

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

9559

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: 13
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI
	NICKNAME	LAST	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address		ADDRESS / PO BOX; APT / SUITE #; CITY; PO BOX 300115 AUSTIN, TX 78703	ZIP CODE Date Received Date Hand Delivered Date Postmarked Receipt # Date Processed Date Imaged
5 CAMPAIGN TREASURER NAME		MS / MRS / MR	FIRST
		NICKNAME	MI
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)		STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE	
7 CAMPAIGN TREASURER PHONE		AREA CODE	PHONE NUMBER EXTENSION
8 REPORT TYPE		<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH-FR)	
9 PERIOD COVERED		Month Day Year	Month Day Year
10 ELECTION		ELECTION DATE	ELECTION TYPE
11 OFFICE		OFFICE HELD (if any)	12 OFFICE SOUGHT (if known)

FILED FOR RECORD
 2020 FEB 14 AM 12:22
 CLERK
 COUNTY OF TRAVIS TEXAS

GO TO PAGE 2

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

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

2 of 13


13 C / OH NAME LOPEZ, CARLOS	14 Filer ID
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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.	
<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

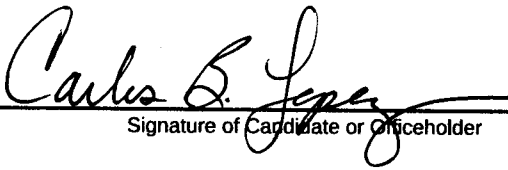
16 CONTRIBUTION TOTALS	1.	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	240.-
		2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	4,071.68
EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	340.96
	4.	TOTAL POLITICAL EXPENDITURES	\$	4,112.13
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	4292.86
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	1000.-

17 AFFIDAVIT

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




TRACY DORTY
My Notary ID # 10900297
Expires April 14, 2020



Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Carlos B. Lopez, this the 3 day of February, 2020 to certify which, witness my hand and seal of office.



Signature of officer administering

Tracy Dorty

Printed name of officer administering

Notary

Title of officer administering oath

SUBTOTALS - C/OH

18 FILER NAME LOPEZ, CARLOS		19 Filer ID
20 SCHEDULE SUBTOTALS		
NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 4,071.68
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 1,000.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 4,112.13
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/5 Rpt: 4/13
2 FILER NAME LOPEZ, CARLOS		3 Filer ID
4 Date 11/21/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aleman, Gloria	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code 2544 Stoutwood austin, TX 78745		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/21/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blaylock, Skip	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code 9420 Vicksburg Ave Lubbock, TX 79424		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/21/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burke, Cecilia	Amount of Contribution (\$) \$158.21
Contributor address; City; State; Zip Code 6500 Santolina Dr Austin, TX 78731		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/21/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cunningham, John	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 9816 Lavera AUSTIN, TX 78726		
Principal occupation / Job title (See Instructions) consultant		Employer (See Instructions) self
Date 11/18/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daywood, Carl	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 6009 sabine st austin, TX 78701		
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/5 Rpt: 5/13
2 FILER NAME LOPEZ, CARLOS		3 Filer ID
4 Date 11/22/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Denkler, Ann	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code 6112 Highlander austin, TX 78731		
8 Principal occupation / Job title (See Instructions) administrator		9 Employer (See Instructions) Travis county
Date 11/21/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Lisa	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 4522 Ave F austin, TX 78751		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/21/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hinojosa, Regina (The Honorable)	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code PO Box 30096 austin, TX 78703		
Principal occupation / Job title (See Instructions) State Representative		Employer (See Instructions) State of Texas
Date 11/21/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Christopher	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code 10904 Yorktown austin, TX 78726		
Principal occupation / Job title (See Instructions) Law Enforcement/Chief		Employer (See Instructions) Travis County
Date 11/04/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linebarger, Goggan & Blair	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code PO Box 17428 Austin, TX 78760		
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: 3/5 Rpt: 6/13
2 FILER NAME LOPEZ, CARLOS		3 Filer ID
4 Date 11/21/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Raymond	7 Amount of Contribution (\$) \$200.00
	6 Contributor address; City; State; Zip Code 1206 Loma AUSTIN, TX 78744	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/21/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Margaret (The Honorable)	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code 616 Rocky ledge dr austin, TX 78746	
Principal occupation / Job title (See Instructions) District Attorney		Employer (See Instructions) Travis county
Date 10/29/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mueller, Aaron	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code 605 W 12th austin, TX 78701-2023	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) self
Date 11/17/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Owens, Alicia	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 3101 Leaf Cir austin, TX 78759	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/21/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pantel, Jama	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 11160 Jollyville TX 78759	
Principal occupation / Job title (See Instructions) Assistant		Employer (See Instructions) Travis county

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/5 Rpt: 7/13
2 FILER NAME LOPEZ, CARLOS		3 Filer ID
4 Date 11/18/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez Wiseley, Teresa <hr/> 6 Contributor address; City; State; Zip Code 909 Theresa AUSTIN, TX 78703	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 11/20/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shea, Brigid (The Honorable) <hr/> Contributor address; City; State; Zip Code 2604 Geraghty Ave AUSTIN, TX 78757	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Commisioner		Employer (See Instructions) Travis County
Date 11/14/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Rachele <hr/> Contributor address; City; State; Zip Code 13802 A La Entrada Corpus Christi, TX 78418	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) self
Date 11/21/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sonleitner, Karen <hr/> Contributor address; City; State; Zip Code 1712 Pasadena austin, TX 78757	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/12/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swanks, Darryl <hr/> Contributor address; City; State; Zip Code 2409 Golden Gate Park AUSTIN, TX 78732	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Investigator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/5 Rpt: 8/13
2 FILER NAME LOPEZ, CARLOS		3 Filer ID
4 Date 10/24/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tenorio, Sandra 6 Contributor address; City; State; Zip Code 373 Tobin Buda, TX 78610	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) State employee		9 Employer (See Instructions) State of Texas
Date 11/21/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zamora, Guadalupe (Dr.) Contributor address; City; State; Zip Code 2100 E 6th St austin, TX 78702	Amount of Contribution (\$) \$263.47
Principal occupation / Job title (See Instructions) Doctor		Employer (See Instructions) self

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:
Sch: 1/1 Rpt: 9/13

2 FILER NAME
LOPEZ, CARLOS

3 Filer ID

4 TOTAL OF UNITEMIZED LOANS

\$

5 Date of loan
10/22/2019

7 Name of lender out-of-state PAC (ID#: _____)
LOPEZ, CARLOS

9 Loan Amount (\$)
\$1,000.00

6 Is lender a financial institution?
No

8 Lender address; City; State; Zip Code
PO Box 300115

AUSTIN, TX 78705

10 Interest Rate

11 Maturity Date
10/22/2019

12 Principal occupation / Job title (See Instructions)
Constable

13 Employer (See Instructions)
Travis County

14 Description of Collateral
 None

15 Check if personal funds were deposited into political account (See Instructions)

16 GUARANTOR INFORMATION

17 Name of guarantor

19 Amount Guaranteed (\$)

not applicable

18 Guarantor address; City; State; Zip Code

20 Principal occupation

21 Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/4 Rpt: 10/13		2 FILER NAME LOPEZ, CARLOS		3 Filer ID	
4 Date 08/27/2019		5 Payee name AFLCIO			
6 Amount (\$) \$152.95		7 Payee address; City; State; Zip Code PO Box 301074 AUSTIN, TX 78703			
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 ad for fundraiser	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 10/24/2019		Payee name AFSME			
Amount (\$) \$250.00		Payee address; City; State; Zip Code 1106 Lavaca AUSTIN, TX 78701			
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 ad for Labor day	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 11/23/2019		Payee name Austin Land & Cattle			
Amount (\$) \$870.18		Payee address; City; State; Zip Code 1205 N Lamar AUSTIN, TX 78703			
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	
Complete ONLY 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: 2/4 Rpt: 11/13	2 FILER NAME LOPEZ, CARLOS	3 Filer ID
4 Date 07/08/2019	5 Payee name Austin Tejano Democrats	
6 Amount (\$) \$200.00	7 Payee address; City; State; Zip Code 2544 Stoutwood cir AUSTIN, TX 78745	
8 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 donation for JBR fundraiser
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 10/04/2019	Payee name Buda, Dan	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 8000 Willet AUSTIN, TX 78745	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) website campaign	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense develop website
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 10/04/2019	Payee name CAPD	
Amount (\$) \$125.00	Payee address; City; State; Zip Code PO Box 413 AUSTIN, TX 78767	
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 donation for fundraiser
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: 3/4 Rpt: 12/13	2 FILER NAME LOPEZ, CARLOS	3 Filer ID
4 Date 12/16/2019	5 Payee name Camarillo, Sylvia	
6 Amount (\$) \$250.00	7 Payee address; City; State; Zip Code 307 Cottonwood Pflugerville, TX 78660	
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 consulting
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate/Officeholder name Office sought Office held		
Date 12/05/2019	Payee name Travis County Democratic Party	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 1311 E 6th 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 filing fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate/Officeholder name Office sought Office held		
Date 12/18/2019	Payee name USPO	
Amount (\$) \$55.00	Payee address; City; State; Zip Code 3507 n lamar AUSTIN, TX 78705	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) supplies	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense stamps
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: 4/4 Rpt: 13/13	2 FILER NAME LOPEZ, CARLOS	3 Filer ID
4 Date 08/16/2019	5 Payee name USPO	
6 Amount (\$) \$59.00	7 Payee address; City; State; Zip Code 3507 n lamar AUSTIN, TX 78705	
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 For box rental
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/07/2019	Payee name Y Strategy	
Amount (\$) \$150.00	Payee address; City; State; Zip Code 5102 Delores AUSTIN, TX 78721	
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 graphic design
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held