

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:															
3 CANDIDATE / OFFICEHOLDER NAME	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%; padding: 2px;">MS / MRS / MR</td> <td style="width:35%; padding: 2px;">FIRST</td> <td style="width:15%; padding: 2px;">MI</td> </tr> <tr> <td style="padding: 2px;">Mr.</td> <td style="padding: 2px;">Sergio</td> <td></td> </tr> <tr> <td style="padding: 2px;">NICKNAME</td> <td style="padding: 2px;">LAST</td> <td style="padding: 2px;">SUFFIX</td> </tr> <tr> <td></td> <td style="padding: 2px;">Lira</td> <td></td> </tr> </table>	MS / MRS / MR	FIRST	MI	Mr.	Sergio		NICKNAME	LAST	SUFFIX		Lira		OFFICE USE ONLY				
MS / MRS / MR	FIRST	MI																
Mr.	Sergio																	
NICKNAME	LAST	SUFFIX																
	Lira																	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%; padding: 2px;">ADDRESS / PO BOX;</td> <td style="width:25%; padding: 2px;">APT / SUITE #;</td> <td style="width:25%; padding: 2px;">CITY;</td> <td style="width:25%; padding: 2px;">STATE;</td> <td style="width:20%; padding: 2px;">ZIP CODE</td> </tr> <tr> <td colspan="5" style="padding: 2px;">7001 Sloan Houston, TX 77087</td> </tr> </table>			ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE	7001 Sloan Houston, TX 77087									
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5 CANDIDATE / OFFICEHOLDER PHONE	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%; padding: 2px;">AREA CODE</td> <td style="width:40%; padding: 2px;">PHONE NUMBER</td> <td style="width:35%; padding: 2px;">EXTENSION</td> </tr> <tr> <td style="padding: 2px;">(832)</td> <td style="padding: 2px;">541-6130</td> <td></td> </tr> </table>			AREA CODE	PHONE NUMBER	EXTENSION	(832)	541-6130		Date Received JUL 15 2019								
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6 CAMPAIGN TREASURER NAME	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%; padding: 2px;">MS / MRS / MR</td> <td style="width:35%; padding: 2px;">FIRST</td> <td style="width:15%; padding: 2px;">MI</td> </tr> <tr> <td style="padding: 2px;">Ms.</td> <td style="padding: 2px;">Liliana</td> <td></td> </tr> <tr> <td style="padding: 2px;">NICKNAME</td> <td style="padding: 2px;">LAST</td> <td style="padding: 2px;">SUFFIX</td> </tr> <tr> <td></td> <td style="padding: 2px;">Lira</td> <td></td> </tr> </table>			MS / MRS / MR	FIRST	MI	Ms.	Liliana		NICKNAME	LAST	SUFFIX		Lira		Date Hand-delivered or Date Postmarked		
MS / MRS / MR	FIRST	MI																
Ms.	Liliana																	
NICKNAME	LAST	SUFFIX																
	Lira																	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%; padding: 2px;">STREET ADDRESS (NO PO BOX PLEASE);</td> <td style="width:25%; padding: 2px;">APT / SUITE #;</td> <td style="width:25%; padding: 2px;">CITY;</td> <td style="width:25%; padding: 2px;">STATE;</td> <td style="width:20%; padding: 2px;">ZIP CODE</td> </tr> <tr> <td colspan="5" style="padding: 2px;">7002 Sloan Houston, TX 77087</td> </tr> </table>				STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #;	CITY;	STATE;	ZIP CODE	7002 Sloan Houston, TX 77087								
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9 REPORT TYPE	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%; padding: 2px;"><input type="checkbox"/> January 15</td> <td style="width:25%; padding: 2px;"><input type="checkbox"/> 30th day before election</td> <td style="width:25%; padding: 2px;"><input type="checkbox"/> Runoff</td> <td style="width:25%; padding: 2px;"><input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)</td> </tr> <tr> <td style="padding: 2px;"><input checked="" type="checkbox"/> July 15</td> <td style="padding: 2px;"><input type="checkbox"/> 8th day before election</td> <td style="padding: 2px;"><input type="checkbox"/> Exceeded \$500 limit</td> <td style="padding: 2px;"><input type="checkbox"/> Final Report (Attach C/OH - FR)</td> </tr> </table>				<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)						
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10 PERIOD COVERED	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%; padding: 2px;">Month</td> <td style="width:10%; padding: 2px;">Day</td> <td style="width:15%; padding: 2px;">Year</td> <td style="width:20%; padding: 2px;">THROUGH</td> <td style="width:30%; padding: 2px;">Month</td> <td style="width:10%; padding: 2px;">Day</td> <td style="width:10%; padding: 2px;">Year</td> </tr> <tr> <td style="padding: 2px;">01</td> <td style="padding: 2px;">/ 01</td> <td style="padding: 2px;">/ 2019</td> <td style="padding: 2px;"></td> <td style="padding: 2px;">06</td> <td style="padding: 2px;">/ 30</td> <td style="padding: 2px;">/ 2019</td> </tr> </table>				Month	Day	Year	THROUGH	Month	Day	Year	01	/ 01	/ 2019		06	/ 30	/ 2019
Month	Day	Year	THROUGH	Month	Day	Year												
01	/ 01	/ 2019		06	/ 30	/ 2019												
11 ELECTION	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%; padding: 2px;">ELECTION DATE</td> </tr> <tr> <td style="padding: 2px;">Month / Day / Year</td> </tr> </table>		ELECTION DATE	Month / Day / Year	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%; padding: 2px;"><input type="checkbox"/> Primary</td> <td style="width:20%; padding: 2px;"><input type="checkbox"/> Runoff</td> <td style="width:20%; padding: 2px;"><input type="checkbox"/> Other</td> </tr> <tr> <td style="padding: 2px;"><input type="checkbox"/> General</td> <td style="padding: 2px;"><input type="checkbox"/> Special</td> <td style="padding: 2px;">Description</td> </tr> </table>			<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other	<input type="checkbox"/> General	<input type="checkbox"/> Special	Description					
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<input type="checkbox"/> General	<input type="checkbox"/> Special	Description																
12 OFFICE	OFFICE HELD (if any) HISD School Board Trustee, District III		13 OFFICE SOUGHT (if known)															

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

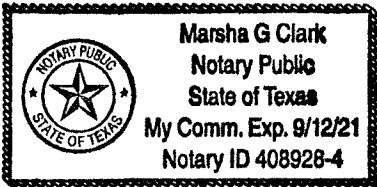
**FORM C/OH
COVER SHEET PG 2**

14 C/OH NAME Sergio Lira	15 Filer ID (Ethics Commission Filers)
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16 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. 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.	
	<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

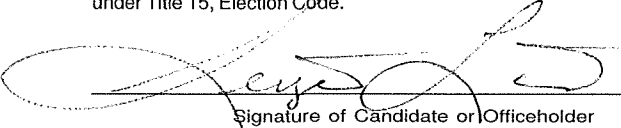
17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 0
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 6,007.94
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

18 AFFIDAVIT



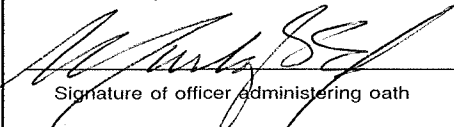
AFFIX NOTARY STAMP / SEAL ABOVE

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

Sworn to and subscribed before me, by the said Sergio Lira, this the July day of 15, 2019, to certify which, witness my hand and seal of office.



 Signature of officer administering oath

Marsha G Clark

 Printed name of officer administering oath

Notary

 Title of officer administering oath