city or name of destination location 12/13/2024 **New Orleans** 10 Means of transportation 11 Purpose of travel (including name of conference, seminar, or other event) Speaking at Advanced Trial Skills for Family Lawyers. Commercial Airplane