



Official Public Records of  
Harris County  
Diane Trautman  
County Clerk

## Campaign Finance Report



*Diane Trautman*

COUNTY CLERK  
HARRIS COUNTY, TEXAS

FileNo: 202044  
Received By Clerk: 1/15/2020  
File Date: January 14, 2020  
Office: Commissioner Pct. 3  
Candidate: Hassan, Erik  
Treasurer: Hassan, Erik  
Category: Contributions And Expenditures  
Delivered By: Electronically Filed  
Type: COR

Harris County No Fee

# 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

MS / MRS / MR

FIRST

MI

NICKNAME

LAST

SUFFIX

ERIK  
BeTo HASSAN

OFFICE USE ONLY

Date Received

4 CANDIDATE /  
OFFICEHOLDER  
MAILING  
ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

☐ Change of Address

22607 coriander Dr.  
KATY, TX 77450

5 CANDIDATE/  
OFFICEHOLDER  
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(832) 613 - 3766

Date Hand-delivered or Date Postmarked

6 CAMPAIGN  
TREASURER  
NAME

MS / MRS / MR

FIRST

MI

NICKNAME

LAST

SUFFIX

ERIK  
HASSAN

Receipt #

Amount \$

Date Processed

Date Imaged

7 CAMPAIGN  
TREASURER  
ADDRESS  
(Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

22607 coriander Dr.  
KATY, TX 77450

8 CAMPAIGN  
TREASURER  
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(832) 613 - 3766

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 \$500 limit

☐ Final Report (Attach C/OH - FR)

10 PERIOD  
COVERED

Month Day Year

07 / 01 / 2019

THROUGH

Month Day Year

12 / 31 / 2019

11 ELECTION

ELECTION DATE

Month Day Year  
03 / 03 / 2020

☒ Primary

☐ Runoff

ELECTION TYPE

☐ General

☐ Special

☐ Other  
Description

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

Harris County Commissioner  
pct 3

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Revised 9/26/2019

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

14 C/OH NAME

ERIK HASSAN

15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM  
POLITICAL  
COMMITTEE(S)

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

☐ Additional Pages

17 CONTRIBUTION  
TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY), UNLESS ITEMIZED

\$ 0

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 750

EXPENDITURE  
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED

\$ 0

4. TOTAL POLITICAL EXPENDITURES

\$ 4,442.<sup>86</sup>

CONTRIBUTION  
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

\$ 0

OUTSTANDING  
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ 0

18 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.

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

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Revised 9/26/2019

# SUBTOTALS - C/OH

FORM C/OH  
COVER SHEET PG 3

19 FILER NAME

ERIK HASSAN

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS  
NAME OF SCHEDULE

SUBTOTAL  
AMOUNT

1. ☐ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS

\$ 750

2. ☐ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

\$ 500

3. ☐ SCHEDULE B: PLEDGED CONTRIBUTIONS

\$ /

4. ☐ SCHEDULE E: LOANS

\$ /

5. ☐ SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

\$ 750

6. ☐ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS

\$ /

7. ☐ SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS

\$ /

8. ☐ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD

\$ /

9. ☐ SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

\$ 4,442<sup>88</sup>

10. ☐ SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH

\$ /

11. ☐ SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

\$ /

12. ☐ 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:

2 FILER NAME

ERIK HASSAN

3 Filer ID (Ethics Commission Filers)

4 Date

12/06/2019

5 Full name of contributor

Mohamad HAMAD

☐ out-of-state PAC (ID#)

7 Amount of contribution (\$)

\$ 100

6 Contributor address;

City;

State;

Zip Code

2909 Hillcroft #250 Houston, TX 77057

8 Principal occupation / Job title (See Instructions)

Accountant

9 Employer (See Instructions)

self

Date

12/06  
2019

Full name of contributor

Sarge Khan

☐ out-of-state PAC (ID#)

Amount of contribution (\$)

\$ 500

Contributor address;

City;

State;

Zip Code

3455 S. Dairy Ashford Houston TX 77082

Principal occupation / Job title (See Instructions)

Hotel & Equip. Sale

Employer (See Instructions)

self

Date

12/28/  
2019

Full name of contributor

M. Afshar

☐ out-of-state PAC (ID#)

Amount of contribution (\$)

\$ 150

Contributor address;

City;

State;

Zip Code

14230 Marin Dr. Cypress TX 77429

Principal occupation / Job title (See Instructions)

Engineer

Employer (See Instructions)

self

Date

Full name of contributor

☐ out-of-state PAC (ID#)

Amount of contribution (\$)

Contributor address;

City;

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2:	
2 FILER NAME <b>ERIK HASSAN</b>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ <b>500</b>	
5 Date <b>8,29,2019</b>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>Jay Luchen</b> 7 Contributor address: <b>2513 S. Gessner Rd Houston TX</b> City: State: Zip Code <b>77063</b>	8 Amount of Contribution \$	9 In-kind contribution description <b>Ball Room Rent</b>
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
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	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Contributor address: City: State: Zip Code	Amount of Contribution \$	In-kind contribution description
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
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)			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED  
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

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Revised 9/26/2019

# POLITICAL EXPENDITURES MADE 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:	2 FILER NAME ERIK BETA HASSAN	3 Filer ID (Ethics Commission Filers)
4 Date 8/26/2019	5 Payee name 3110 PRODUCE ROW	
6 Amount (\$) \$ 635	7 Payee address; 3110 PRODUCE ROW HOUSTON, TX 77023	City; State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food And Beverage	(b) Description meet Lamb and chicken
	(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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name (Office sought) Office held ERIK HASSAN Harris County Comm pct 3	
Date 8/29, 2019	Payee name HEB 10100 Beechnut 77072	
Amount (\$) \$ 86.55	Payee address; ↓ Houston TX 77072	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food & Beverage	Description Drinks And Food
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name (Office sought) Office held ERIK HASSAN Harris County Comm. pct 3	
Date	Payee name Time wise	
Amount (\$) 28.45	Payee address; 21901 Katy Freeway Houston TX 77450	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel in District	Description Gas
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name (Office sought) Office held ERIK HASSAN Harris County Comm. pct 3	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

## 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 G:		2 FILER NAME ERIK HASSAN		3 Filer ID (Ethics Commission Filers)	
4 Date 9/8, 2019		5 Payee name sweet Factory			
6 Amount (\$) 69.40 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; 3330 Hillcroft		City; Houston	State; TX Zip Code 77057
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food is weeks		(b) Description for event		
	(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 ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name ERIK HASSAN		Office sought Harris County Comm - pct 3	Office held
Date 12/12/2019		Payee name Tino cafe			
Amount (\$) 70.40 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; 415 south maroon Rd		City;	State; Zip Code 77450
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food & Bev		Description meeting		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name ERIK		Office sought Harris County Comm - pct 3	Office held
Date 9/27, 2019		Payee name 99¢ store			
Amount (\$) 183.46 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; 2803 Katy Freeway		City; Katy	State; Zip Code 77450
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Beverage		Description for the event		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name ERIK HASSAN		Office sought Harris County Comm - pct 3	Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

several pages

# **POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS**

**SCHEDULE G**

## **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 G:	2 FILER NAME <b>ERIK Beto HASSAN</b>	3 Filer ID (Ethics Commission Filers)
4 Date <b>12/9/2019</b>	5 Payee name <b>Harris County D party</b>	
6 Amount (\$) <b>\$ 1250</b> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; <b>4619 Lyons Ave</b>	City; State; Zip Code <b>Houston TX 77020</b>
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <b>Election Filing</b>	(b) Description <b>Filing for the</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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought Office held <b>ERIK HASSAN Harris County Comm pct 3 Harris</b>	
Date <b>10/11/2019</b>	Payee name <b>AL Asad Grill</b>	
Amount (\$) <b>1582.05</b> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; <b>8619 Richmond #100</b>	City; State; Zip Code <b>Houston TX 77063</b>
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Food And Beverage</b>	Description <b>Food for event ex per</b>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought Office held <b>ERIK HASSAN Harris County Comm pct 3</b>	
Date	Payee name <b>3110 produce Row</b>	
Amount (\$) <b>\$ 433.46</b> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; <b>3110 produce Row</b>	City; State; Zip Code <b>Houston TX 77023</b>
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>meat</b>	Description <b>FOR meat</b>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought Office held <b>ERIK HASSAN Harris County Comm pct 3</b>	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

## 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 G:	2 FILER NAME ERIK HASSAN	3 Filer ID (Ethics Commission Filers)
4 Date NOV. 15 2014	5 Payee name Tine wire	
6 Amount (\$) 158.30 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1507 Mason Rd 77449	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel in District	(b) Description Gas in car
	(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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name ERIK HASSAN	(Office sought) Office held Harris County Comm pct 3
Date Dec	Payee name Valero / Tine wire	
Amount (\$) 171.80 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code Mason Rd 77450	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel in District	Description Gas & Cars
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name ERIK HASSAN	(Office sought) Office held Harris County Comm. pct 3
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<input type="checkbox"/> Reimbursement from political contributions intended		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY 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 PERSONAL FUNDS**

**SCHEDULE G**

## **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 G:		2 FILER NAME <b>ERIK HASSAN</b>		3 Filer ID (Ethics Commission Filers)	
4 Date <b>Aug 2019</b>		5 Payee name <b>shell</b>			
6 Amount (\$) <b>117.50</b> <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address: <b>21901 KAIG Fwy</b>		City: <b>KAIG</b>	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <b>Travel in District</b>		(b) Description <b>Gas &amp; vehical (car)</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 ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name (Office sought) Office held <b>ERIK HASSAN Harris County Comm. pct 3</b>			
Date <b>SEP 2019</b>		Payee name <b>SHERRON</b>			
Amount (\$) <b>109.40</b> <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address: <b>9655 West Hein</b>		City: <b>77063</b>	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Travel in District</b>		Description <b>Gas &amp; vehical</b>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Office sought Office held <b>ERIK HASSAN Harris County Comm. pct 3</b>			
Date <b>oct 2019</b>		Payee name <b>shell</b>			
Amount (\$) <b>163.00</b> <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address: <b>21901 KAIG Fwy</b>		City: <b>KAIG</b>	State; Zip Code <b>77450</b>
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Travel in District</b>		Description <b>Gas &amp; vehical</b>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Office sought Office held <b>ERIK HASSAN Harris County Comm. pct 3</b>			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

## 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

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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 G:	2 FILER NAME ERIK HASSAN	3 Filer ID (Ethics Commission Filers)
4 Date 9/27/2019	5 Payee name Randell	
6 Amount (\$) \$51 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address: 9660 westheimer	City; State; Zip Code Houston TX 77083
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food & Bev	(b) Description Food
	(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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name ERIK HASSAN	Office sought Harris County Comm. pct 3
Date 10/26/2019	Payee name	
Amount (\$) 60.15 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address: Fiesta	City; State; Zip Code 331 S. Mason Rd 77450
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food	Description Food
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name ERIK HASSAN	Office sought Harris County Comm. pct 3
Date 8/29/2019	Payee name Lara	
Amount (\$) 17.94 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address: Phoenixia 12141 Westheimer Rd	City; State; Zip Code Houston TX 77077
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food & Bev	Description Food
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name ERIK HASSAN	Office sought Harris County Comm. pct 3

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Forms provided by Texas Ethics Commission

www.ethics.state.tx.us

Revised 9/26/2019

### RECORDER'S MEMORANDUM:

At the time of recordation, this instrument was found to be inadequate for the best photographic reproduction because of illegibility, carbon or photo copy, discolored paper, etc. All blockouts, additions and changes were present at the time the instrument was filed and recorded.

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