

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers)

2 Total pages filed:

27

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR FIRST MI  
Ms. Amy F  
NICKNAME LAST SUFFIX  
Hinojosa

OFFICE USE ONLY

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  
 Change of Address

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE  
4808 Fairmont Pkwy Pasadena TX 77505

Date Received  
Date Hand-delivered or Date Postmarked

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE PHONE NUMBER EXTENSION  
( 832 ) 779 - 8763

Receipt # Amount \$

6 CAMPAIGN TREASURER NAME

MS / MRS / MR FIRST MI  
Mr. Angel D  
NICKNAME LAST SUFFIX  
Hinojosa

Date Processed  
Date Imaged

7 CAMPAIGN TREASURER ADDRESS  
(Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE  
4808 Fairmont Pkwy Pasadena TX 77505

8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION  
( 832 ) 856 - 0572

9 REPORT TYPE

January 15  30th day before election  Runoff  15th day after campaign treasurer appointment (Officeholder Only)  
 July 15  8th day before election  Exceeded Modified Reporting Limit  Final Report (Attach C/OH - FR)

10 PERIOD COVERED

Month Day Year Month Day Year  
01 / 06 / 2025 THROUGH 03 / 24 / 2025

11 ELECTION

ELECTION DATE ELECTION TYPE  
Month Day Year  Primary  Runoff  Other Description  
05 / 03 / 2025  General  Special

12 OFFICE

OFFICE HELD (if any)  
Harris County School Board Trustee

13 OFFICE SOUGHT (If known)  
Pasadena City Council Member Dist. G

14 NOTICE FROM POLITICAL COMMITTEE(S)  
 Additional Pages

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE COMMITTEE NAME  
 GENERAL COMMITTEE ADDRESS  
 SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME  
COMMITTEE CAMPAIGN TREASURER ADDRESS

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER  
CAMPAIGN FINANCE REPORT**

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

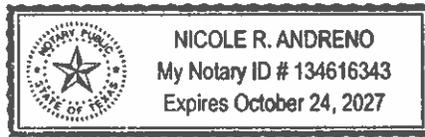
<b>15 C/OH NAME</b> <u>Amy Hinojosa</u>		<b>16 Filer ID</b> (Ethics Commission Filers)
<b>17 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 18,140.00
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 7369.76
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 15,885.94
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

**18 SIGNATURE** 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.

*Amy Hinojosa*  
Signature of Candidate or Officeholder

**Please complete either option below:**

**(1) Affidavit**



NOTARY STAMP / SEAL

Sworn to and subscribed before me by Amy Hinojosa this the 1<sup>st</sup> day of April, 2025, to certify which, witness my hand and seal of office.

*Nicole R. Andreno* Signature of officer administering oath  
 Nicole R. Andreno Printed name of officer administering oath  
Notary Title of officer administering oath

OR

**(2) Unsworn Declaration**

My name is \_\_\_\_\_, and my date of birth is \_\_\_\_\_.

My address is \_\_\_\_\_ (street) \_\_\_\_\_ (city) \_\_\_\_\_ (state) \_\_\_\_\_ (zip code) \_\_\_\_\_ (country)

Executed in \_\_\_\_\_ County, State of \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ (month) \_\_\_\_\_ (year)

\_\_\_\_\_  
Signature of Candidate/Officeholder (Declarant)

# SUBTOTALS - C/OH

FORM C/OH  
COVER SHEET PG 3

19 FILER NAME <i>Amy Hinojosa</i>		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 18,140.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$ 0
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 7369.76
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 0
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>1 of 17</b>
2 FILER NAME Amy Hinojosa		3 Filer ID (Ethics Commission Filers)
4 Date 1/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lesley Briones 6 Contributor address; City; State; Zip Code 325 W 18 St. Houston TX 77008	7 Amount of contribution (\$) 1000.00
8 Principal occupation / Job title (See Instructions) Commissioner		9 Employer (See Instructions) Harris County
Date 1/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chad Burke Contributor address; City; State; Zip Code 2201 Lomax School Rd La Porte TX 77571	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Economic Alliance
Date 2/1/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beverly Brooks Hinojosa Contributor address; City; State; Zip Code 2222 East Galileo Dr Gilbert AZ 85298	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Intel
Date 2/7/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ana Hernandez Contributor address; City; State; Zip Code PO Box 1287 Houston TX 77251	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions) State Representative		Employer (See Instructions) State Representative
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>2 of 17</b>
2 FILER NAME <b>Amy Hinojosa</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>2/8/2025</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Laura Vargas</b> 6 Contributor address; City; State; Zip Code <b>2518 Hardin Rd Baytown TX 77521</b>	7 Amount of contribution (\$) <b>100.00</b>
8 Principal occupation / Job title (See Instructions) <b>Architect</b>		9 Employer (See Instructions) <b>Page Southerland Page</b>
Date <b>2/11/2025</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Claudia Hogue</b> Contributor address; City; State; Zip Code <b>4209 Eli Street Houston TX 77007</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See Instructions) <b>Self Employed</b>		Employer (See Instructions) <b>Self Employed</b>
Date <b>2/12/2025</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Nory Angel</b> Contributor address; City; State; Zip Code <b>4410 Walker St Houston TX 77023</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See Instructions) <b>President</b>		Employer (See Instructions) <b>American Leadership Forum</b>
Date <b>2/14/2025</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Abyar Aejaaz</b> Contributor address; City; State; Zip Code <b>17427 Bland Mills Ln Richmond TX 77407</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See Instructions) <b>Chemical Engineer</b>		Employer (See Instructions) <b>TritenIAG</b>
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>3 of 17</b>
2 FILER NAME Amy Hinojosa		3 Filer ID (Ethics Commission Filers)
4 Date 2/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sruti Ramaswamy 6 Contributor address; City; State; Zip Code 19810 Maverick Creek Lane Cypress TX 77433	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions) Self Employed		9 Employer (See Instructions) Sruti Ramaswamy
Date 2/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jerry Acosta Contributor address; City; State; Zip Code 1038 Stonecrest Dr. Houston TX 77018	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self Employed
Date 2/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrea Nguyen Contributor address; City; State; Zip Code 6907 Kemper Dr Pasadena TX 77505	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions) Education		Employer (See Instructions) San Jacinto College
Date 2/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alenjandro Villegas Contributor address; City; State; Zip Code 5510 Cheena Dr Houston TX 77096	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) BD Manager		Employer (See Instructions) GTJ LLP
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>4 of 17</b>
2 FILER NAME Amy Hinojosa		3 Filer ID (Ethics Commission Filers)
4 Date 2/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Katherine Loehr 6 Contributor address; City; State; Zip Code 1358 17th Ave Apt A San Francisco CA	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions) Product Manager		9 Employer (See Instructions) Terabase Engergy
Date 2/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sofia Gonzalez Contributor address; City; State; Zip Code 4609 Woodhead St Houston TX 77098	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) SVP		Employer (See Instructions) Employment & Training Centers
Date 2/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barbara Montemayor Contributor address; City; State; Zip Code 722 Magdalene Dr Houston TX 77024	Amount of contribution (\$) 200.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 2/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guillermo Moll Contributor address; City; State; Zip Code 14930 Kimberly Lane Houston TX 77079	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1. <b>5 of 17</b>
2 FILER NAME Amy Hinojosa		3 Filer ID (Ethics Commission Filers)
4 Date 2/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chris Brown 6 Contributor address; City; State; Zip Code 3636 Gramercy St Houston TX 77056	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions) Senior Advisor		9 Employer (See Instructions) City of Houston
Date 2/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linda Lorelle Contributor address; City; State; Zip Code 5515 Val Verde St Houston TX 77056	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Lorelle Media
Date 2/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christopher Pitre Contributor address; City; State; Zip Code 4815 Hardy St Houston TX 77009	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 2/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rolando Castaneda Contributor address; City; State; Zip Code 3317 Pebble Beach Ln Pearland TX 77584	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions) Engineer - President		Employer (See Instructions) Ally General Solutions LLC
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>6 of 17</b>
2 FILER NAME Amy Hinojosa		3 Filer ID (Ethics Commission Filers)
4 Date 2/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D. Fred Martinez 6 Contributor address; City; State; Zip Code 50 Wincrest Falls Drive Cypress TX 77429	7 Amount of contribution (\$) 1000.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) ATSER
Date 2/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexis Hoskins Contributor address; City; State; Zip Code 5300 Hollister Rd. STE 111 Houston TX 77040	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions) Executive Assistant		Employer (See Instructions) Ally General Solutions LLC
Date 2/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kimberly Jones Williams Contributor address; City; State; Zip Code 2450 Louisiana St Ste 400-114 Houston TX 77006	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Metro
Date 2/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edward Shipper Contributor address; City; State; Zip Code 711 Main St Unit 704 Houston TX 77002	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) CFO		Employer (See Instructions) SwyftScripts
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>7 of 17</b>
2 FILER NAME Amy Hinojosa		3 Filer ID (Ethics Commission Filers)
4 Date 2/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anne Whitlock 6 Contributor address; City; State; Zip Code 317 Sampson St Houston TX 77003	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See Instructions) Community Developer		9 Employer (See Instructions) My Connection Community
Date 2/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hilda Lease Contributor address; City; State; Zip Code 25710 Eagle Chase Ln Spring TX 77389	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions) Civil Engineering		Employer (See Instructions) RODS Inc.
Date 2/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karina Moreno Contributor address; City; State; Zip Code 10626 Clear Cove Houston TX 77041	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) LJA Engineering
Date 2/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Claudia Harris Contributor address; City; State; Zip Code 1125 Adele St Houston TX 77009	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions) Engineering		Employer (See Instructions) Entech Civil Engineers
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>8 of 17</b>
2 FILER NAME <b>Amy Hinojosa</b>		3 Filer ID (Ethics Commission Filers) -
4 Date <b>2/24/2025</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Tirso Flores</b> 6 Contributor address; City; State; Zip Code <b>334 Cavil Barrier Lane La Porte TX 77571</b>	7 Amount of contribution (\$) <b>1000.00</b>
8 Principal occupation / Job title (See Instructions) <b>ILA 1351</b>		9 Employer (See Instructions) <b>Port of Houston</b>
Date <b>2/24/2025</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Danielle Bartz</b> Contributor address; City; State; Zip Code <b>2111 Welch Street A207 Houston TX 77019</b>	Amount of contribution (\$) <b>25.00</b>
Principal occupation / Job title (See Instructions) <b>Division Director</b>		Employer (See Instructions) <b>City of Houston</b>
Date <b>2/24/2025</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Lesley Briones</b> Contributor address; City; State; Zip Code <b>325 W 18 St Houston TX 77008</b>	Amount of contribution (\$) <b>1500.00</b>
Principal occupation / Job title (See Instructions) <b>Commissioner</b>		Employer (See Instructions) <b>Harris County</b>
Date <b>2/24/2025</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Mario Paniagua</b> Contributor address; City; State; Zip Code <b>5011 Summer Oak Dr Pasadena TX 77505</b>	Amount of contribution (\$) <b>150.00</b>
Principal occupation / Job title (See Instructions) <b>Sales</b>		Employer (See Instructions) <b>Big Star Cadillac</b>
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>9 of 17</b>
2 FILER NAME Amy Hinojosa		3 Filer ID (Ethics Commission Filers)
4 Date 2/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yolanda Silva 6 Contributor address; City; State; Zip Code 1419 Knight St Houston TX 77022	7 Amount of contribution (\$) 25.00
8 Principal occupation / Job title (See Instructions) HR		9 Employer (See Instructions) Icon
Date 2/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Helena Gutierrez Contributor address; City; State; Zip Code 8022 Glen Dell Ct Houston TX 77061	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Pet Sitting		Employer (See Instructions) Self Employed
Date 2/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gabriel Velasquez Contributor address; City; State; Zip Code 5126 Court Rd Houston TX 77053	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Harris County P4
Date 2/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Igor Riera Contributor address; City; State; Zip Code 712 Meriden Ln Unit A Austin TX 78703	Amount of contribution (\$) 20.00
Principal occupation / Job title (See Instructions) Sales Executive		Employer (See Instructions) Soluta
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>10 of 17</b>
2 FILER NAME Amy Hinojosa		3 Filer ID (Ethics Commission Filers)
4 Date 2/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jennifer Brademan 6 Contributor address; City; State; Zip Code 19934 Ryans Colony Ln Richmond TX 77407	7 Amount of contribution (\$) 25.00
8 Principal occupation / Job title (See Instructions) Civil Engineer		9 Employer (See Instructions) HCP4
Date 2/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sara Padua Contributor address; City; State; Zip Code 5599 San Felipe St 911 Houston TX 77056	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Padua Law Firm PLLC
Date 2/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jose Paniagua Contributor address; City; State; Zip Code 2730 Lakecrest Way Dr Katy TX 77493	Amount of contribution (\$) 10.00
Principal occupation / Job title (See Instructions) Insurance		Employer (See Instructions) Elephant
Date 2/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Atahualpa Cabello Contributor address; City; State; Zip Code 607 Landing Blvd League City TX 77573	Amount of contribution (\$) 20.00
Principal occupation / Job title (See Instructions) Bartender		Employer (See Instructions) Gringos
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>                  If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>11 of 17</b>
2 FILER NAME Amy Hinojosa		3 Filer ID (Ethics Commission Filers)
4 Date 2/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roel Saldivar 6 Contributor address; City; State; Zip Code 3705 Tanglebriar Dr Pasadena TX 77503	7 Amount of contribution (\$) 25.00
8 Principal occupation / Job title (See Instructions) Educator		9 Employer (See Instructions) Houston ISD
Date 2/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karun Sreerama Contributor address; City; State; Zip Code 4406 Orange Leaf Ct Houston TX 77059	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 2/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alex Garcia Contributor address; City; State; Zip Code 3102 8th Ave N Texas City TX 77590	Amount of contribution (\$) 5.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Big Star Hyundai
Date 2/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Bukrinsky Contributor address; City; State; Zip Code 308 Lake Front Dr. League City TX 77573	Amount of contribution (\$) 5.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Big Star Cadillac
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>12 of 17</b>
2 FILER NAME Amy Hinojosa		3 Filer ID (Ethics Commission Filers)
4 Date 2/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nile Irsan 6 Contributor address; City; State; Zip Code 19150 Irwin Keel Lane Conroe TX 77306	7 Amount of contribution (\$) 50.00
8 Principal occupation / Job title (See Instructions) Auto Sales		9 Employer (See Instructions) Northwest Hyundai
Date 2/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Javier Campero Contributor address; City; State; Zip Code 10411 Ray Brook Ln Houston TX 77089	Amount of contribution (\$) 10.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 2/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chantelle Nash Contributor address; City; State; Zip Code 6621 Belmont Dr Shawnee KS 66226	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Training Director		Employer (See Instructions) BAE Systems
Date 2/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) James Colbert Contributor address; City; State; Zip Code 204 North Opulent Dr Montgomery TX 77316	Amount of contribution (\$) 300.00
Principal occupation / Job title (See Instructions) Education		Employer (See Instructions) HCDE
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>13 of 17</b>
2 FILER NAME Amy Hinojosa		3 Filer ID (Ethics Commission Filers)
4 Date 2/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alejandra Salinas 6 Contributor address; City; State; Zip Code 1223 Bomar St Houston TX 77006	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) Susman Godfrey
Date 2/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Angela Powell Contributor address; City; State; Zip Code 1502 Almond Brook Ln Houston TX 77062	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Consultant - Healthcare IT		Employer (See Instructions) BDO
Date 2/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John Anthony Serrano Contributor address; City; State; Zip Code 2557 Rusk Houston TX 77003	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions) Senior Planner		Employer (See Instructions) HCP4
Date 3/3/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nicholas Meier Contributor address; City; State; Zip Code 1206 Dorsetshire Dr Pasadena TX 77504	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions) Bus Driver		Employer (See Instructions) Pasadena ISD
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>14 of 17</b>
2 FILER NAME Amy Hinojosa		3 Filer ID (Ethics Commission Filers)
4 Date 3/3/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) MaryJane Mudd 6 Contributor address; City; State; Zip Code 13611 Starlight Harbour Ct Houston TX 77077	7 Amount of contribution (\$) 50.00
8 Principal occupation / Job title (See Instructions) Exec Director		9 Employer (See Instructions) EHCMA
Date 3/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Adrian Tamez Contributor address; City; State; Zip Code 4436 Jefferson Houston TX 77019	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Tejano Center
Date 3/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Randall Collum Contributor address; City; State; Zip Code 21307 Redcrest Manor Dr Richmond TX 77406	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Wood Machenzie
Date 3/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sande Wendt Contributor address; City; State; Zip Code 1518 Rustic Oak Lane 8 Seabrook TX 77586	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>15 of 17</b>
2 FILER NAME <b>Amy Hinojosa</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>3/20/2025</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Richard Meier</b>	7 Amount of contribution (\$) <b>50.00</b>
6 Contributor address; City; State; Zip Code <b>4407 Oneida St Pasadena TX 77504</b>		
8 Principal occupation / Job title (See Instructions) <b>NA</b>		9 Employer (See Instructions) <b>NA</b>
Date <b>3/20/2025</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Tirso Flores</b>	Amount of contribution (\$) <b>1500.00</b>
Contributor address; City; State; Zip Code <b>334 Cavil Barrier Ln La Porte TX 77571</b>		
Principal occupation / Job title (See Instructions) <b>ILA</b>		Employer (See Instructions) <b>Port of Houston</b>
Date <b>2/24/2025</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Jared Daly</b>	Amount of contribution (\$) <b>20.00</b>
Contributor address; City; State; Zip Code <b>59 Flanders Rd Budd Lake NJ 07828</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>3/13/2025</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Efern Gonzalez Jr</b>	Amount of contribution (\$) <b>1000.00</b>
Contributor address; City; State; Zip Code <b>28 Thornhill Oaks Dr Houston TX 77015</b>		
Principal occupation / Job title (See Instructions) <b>Business Owner</b>		Employer (See Instructions) <b>Tepatitlan Mexican Restaurant</b>
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p><b>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</b></p>		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>16 of 17</b>
2 FILER NAME <b>Amy Hinojosa</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>3/3/2025</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Ahmed K Valdez</b>	7 Amount of contribution (\$) <b>500.00</b>
6 Contributor address; City; State; Zip Code <b>16310 Skyhill Dr Cypress TX 77433</b>		
8 Principal occupation / Job title (See Instructions) <b>Engineer</b>		9 Employer (See Instructions) <b>AKV Consulting</b>
Date <b>3/3/2025</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Houston Pilots PAC</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>203 Deerwood Glen Dr Deer Park TX 77536</b>		
Principal occupation / Job title (See Instructions) <b>NA</b>		Employer (See Instructions) <b>NA</b>
Date <b>3/3/2025</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>David Gonzalez DDS PC</b>	Amount of contribution (\$) <b>200.00</b>
Contributor address; City; State; Zip Code <b>8470 Gulf Freeway STE A Houston TX 77017</b>		
Principal occupation / Job title (See Instructions) <b>Dentist</b>		Employer (See Instructions) <b>Self employed</b>
Date <b>3/3/2025</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Eva Loreda</b>	Amount of contribution (\$) <b>125.00</b>
Contributor address; City; State; Zip Code <b>7711 Ave I Houton TX 77012</b>		
Principal occupation / Job title (See Instructions) <b>Consultant (Education)</b>		Employer (See Instructions) <b>Self Employed</b>
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>17 of 17</b>
2 FILER NAME <b>Amy Hinojosa</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>3/3/2025</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Sergio Lira</b> 6 Contributor address; City; State; Zip Code <b>7001 Sloan St Houston TX 77087</b>	7 Amount of contribution (\$) <b>100.00</b>
8 Principal occupation / Job title (See Instructions) <b>Consultant (Education)</b>		9 Employer (See Instructions) <b>Self Employed</b>
Date <b>3/3/2025</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Daniel Dmytryshyn</b> Contributor address; City; State; Zip Code <b>11507 Rocky Bend Dr Houston TX 77077</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See Instructions) <b>Engineer</b>		Employer (See Instructions) <b>HCP4</b>
Date <b>1/10/2025</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Leadership for Educational Equity</b> Contributor address; City; State; Zip Code <b>25 Broadway 13th Floor New York City NY</b>	Amount of contribution (\$) <b>1000.00</b>
Principal occupation / Job title (See Instructions) <b>NA</b>		Employer (See Instructions) <b>NA</b>
Date <b>2/19/2025</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Lauren Calderera</b> Contributor address; City; State; Zip Code <b>2728 Beauchamp St Houston TX 77009</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See Instructions) <b>Consulting</b>		Employer (See Instructions) <b>Projects-Matter</b>
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

### 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.

<b>1</b> Total pages Schedule F1: <i>1 of 7</i>	<b>2</b> FILER NAME Amy Hinojosa	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 1/30/2025	<b>5</b> Payee name Print N Sign	
<b>6</b> Amount (\$) 1234.05	<b>7</b> Payee address; City; State; Zip Code 7350 Harwin Dr STE 316A Westside TX 77036	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description Campaign Signs and Push Cards
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date 2/4/2025	Payee name Leadership for Educational Equity	
Amount (\$) 500.00	Payee address; City; State; Zip Code 25 Broadway 13th Floor New York City NY	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Consulting	Description Website Development, Consulting
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date 02/06/2025	Payee name Mailboxes Plus	
Amount (\$) 415.20	Payee address; City; State; Zip Code 4808 Fairmont Pkwy Pasadena TX 77505	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Office Overhead	Description Business Mail Box; Mail-in ballot Applications mailed to voters
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

### 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.

<b>1</b> Total pages Schedule F1: 2 of 7	<b>2</b> FILER NAME Amy Hinojosa	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> Date 1/13/2025	<b>5</b> Payee name Maria Delgado
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<b>6</b> Amount (\$) 104.02	<b>7</b> Payee address; 406 Baldinger Houston TX 77011	City:	State:	Zip Code
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<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Even Expense	<b>(b)</b> Description Table Tents, Sign in Sheets, Balloons, Cake, Tablecloth,
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 1/21/2025	Payee name Leadership for Educational Equity
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Amount (\$) 500.00	Payee address; 25 Broadway 13th Floor New York City NY	City:	State:	Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Consulting	Description Website Development, Logo Design, Push Card Design, Campaign Messaging
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 01/23/2025	Payee name Square Space
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Amount (\$) 235.38	Payee address; 8 Clarkson New York, NY 10013	City:	State:	Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Website Platform
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

### 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.

<b>1</b> Total pages Schedule F1: 3 of 7	<b>2</b> FILER NAME Amy Hinojosa	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 1/13/2025	<b>5</b> Payee name Abel Caballero	
<b>6</b> Amount (\$) 105.00	<b>7</b> Payee address; City; State; Zip Code 8206 Hickok Ln., Houston TX 77075	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Other	<b>(b)</b> Description Campaign T-Shirts
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 2/19/2025	Payee name DLR Properties	
Amount (\$) 400.00	Payee address; City; State; Zip Code 11026 Rivercroft Lane, Houston, Tx 77089	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Event Expense	Description Event Venue Rental
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 2/24/2025	Payee name Specs #199	
Amount (\$) 230.77	Payee address; City; State; Zip Code 4122 Fairmont Pkwy, Pasadena, TX 77504	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Event Expense	Description Wine, Beer
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### 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	Printing 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.

<b>1</b> Total pages Schedule F1: 4 of 7	<b>2</b> FILER NAME Amy Hinojosa	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 3/10/2025	<b>5</b> Payee name Project Joy and Hope	
<b>6</b> Amount (\$) 150.00	<b>7</b> Payee address; City; State; Zip Code 3207 Tulip St, Pasadena, TX 77504	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description Fundraising Event Sponsorship
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date 3/6/2025	Payee name Mariscos Ruta 16	
Amount (\$) 400.00	Payee address; City; State; Zip Code 2726 Spencer Highway, Pasadena, TX 77504	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Event Expense	Description Appetizers for Meet & Greet
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date 2/24/2025	Payee name HEB #713	
Amount (\$) 201.58	Payee address; City; State; Zip Code 3501 Clear Lake City Blvd, Houston, TX 77059	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Event Expense	Description Plates, cups, napkins, plastic wear, sodas, water
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### 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.

<b>1</b> Total pages Schedule F1: 5 of 7	<b>2</b> FILER NAME Amy Hinojosa	<b>3</b> Filor ID (Ethics Commission Filers)
<b>4</b> Date 3/10/2025	<b>5</b> Payee name Office Depot #2662	
<b>6</b> Amount (\$) 100.41	<b>7</b> Payee address; City; State; Zip Code 3931 FAIRWAY PLAZA DRIVE, PASADENA, TX 77505	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description Stickers to advertise Meet & Greet on door hangers
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 3/12/2025	Payee name Economic Alliance Houston Port Region	
Amount (\$) 300.00	Payee address; City; State; Zip Code 203 Ivy Ave., Suite 200 Deer Park, TX 77536	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Event Expense	Description Booth Presenter at Womans Leadership Luncheon
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 3/17/2025	Payee name Speed Fuel	
Amount (\$) 4.00	Payee address; City; State; Zip Code 1201 Crenshaw Rd	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food/Beverage	Description water for block walking
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

### 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.

<b>1</b> Total pages Schedule F1: 6 of 7	<b>2</b> FILER NAME Amy Hinojosa	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 3/18/2025	<b>5</b> Payee name Mailboxes Plus	
<b>6</b> Amount (\$) 72.00	<b>7</b> Payee address; City; State; Zip Code 4808 Fairmont Pkwy Pasadena TX 77505	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Overhead	<b>(b)</b> Description Mail thank you letters to donors
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 3/21/2025	Payee name Print N Sign	
Amount (\$) 1515.50	Payee address; City; State; Zip Code 7350 Harwin Dr. STE 316A Westside TX 77036	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description 4x4 Signs
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 3/21/2025	Payee name Home Depot	
Amount (\$) 90.90	Payee address; City; State; Zip Code 5455 Fairmont Pkwy, Pasadena, TX 77505	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Hardware for 4x4 signs (poles, zip ties, hole punch)
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

### 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)
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The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <b>7 &amp; 7</b>		2 FILER NAME <b>Amy Hinojosa</b>		3 Filer ID (Ethics Commission Filers)	
4 Date <b>3/24/2025</b>		5 Payee name <b>Home Depot</b>			
6 Amount (\$) <b>226.68</b>		7 Payee address; City; State; Zip Code <b>5455 Fairmont Pkwy, Pasadena, TX 77505</b>			
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>		(b) Description <b>Hardware for 4x4 signs (poles)</b>		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date <b>3/24/2025</b>		Candidate / Officeholder name <b>Home Depot</b>			
Amount (\$) <b>29.67</b>		Office sought <b>Home Depot</b>			
Office held		Payee address; City; State; Zip Code <b>5455 Fairmont Pkwy, Pasadena, TX 77505</b>			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>		Description <b>Hardware for 4x4 signs (staple gun staples)</b>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date <b>3/24/2025</b>		Candidate / Officeholder name <b>ACTBLUE</b>			
Amount (\$) <b>554.60</b>		Office sought <b>PO BOX 441146 Somerville, MA 02144</b>			
Office held		Payee address; City; State; Zip Code			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>FEE</b>		Description <b>Debit Card Processing Fees from 01/06/2025 thru 03/24/2025</b>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date		Candidate / Officeholder name			
Amount (\$)		Office sought			
Office held		Payee address; City; State; Zip Code			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED