

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

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

1 ACCOUNT #
(Ethics Commission filers)

2 Total pages filed:

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR FIRST MI
MS. Maricelda —
NICKNAME LAST SUFFIX
— Reyes

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
157 E. Texas Ave
FALFURRIAS TX 78355
 Change of Address

5 CANDIDATE/
OFFICEHOLDER
PHONE

AREA CODE PHONE NUMBER EXTENSION
(512) 455-2276

6 CAMPAIGN
TREASURER
NAME

MS / MRS / MR FIRST MI
MS. Maricelda —
NICKNAME LAST SUFFIX
— Reyes

7 CAMPAIGN
TREASURER
ADDRESS
(Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
157 E. Texas Ave
Falfurrias, TX 78355

8 CAMPAIGN
TREASURER
PHONE

AREA CODE PHONE NUMBER EXTENSION
(361) 455-2274

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 THROUGH Month Day Year
11 / 05 / 09 THROUGH 1 / 15 / 10

11 ELECTION

ELECTION DATE ELECTION TYPE
Month Day Year
03 / 02 / Primary Runoff General Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

JP Pd # 3

14 NOTICE
OF DIRECT
CAMPAIGN
EXPENDITURE
BY OTHER
INDIVIDUALS

-- Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. --

Name

NO-

Address / PO Box; Apt. / Suite #; City; State; Zip Code

additional pages

GO TO PAGE 2

OFFICE USE ONLY

Date Received
Filed For Record
at 2:27 o'clock PM

JAN 22 2010

Date Hand-delivered to Postmarked
Business Administration, Texas Co., Tx

Receipt # _____ Amount _____

Date Processed _____

Date Imaged _____

Jan 28 2010 11:15AM JMG - Falfurrias Office 3613253512 p.2

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

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

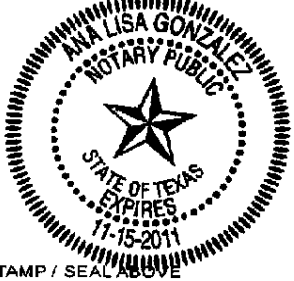
**FORM C/OH
COVER SHEET PG 2**

15 C/OH NAME	16 ACCOUNT # (Ethics Commission Filers)
---------------------	--

17 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> additional pages	** This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures. **	
	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

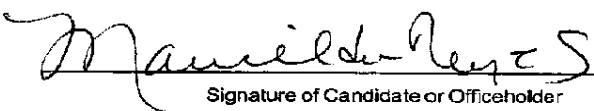
18 CONTRIBUTION TOTALS EXPENDITURE TOTALS CONTRIBUTION BALANCE OUTSTANDING LOAN TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 100.00
	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 501.15
	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 3.40
	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

19 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 Maricelda Reyes, this the 20th day of Jan., 20 10, to certify which, witness my hand and seal of office.

<u>Ana Lisa Gonzalez</u> Signature of officer administering oath	<u>Ana Lisa Gonzalez</u> Printed name of officer administering oath	<u>Notary Public</u> Title of officer administering oath
---	--	---

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 1

2 FILER NAME

MARICELDA Reyes

3 ACCOUNT # (Ethics Commission filers)

4 Date

~~12/03/09~~
11/26/09

5 Payee name

~~Valero Sunset Graphic~~

6 Payee address; City; State; Zip Code

~~3000 ST. MARYS Falfurrias, TX.~~

7 Amount (\$)

~~15.00~~
86.00

8 Purpose of payment (See instructions regarding type of information required.)

10 Political Signs
(If travel outside of Texas, complete Schedule T)

9 ** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Maricelda Reyes JP Pet #3

Date

11/13/09

Payee name

Brook Co. Ct. Hse to Voters Reg. Office

Payee address; City; State; Zip Code

Falfurrias, TX.

Amount (\$)

10.60

Purpose of payment (See instructions regarding type of information required.)

Voters List - Pet #3
(If travel outside of Texas, complete Schedule T)

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Maricelda Reyes JP Pet #3

Date

11-17-09

Payee name

Family Dollar

Payee address; City; State; Zip Code

Amount (\$)

27.60

Purpose of payment (See instructions regarding type of information required.)

X-MAS Gifts for Chamber of Commerce
(If travel outside of Texas, complete Schedule T)

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Maricelda Reyes JP Pet #3

Date

11-12-09

Payee name

Sunset Graphic

Payee address; City; State; Zip Code

Amount (\$)

162.38

Purpose of payment (See instructions regarding type of information required.)

Political Signs
(If travel outside of Texas, complete Schedule T)

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Maricelda Reyes JP Pet #3

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form. 1 Total pages Schedule F:

2 FILER NAME 3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name	7 Amount (\$)
11-14-09	McIntyre Lumber	25.98
	6 Payee address; City; State; Zip Code	

8 Purpose of payment (See instructions regarding type of information required.) Lumber for Political signs (If travel outside of Texas, complete Schedule T)	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held Maricelda Reyes Pct# 35P.
--	---

Date	Payee name	Amount (\$)
11-23-09	HEB	18.82
	Payee address; City; State; Zip Code	

Purpose of payment (See instructions regarding type of information required.) Cake Mix & Frosting for 380 Centers (If travel outside of Texas, complete Schedule T)	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held Maricelda Reyes JPPct# 3
---	--

Date	Payee name	Amount (\$)
12-4-09	Sunset Graphic	53.00
	Payee address; City; State; Zip Code	

Purpose of payment (See instructions regarding type of information required.) Political Magnetic Signs (If travel outside of Texas, complete Schedule T)	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held MARICELDA Reyes JP Pct# 3
--	---

Date	Payee name	Amount (\$)
	Payee address; City; State; Zip Code	

Purpose of payment (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
--	--

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

**POLITICAL EXPENDITURES
MADE FROM PERSONAL FUNDS** **SCHEDULE G**

The Instruction Guide explains how to complete this form. 1 Total pages Schedule G: **2**

2 FILER NAME **Maricela Reyes** 3 ACCOUNT # (Ethics Commission filers)

4 Date 11-17-09	5 Payee name Family Dollar	8 Amount (\$) 27.60
	6 Payee address; City; State; Zip Code STORE #2557 - FAL TX. 78355	<input type="checkbox"/> Reimbursement from political contributions intended
	7 Purpose of expenditure (See instructions regarding type of information required.) X-mas gift for Cambar of Commerce (If travel outside of Texas, complete Schedule T)	

Date 11-12-09	Payee name Sunset Graphic	Amount (\$) 162.38
	Payee address; City; State; Zip Code Falfurrias, TX.	<input type="checkbox"/> Reimbursement from political contributions intended
	Purpose of expenditure (See instructions regarding type of information required.) Political signs (If travel outside of Texas, complete Schedule T)	

Date 11-14-09	Payee name McIntyre Lumber	Amount (\$) 25.98
	Payee address; City; State; Zip Code 113 N. ST. MARYS / Falfurrias, TX. 78355	<input type="checkbox"/> Reimbursement from political contributions intended
	Purpose of expenditure (See instructions regarding type of information required.) Lumber for political signs (If travel outside of Texas, complete Schedule T)	

Date 11-23-09	Payee name HEB	Amount (\$) 18.82
	Payee address; City; State; Zip Code 7005 ST. MARYS / Falfurrias, TX.	<input type="checkbox"/> Reimbursement from political contributions intended
	Purpose of expenditure (See instructions regarding type of information required.) Cake Mix & Frosting for 3 St. Center in Falfurrias (If travel outside of Texas, complete Schedule T)	

Date 12-4-09	Payee name Sunset Graphic	Amount (\$) 53.00
	Payee address; City; State; Zip Code Falfurrias, TX.	<input type="checkbox"/> Reimbursement from political contributions intended
	Purpose of expenditure (See instructions regarding type of information required.) Political Magnetic Signs for Personal Car (If travel outside of Texas, complete Schedule T)	

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED