

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

8895

**FORM C/OH
COVER SHEET PG 1**

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID	2 Total pages filed: 44	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	OFFICE USE ONLY Date Received 2016 JUL 12 12:38 FILED TRAVIS COUNTY AUSTIN TX
		Sally		
	NICKNAME	LAST	SUFFIX	
		Hernandez		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY;		ZIP CODE	
	P.O. Box 152032			
	Austin, TX 78715			
		Date Hand-delivered or Date Postmarked		
		Receipt #	Amount	
			12:38	
		Date Processed		
		Date Imaged		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI	
		Cecilia		
	NICKNAME	LAST	SUFFIX	
		Crossley		
6 CAMPAIGN TREASURER ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #;	CITY;
	3100 Catalina			Austin
			STATE;	ZIP CODE
			TX	78741
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	
		512-444-0956		
8 REPORT TYPE	<input 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 checked="" type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded \$500 limit	<input type="checkbox"/> Final Report (Attach C/OH-FR)
9 PERIOD COVERED	Month	Day	Year	Month
		02/21/2016	THROUGH	06/30/2016
10 ELECTION	ELECTION DATE		ELECTION TYPE	
	Month	Day	Year	
	11/08/2016			
	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other	
	<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known)	
	Constable Precinct Three		Travis County Sheriff	

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

**FORM C/OH
COVER SHEET PG 2**

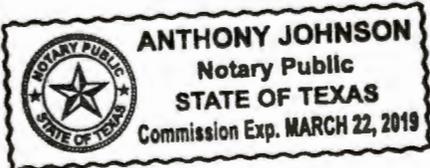
2 of 44

13 C / OH NAME Hernandez, Sally	14 Filer ID
----------------------------------------	--------------------

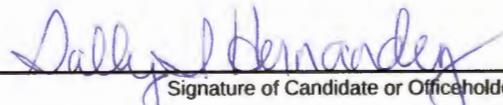
15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.									
<table border="1" style="width:100%"> <tr> <td style="width:20%">COMMITTEE TYPE</td> <td>COMMITTEE NAME</td> </tr> <tr> <td><input type="checkbox"/> GENERAL</td> <td>COMMITTEE ADDRESS</td> </tr> <tr> <td><input type="checkbox"/> SPECIFIC</td> <td>COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td></td> <td>COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table>	COMMITTEE TYPE	COMMITTEE NAME	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME		COMMITTEE CAMPAIGN TREASURER ADDRESS		
	COMMITTEE TYPE	COMMITTEE NAME								
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS								
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME								
	COMMITTEE CAMPAIGN TREASURER ADDRESS									

16 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 18,065.36
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 34,104.55
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 2,018.24
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

17 AFFADAVIT



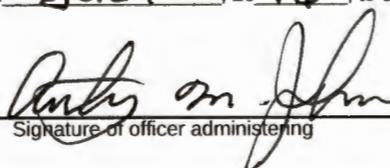
I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said SALLY I. Hernandez, this the 14th day of JULY, 2016, to certify which, witness my hand and seal of office.



 Signature of officer administering

Anthony M. Johnson

 Printed name of officer administering

 Title of officer administering oath

SUBTOTALS - C/OH

18 FILER NAME Hernandez, Sally		19 Filer ID
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 17,816.03
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 249.33
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	\$ 33,611.10
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 checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 493.45
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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/15 Rpt: 4/44
2 FILER NAME Hernandez, Sally		3 Filer ID
4 Date 05/11/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Balagia, Jamie	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code 313 South Main San Antonio, TX 78204		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/26/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barton, Patricia	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 2617 Choctaw Austin, TX 78745		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/26/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Betty Blackwell, Attorney at Law	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 1306 Nueces St. Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/26/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blackburn Betts PLLC	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 1106 San Antonio St. Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/21/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brandt, Ann	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code 12102 Shetland Chase Austin, TX 78727		
Principal occupation / 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: 2/15 Rpt: 5/44
2 FILER NAME Hernandez, Sally		3 Filer ID
4 Date 04/28/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brim, Jay	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code 1309 Lost Creek Blvd. Austin, TX 78746		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/20/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burke, Cecilia	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 6500 Santolina Cv. Austin, TX 78731		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/26/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cobb, Gary	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 4325 Triboro Trl. Austin, TX 78749		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/26/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crossley, Cecilia	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code 3100 Catalina Dr. Austin, TX 78741		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/12/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cumberbatch & Associates	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 3203 Funston St. Austin, TX 78703		
Principal occupation / 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: 3/15 Rpt: 6/44
2 FILER NAME Hernandez, Sally		3 Filer ID
4 Date 04/26/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Danburg, Debra	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code 3000 Cedarview Dr. Austin, TX 78704		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/24/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dancy, Blair	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 4933 Strass Dr. Austin, TX 78731		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/26/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Chambers, PC	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 1104 Nueces St. Ste. 208 Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/22/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dorbandt, Charles	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 7000 N. Mopac Expressway Suite 200 Austin, TX 78731		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/23/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dumke IV, Ezekiel	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code 3132 S 1885 E Salt Lake City, UT 84106		
Principal occupation / 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: 4/15 Rpt: 7/44
2 FILER NAME Hernandez, Sally		3 Filer ID
4 Date 04/26/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott Naishtat Campaign <hr/> 6 Contributor address; City; State; Zip Code 6401 Wilbur Dr. Austin, TX 78757	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/26/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Espinoza, Edward <hr/> Contributor address; City; State; Zip Code 507 Pressler St. #4131 Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/21/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gay, Darla <hr/> Contributor address; City; State; Zip Code 12502 Shady Acres Buda, TX 78610	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/26/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibbons, Heidi <hr/> Contributor address; City; State; Zip Code 613 Hearn St. Austin, TX 78703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/10/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gladish, Kenneth <hr/> Contributor address; City; State; Zip Code 6703 Mesa Dr. Austin, TX 78731	Amount of Contribution (\$) \$250.00
Principal occupation / 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: 5/15 Rpt: 8/44
2 FILER NAME Hernandez, Sally		3 Filer ID
4 Date 02/23/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Golden, Clay	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code 1711 W. 29th St. Austin, TX 78703	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/26/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Granger and Mueller, P.C.	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code 605 W. 10th St. Austin, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/24/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Matthew	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code 2911 Stratford Dr. Austin, TX 78746	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/26/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Halbert, Ellen	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 5105 Scenic View Dr. Austin, TX 78746	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/12/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartman, Greg	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code 3307 Winding Creek Trail Austin, TX 78735	
Principal occupation / 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: 6/15 Rpt: 9/44
2 FILER NAME Hernandez, Sally		3 Filer ID
4 Date 05/09/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, Kate	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code 5803 Tom Wooten Cv Austin, TX 78731		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/28/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Mack Ray	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 1200 Bouldin Ave. Austin, TX 78704		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/21/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hinkley, Linda Ann	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 1011 Millford Way Austin, TX 78745		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/29/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoskins, Kyle	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code 404 Rio Grande #125 Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/12/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hyten, Kelly	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 5710 Carry Back Ln. Austin, TX 78746		
Principal occupation / 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: 7/15 Rpt: 10/44
2 FILER NAME Hernandez, Sally		3 Filer ID
4 Date 04/26/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Charlie	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code 11900 Metric Blvd. J163 Austin, TX 78758		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/26/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Michael	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code 1007 Maufrais St. Austin, TX 78703		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/19/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koym, Kenneth	Amount of Contribution (\$) \$7.00
Contributor address; City; State; Zip Code 9704 Monarch Ln. Austin, TX 78724		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/24/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kull, James	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 3208 Riva Ridge Rd. Austin, TX 78746		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/12/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lafrey, Tim	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 1345 Philomena St. Ste. 402 Austin, TX 78723		
Principal occupation / 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: 8/15 Rpt: 11/44
2 FILER NAME Hernandez, Sally		3 Filer ID
4 Date 03/01/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Office of Dario Bargas Jr.	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code 1000 Heritage Center Circle Round Rock, TX 78664		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/26/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Offices of Ben Florey	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 1800 Guadalupe St. Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/01/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lemmon, Steve	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 4401 Shoal Creek Austin, TX 78756		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/29/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Making Government Work PAC	Amount of Contribution (\$) \$308.03
Contributor address; City; State; Zip Code P.O. Box 40301 Austin, TX 78704		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/26/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mangrum, Jessica	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 2707 Mountain Laurel Dr. Austin, TX 78703		
Principal occupation / 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: 9/15 Rpt: 12/44
2 FILER NAME Hernandez, Sally		3 Filer ID
4 Date 02/23/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maxwell, Robert	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code 210 Lavaca St. Unit 3208 Austin, TX 78701		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/26/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McLean, Dawn	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 154 Palo Duro Dr. Cedar Creek, TX 78612		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/26/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyerson, Ronald	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 306 E. 35th St. Austin, TX 78705		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/01/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Barbara	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code 1501 W. 6th St. Austin, TX 78703		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/29/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minton, Burton, Bassett, & Collins, P.C.	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 1100 Guadalupe St. Austin, TX 78701		
Principal occupation / 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: 10/15 Rpt: 13/44
2 FILER NAME Hernandez, Sally		3 Filer ID
4 Date 04/14/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montford, Mindy	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code 1100 Guadalupe St. Austin, TX 78701		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/19/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mossman, Nancy	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code 4004 Silverspring Dr. Austin, TX 78759		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/24/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neal, John	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 2235 E. 6th St. #405 Austin, TX 78702		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/26/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Elizabeth	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 310 E. 35th St. Austin, TX 78705		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/26/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nettles, Malcolm	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 2909 Riviera Rd. Austin, TX 78733		
Principal occupation / 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: 11/15 Rpt: 14/44
2 FILER NAME Hernandez, Sally		3 Filer ID
4 Date 02/23/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neville, Thomas	7 Amount of Contribution (\$) \$150.00
6 Contributor address; City; State; Zip Code 9438 Spring Hollow Dr. Austin, TX 78750		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/04/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neill, Kevin	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 3705 Elmore Rd. Parma, ID 83660		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/12/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pete McRae Consultancy LLC	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 707 Main St. Suite 202 Georgetown, TX 78626		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/26/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinnelli, Janis & Joe	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code P.O. Box 50038 Austin, TX 78763		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/26/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ray, Bennie	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code 710 W. 14th St. Ste. C Austin, TX 78701		
Principal occupation / 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: 12/15 Rpt: 15/44
2 FILER NAME Hernandez, Sally		3 Filer ID
4 Date 02/27/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson, Sean	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code 1314 Bonham Ter. Austin, TX 78704		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/21/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ritz, Sandra	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 902 Rio Grande Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/12/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Jr., Geronimo	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 905 Philco Dr. Austin, TX 78745		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/07/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roger Beasley Investments, LLC	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code 6503 Santolina Cv. Austin, TX 78731		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/22/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schliemann, Bruce	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 11013 Cherisse Dr. Austin, TX 78739		
Principal occupation / 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: 13/15 Rpt: 16/44
2 FILER NAME Hernandez, Sally		3 Filer ID
4 Date 02/21/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tabrizi, Dona	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code 1102 Clair Ave. Austin, TX 78703		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/26/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Timberlake, Walter	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 2006 Bouldin Ave. Austin, TX 78704		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/02/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trejo, Shelia	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code 6200 Loyola Ln. Apt. 1027 Austin, TX 78724		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/25/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valencia, Lila	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 3900 Threadgill St. Unit 7 Austin, TX 78723		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/26/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van Winkle, Gail	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 8112 Tahoe Parke Circle Austin, TX 78726		
Principal occupation / 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: 14/15 Rpt: 17/44
2 FILER NAME Hernandez, Sally		3 Filer ID
4 Date 05/11/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vasquez, Christiann	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code 222 W Mulberry Ave. San Antonio, TX 78212	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/28/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Viktor Olavson Attorney at Law	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 1107 Nueces St. Austin, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/26/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webb, Alide	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 1034 Liberty Park #1127 Austin, TX 78746	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/21/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitley, Thomas	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 1101 Wilson Rd. Conroe, TX 77301	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/29/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winkelman, Marc & Suzanne	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code 304 Hillcrest Court Austin, TX 78746	
Principal occupation / 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: 15/15 Rpt: 18/44
2 FILER NAME Hernandez, Sally		3 Filer ID
4 Date 04/26/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Marjorie 6 Contributor address; City; State; Zip Code 2303 Comburg Castle Way Austin, TX 78748	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/26/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zak, Jessica Contributor address; City; State; Zip Code 3700 N. IH-35 Austin, TX 78705	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 19/44	
2 FILER NAME Hernandez, Sally		3 Filer ID	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 02/28/2016	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chu, Nicholas	8 Amount of contribution (\$) \$160.71	9 In-kind contribution description Election Day Party Food
	7 Contributor address; City; State; Zip Code 4403 Avenue C Austin, TX 78751		
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 02/29/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mann, Carol	Amount of contribution (\$) \$26.94	In-kind contribution description Election Day Party Supplies
	Contributor address; City; State; Zip Code 2400 Trailside Dr. Austin, TX 78704		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 02/29/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mann, Carol	Amount of contribution (\$) \$61.68	In-kind contribution description Election Day Party Supplies
	Contributor address; City; State; Zip Code 2400 Trailside Dr. Austin, TX 78704		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

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.

1 Total pages Schedule F1: Sch: 1/24 Rpt: 20/44		2 FILER NAME Hernandez, Sally		3 Filer ID	
4 Date 03/03/2016		5 Payee name ActBlue			
6 Amount (\$) \$125.05		7 Payee address; City; State; Zip Code P.O. Box 441146 Somerville, MA 01244			
8 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 Credit Card Processing Fees	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 04/04/2016		Payee name ActBlue			
Amount (\$) \$12.77		Payee address; City; State; Zip Code P.O. Box 441146 Somerville, MA 01244			
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 Credit Card Processing Fees	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 05/05/2016		Payee name ActBlue			
Amount (\$) \$36.12		Payee address; City; State; Zip Code P.O. Box 441146 Somerville, MA 01244			
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 Credit Card Processing Fees	
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.

1 Total pages Schedule F1: Sch: 2/24 Rpt: 21/44	2 FILER NAME Hernandez, Sally	3 Filer ID
4 Date 06/16/2016	5 Payee name ActBlue	
6 Amount (\$) \$18.75	7 Payee address; City; State; Zip Code P.O. Box 441146 Somerville, MA 01244	
8 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 Credit Card Processing Fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/01/2016	Payee name American Express	
Amount (\$) \$17.82	Payee address; City; State; Zip Code P.O. Box 2878 Omaha, NE 68103	
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 Credit Card Processing Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/30/2016	Payee name American Express	
Amount (\$) \$47.01	Payee address; City; State; Zip Code P.O. Box 2878 Omaha, NE 68103	
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 Credit Card Processing Fees
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.

1 Total pages Schedule F1: Sch: 3/24 Rpt: 22/44		2 FILER NAME Hernandez, Sally		3 Filer ID
4 Date 05/31/2016		5 Payee name American Express		
6 Amount (\$) \$16.35		7 Payee address; City; State; Zip Code P.O. Box 2878 Omaha, NE 68103		
8 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 Credit Card Processing Fees	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sought	Office held
Date 03/02/2016		Payee name American Express		
Amount (\$) \$0.76		Payee address; City; State; Zip Code P.O. Box 2878 Omaha, NE 68103		
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 Credit Card Processing Fees	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sought	Office held
Date 03/03/2016		Payee name American Express		
Amount (\$) \$0.63		Payee address; City; State; Zip Code P.O. Box 2878 Omaha, NE 68103		
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 Credit Card Processing Fees	
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.

1 Total pages Schedule F1: Sch: 4/24 Rpt: 23/44	2 FILER NAME Hernandez, Sally	3 Filer ID
4 Date 03/04/2016	5 Payee name American Express	
6 Amount (\$) \$7.50	7 Payee address; City; State; Zip Code P.O. Box 2878 Omaha, NE 68103	
8 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 Credit Card Processing Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/04/2016	Payee name American Express	
Amount (\$) \$7.50	Payee address; City; State; Zip Code P.O. Box 2878 Omaha, NE 68103	
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 Credit Card Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/16/2016	Payee name American Express	
Amount (\$) \$0.55	Payee address; City; State; Zip Code P.O. Box 2878 Omaha, NE 68103	
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 Credit Card Processing Fees
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.

1 Total pages Schedule F1: Sch: 5/24 Rpt: 24/44		2 FILER NAME Hernandez, Sally		3 Filer ID	
4 Date 02/22/2016		5 Payee name American Express			
6 Amount (\$) \$0.63		7 Payee address; City; State; Zip Code P.O. Box 2878 Omaha, NE 68103			
8 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 Credit Card Processing Fees	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 05/02/2016		Payee name American Express			
Amount (\$) \$0.55		Payee address; City; State; Zip Code P.O. Box 2878 Omaha, NE 68103			
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 Credit Card Processing Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office held	
Date 03/15/2016		Payee name American Federation of Teachers			
Amount (\$) \$1,100.00		Payee address; City; State; Zip Code 603 W. 9th St. Austin, TX 78703			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rent	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		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.

1 Total pages Schedule F1: Sch: 6/24 Rpt: 25/44		2 FILER NAME Hernandez, Sally		3 Filer ID	
4 Date 04/11/2016		5 Payee name Butts, David			
6 Amount (\$) \$2,000.00		7 Payee address; City; State; Zip Code 1914 Patton Ln. Austin, TX 78723			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Consultant	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 05/12/2016		Payee name Butts, David			
Amount (\$) \$1,500.00		Payee address; City; State; Zip Code 1914 Patton Ln. Austin, TX 78723			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Consultant	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 05/05/2016		Payee name CheckMark Typesetting			
Amount (\$) \$70.36		Payee address; City; State; Zip Code 3217 N IH-35 Austin, TX 78722			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sponsor Board	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

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.

1 Total pages Schedule F1: Sch: 7/24 Rpt: 26/44	2 FILER NAME Hernandez, Sally	3 Filer ID
4 Date 03/02/2016	5 Payee name Facebook, Inc.	
6 Amount (\$) \$500.29	7 Payee address; City; State; Zip Code 1061 Willow Rd. Menlo Park, CA 94025	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Facebook ads
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/01/2016	Payee name Facebook, Inc.	
Amount (\$) \$94.52	Payee address; City; State; Zip Code 1061 Willow Rd. Menlo Park, CA 94025	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Facebook ads
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/26/2016	Payee name Facebook, Inc.	
Amount (\$) \$25.22	Payee address; City; State; Zip Code 1061 Willow Rd. Menlo Park, CA 94025	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Facebook ads
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.

1 Total pages Schedule F1: Sch: 8/24 Rpt: 27/44		2 FILER NAME Hernandez, Sally		3 Filer ID
4 Date 02/26/2016		5 Payee name Facebook, Inc.		
6 Amount (\$) \$50.11		7 Payee address; City; State; Zip Code 1061 Willow Rd. Menlo Park, CA 94025		
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Facebook ads	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sought	Office held
Date 02/27/2016		Payee name Facebook, Inc.		
Amount (\$) \$250.09		Payee address; City; State; Zip Code 1061 Willow Rd. Menlo Park, CA 94025		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Facebook ads	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sought	Office held
Date 03/01/2016		Payee name Facebook, Inc.		
Amount (\$) \$103.72		Payee address; City; State; Zip Code 1061 Willow Rd. Menlo Park, CA 94025		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Facebook ads	
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.

1 Total pages Schedule F1: Sch: 9/24 Rpt: 28/44		2 FILER NAME Hernandez, Sally		3 Filer ID	
4 Date 02/22/2016		5 Payee name GNI Strategies, LLC			
6 Amount (\$) \$4,004.00		7 Payee address; City; State; Zip Code 210 Lavaca St. Austin, TX 78701			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consultant	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 04/18/2016		Payee name GNI Strategies, LLC			
Amount (\$) \$1,000.00		Payee address; City; State; Zip Code 210 Lavaca St. Austin, TX 78701			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Consultant	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office held	
Date 05/12/2016		Payee name GNI Strategies, LLC			
Amount (\$) \$2,906.00		Payee address; City; State; Zip Code 210 Lavaca St. Austin, TX 78701			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Consultant	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		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.

1 Total pages Schedule F1: Sch: 10/24 Rpt: 29/44	2 FILER NAME Hernandez, Sally	3 Filer ID
------------------------------------------------------------	-----------------------------------------	-------------------

4 Date 03/03/2016	5 Payee name Google
-----------------------------	-------------------------------

6 Amount (\$) \$15.00	7 Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043
---------------------------------	-----------------------------------------------------------------------------------------------------------

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(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 Email Accounts
---------------------------------	-----------------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---------------------------------------------------------------------	-----------------------------	---------------	-------------

Date 04/04/2016	Payee name Google
--------------------	----------------------

Amount (\$) \$15.00	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043
------------------------	--------------------------------------------------------------------------------------------------

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(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 Email Accounts
-------------------------------	-----------------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
------------------------------------------------------------	-----------------------------	---------------	-------------

Date 05/05/2016	Payee name Google
--------------------	----------------------

Amount (\$) \$15.00	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043
------------------------	--------------------------------------------------------------------------------------------------

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(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 Email Accounts
-------------------------------	-----------------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

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.

1 Total pages Schedule F1: Sch: 11/24 Rpt: 30/44		2 FILER NAME Hernandez, Sally		3 Filer ID	
4 Date 06/03/2016		5 Payee name Google			
6 Amount (\$) \$15.00		7 Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(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 Email Accounts	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/02/2016		Payee name Gramburg, Christopher			
Amount (\$) \$1,024.00		Payee address; City; State; Zip Code 8804 Tallwood Dr. Apt. 35 Austin, TX 78759			
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 Field Organizer	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 02/29/2016		Payee name HEB			
Amount (\$) \$6.66		Payee address; City; State; Zip Code 1801 E. 51st St. Austin, TX 78723			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(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.

1 Total pages Schedule F1: Sch: 12/24 Rpt: 31/44	2 FILER NAME Hernandez, Sally	3 Filer ID
4 Date 04/27/2016	5 Payee name HEB	
6 Amount (\$) \$118.41	7 Payee address; City; State; Zip Code 2400 S. Congress Ave. Austin, TX 78704	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraiser expense
9 Complete ONLY if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 04/14/2016	Payee name HP, Inc.	
Amount (\$) \$70.10	Payee address; City; State; Zip Code 1501 Page Mill Rd. Palo Alto, CA 94304	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(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 03/23/2016	Payee name Hernandez, Sally (The Honorable)	
Amount (\$) \$493.45	Payee address; City; State; Zip Code 2712 Bobby Ln. Austin, TX 78745	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement
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.

1 Total pages Schedule F1: Sch: 13/24 Rpt: 32/44		2 FILER NAME Hernandez, Sally		3 Filer ID	
4 Date 03/02/2016		5 Payee name Holmes, Logan			
6 Amount (\$) \$1,789.00		7 Payee address; City; State; Zip Code 910 Connecticut Dr. Austin, TX 78758			
8 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 Field Organizer	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/03/2016		Payee name Jimmy John's			
Amount (\$) \$62.60		Payee address; City; State; Zip Code 601 W. Martin Luther King Jr. Blvd Austin, TX 78701			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(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	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 02/29/2016		Payee name Office Depot			
Amount (\$) \$17.30		Payee address; City; State; Zip Code 907 W. 5th St. Suite 101 Austin, TX 78703			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(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.

1 Total pages Schedule F1: Sch: 14/24 Rpt: 33/44	2 FILER NAME Hernandez, Sally	3 Filer ID
4 Date 02/23/2016	5 Payee name Pardo, Jovita	
6 Amount (\$) \$3,500.00	7 Payee address; City; State; Zip Code 115 Coleman St. Austin, TX 78704	
8 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 Campaign Manager
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/24/2016	Payee name Pardo, Jovita	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 115 Coleman St. Austin, TX 78704	
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 Campaign Manager
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/12/2016	Payee name Pardo, Jovita	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 115 Coleman St. Austin, TX 78704	
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 Campaign Manager
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.

1 Total pages Schedule F1: Sch: 15/24 Rpt: 34/44		2 FILER NAME Hernandez, Sally		3 Filer ID	
4 Date 03/02/2016		5 Payee name Ramos, Jennifer			
6 Amount (\$) \$740.00		7 Payee address; City; State; Zip Code 501 E. Stassney Apt. 630 Austin, TX 78741			
8 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 Field Organizer	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/02/2016		Payee name Taper, Jason			
Amount (\$) \$200.00		Payee address; City; State; Zip Code 2501 Whitis Ave. #309 Austin, TX 78705			
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 Field Organizer	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/03/2016		Payee name Travis County Credit Union			
Amount (\$) \$0.10		Payee address; City; State; Zip Code 1101 N. IH-35 Austin, TX 78702			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fees	
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.

1 Total pages Schedule F1: Sch: 16/24 Rpt: 35/44	2 FILER NAME Hernandez, Sally	3 Filer ID
4 Date 04/04/2016	5 Payee name Travis County Credit Union	
6 Amount (\$) \$0.10	7 Payee address; City; State; Zip Code 1101 N. IH-35 Austin, TX 78702	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 04/14/2016	Payee name Travis County Credit Union	
Amount (\$) \$0.10	Payee address; City; State; Zip Code 1101 N. IH-35 Austin, TX 78702	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 04/27/2016	Payee name Travis County Credit Union	
Amount (\$) \$0.10	Payee address; City; State; Zip Code 1101 N. IH-35 Austin, TX 78702	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fees
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.

1 Total pages Schedule F1: Sch: 17/24 Rpt: 36/44		2 FILER NAME Hernandez, Sally		3 Filer ID	
4 Date 05/03/2016		5 Payee name Travis County Credit Union			
6 Amount (\$) \$0.10		7 Payee address; City; State; Zip Code 1101 N. IH-35 Austin, TX 78702			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fees	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 05/05/2016		Payee name Travis County Credit Union			
Amount (\$) \$0.10		Payee address; City; State; Zip Code 1101 N. IH-35 Austin, TX 78702			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 06/03/2016		Payee name Travis County Credit Union			
Amount (\$) \$0.10		Payee address; City; State; Zip Code 1101 N. IH-35 Austin, TX 78702			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

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.

1 Total pages Schedule F1: Sch: 18/24 Rpt: 37/44	2 FILER NAME Hernandez, Sally	3 Filer ID
4 Date 02/26/2016	5 Payee name Travis County Credit Union	
6 Amount (\$) \$0.10	7 Payee address; City; State; Zip Code 1101 N. IH-35 Austin, TX 78702	
8 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 Bank Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 02/26/2016	Payee name Travis County Credit Union	
Amount (\$) \$0.10	Payee address; City; State; Zip Code 1101 N. IH-35 Austin, TX 78702	
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 Bank Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 02/27/2016	Payee name Travis County Credit Union	
Amount (\$) \$0.10	Payee address; City; State; Zip Code 1101 N. IH-35 Austin, TX 78702	
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 Bank Fees
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.

1 Total pages Schedule F1: Sch: 19/24 Rpt: 38/44		2 FILER NAME Hernandez, Sally		3 Filer ID
4 Date 02/29/2016		5 Payee name Travis County Credit Union		
6 Amount (\$) \$0.10		7 Payee address; City; State; Zip Code 1101 N. IH-35 Austin, TX 78702		
8 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 Bank Fees	
9 Complete ONLY if direct expenditure to benefit C/OH				
Date 02/29/2016		Candidate/Officeholder name Travis County Credit Union		
Amount (\$) \$0.10		Payee address; City; State; Zip Code 1101 N. IH-35 Austin, TX 78702		
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 Bank Fees	
Complete ONLY if direct expenditure to benefit C/OH				
Date 03/01/2016		Candidate/Officeholder name Travis County Credit Union		
Amount (\$) \$0.10		Payee address; City; State; Zip Code 1101 N. IH-35 Austin, TX 78702		
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 Bank Fees	
Complete ONLY if direct expenditure to benefit C/OH				

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.

1 Total pages Schedule F1: Sch: 20/24 Rpt: 39/44	2 FILER NAME Hernandez, Sally	3 Filer ID
4 Date 03/02/2016	5 Payee name Travis County Credit Union	
6 Amount (\$) \$0.10	7 Payee address; City; State; Zip Code 1101 N. IH-35 Austin, TX 78702	
8 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 Bank Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 03/17/2016	Payee name Travis County Credit Union	
Amount (\$) \$0.10	Payee address; City; State; Zip Code 1101 N. IH-35 Austin, TX 78702	
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 Bank Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 04/01/2016	Payee name Travis County Credit Union	
Amount (\$) \$0.10	Payee address; City; State; Zip Code 1101 N. IH-35 Austin, TX 78702	
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 Bank Fees
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.

1 Total pages Schedule F1: Sch: 21/24 Rpt: 40/44		2 FILER NAME Hernandez, Sally		3 Filer ID
4 Date 03/17/2016		5 Payee name Travis County Democratic Party		
6 Amount (\$) \$100.00		7 Payee address; City; State; Zip Code 1311 E. 6th St. Austin, TX 78702		
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banner Display	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sought	Office held
Date 06/10/2016		Payee name Travis County Employee Enrichment Fund		
Amount (\$) \$100.00		Payee address; City; State; Zip Code 700 Lavaca St. Suite 2300 Austin, TX 78701		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Juneteenth Celebration	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sought	Office held
Date 04/24/2016		Payee name Treiber, Andre		
Amount (\$) \$1,000.00		Payee address; City; State; Zip Code 8524 Burnet Rd. #433 Austin, TX 78757		
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 Field Director	
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.

1 Total pages Schedule F1: Sch: 22/24 Rpt: 41/44	2 FILER NAME Hernandez, Sally	3 Filer ID
4 Date 05/12/2016	5 Payee name Treiber, Andre	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 8524 Burnet Rd. #433 Austin, TX 78757	
8 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 Field Director
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/03/2016	Candidate/Officeholder name USPS	
Amount (\$) \$47.00	Office sought 6104 Old Fredericksburg Rd. Austin, TX 78749	
Office held		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(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
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/02/2016	Candidate/Officeholder name Villalobos, Pedro	
Amount (\$) \$1,000.00	Office sought 203 W. Odell St. Austin, TX 78752	
Office held		
8 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 Policy Director
9 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.

1 Total pages Schedule F1: Sch: 23/24 Rpt: 42/44		2 FILER NAME Hernandez, Sally		3 Filer ID
4 Date 03/10/2016		5 Payee name Villalobos, Pedro		
6 Amount (\$) \$15.43		7 Payee address; City; State; Zip Code 203 W. Odell St. Austin, TX 78752		
8 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 Policy Director	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sought	Office held
Date 04/24/2016		Payee name Villalobos, Pedro		
Amount (\$) \$1,000.00		Payee address; City; State; Zip Code 203 W. Odell St. Austin, TX 78752		
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 Policy Director	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sought	Office held
Date 05/12/2016		Payee name Villalobos, Pedro		
Amount (\$) \$2,000.00		Payee address; City; State; Zip Code 203 W. Odell St. Austin, TX 78752		
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 Policy Director	
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.

1 Total pages Schedule F1: Sch: 24/24 Rpt: 43/44	2 FILER NAME Hernandez, Sally	3 Filer ID
------------------------------------------------------------	-----------------------------------------	-------------------

4 Date 03/02/2016	5 Payee name Williams, Lonnie
-----------------------------	-----------------------------------------

6 Amount (\$) \$1,079.75	7 Payee address; City; State; Zip Code 401 Little Texas Ln. #2714 Austin, TX 78745
------------------------------------	----------------------------------------------------------------------------------------------------

8 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 Field Organizer
---------------------------------	----------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---------------------------------------------------------------------	-----------------------------	---------------	-------------

Date 03/02/2016	Payee name Wise, Jordan
--------------------	----------------------------

Amount (\$) \$1,289.50	Payee address; City; State; Zip Code 312 E. Del Mar Blvd. Laredo, TX 78041
---------------------------	--------------------------------------------------------------------------------------

8 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 Field Organizer
---------------------------------	----------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
------------------------------------------------------------	-----------------------------	---------------	-------------

--

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

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 -	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 1/1 Rpt: 44/44		2 FILER NAME Hernandez, Sally		3 Filer ID	
4 Date 03/23/2016		5 Payee name GNI Strategies, LLC			
6 Amount (\$) \$493.45		7 Payee address; City; State; Zip Code 210 Lavaca St. Austin, TX 78701			
<input checked="" type="checkbox"/> Reimbursement from political contributions intended		8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense	
				(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Consultant	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	