

# 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:
<b>3</b> CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR: <u>Mr</u> FIRST: <u>Edward</u> MI: <u>J</u> NICKNAME: _____      LAST: <u>MAREZ</u> SUFFIX: _____	<b>OFFICE USE ONLY</b>	
<b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #: <u>521 Vaky St</u> CITY: <u>Corpus Christi, TX</u> STATE: _____      ZIP CODE: <u>78404</u>	Date Received  FILED FOR RECORD AT <u>12:35PM</u> <u>JUL 11 2019</u> BY <u>KARA SANDS</u> CLERK, COUNTY COURT, NUECES COUNTY, TEXAS DEPUTY	
<input type="checkbox"/> Change of Address	<b>5</b> CANDIDATE / OFFICEHOLDER PHONE	AREA CODE: <u>(361)</u> PHONE NUMBER: <u>813</u> EXTENSION: <u>2105</u>	Date Hand-delivered or Date Postmarked
<b>6</b> CAMPAIGN TREASURER NAME	MS / MRS / MR: <u>Mr</u> FIRST: <u>Pete</u> MI: _____ NICKNAME: _____      LAST: <u>Rivera</u> SUFFIX: _____	Receipt #	Amount \$
<b>7</b> CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #: <u>5310 Pleasant Cir</u> CITY: <u>Corpus Christi, TX</u> STATE: _____      ZIP CODE: <u>78404</u>	Date Processed	Date Imaged
<b>8</b> CAMPAIGN TREASURER PHONE	AREA CODE: <u>(361)</u> PHONE NUMBER: <u>581313</u> EXTENSION: _____	<b>9</b> REPORT TYPE	
<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)	
<b>10</b> PERIOD COVERED	Month: <u>1</u> / Day: <u>1</u> / Year: <u>19</u> THROUGH      Month: <u>6</u> / Day: <u>30</u> / Year: <u>19</u>	<b>11</b> ELECTION	
ELECTION DATE: Month: ___ / Day: ___ / Year: ___		ELECTION TYPE: <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special	
<b>12</b> OFFICE	OFFICE HELD (if any): <u>County Commissioner Pct 3</u>	<b>13</b> OFFICE SOUGHT (if known): _____	

GO TO PAGE 2

2019-047

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

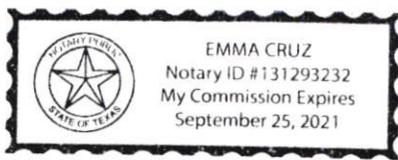
14 C/OH NAME	15 Filer ID (Ethics Commission Filers)
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<b>16 NOTICE FROM POLITICAL COMMITTEE(S)</b>  <input type="checkbox"/> Additional Pages	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES 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. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 7830 <sup>00</sup>
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$
	4. <b>TOTAL POLITICAL EXPENDITURES</b>	\$ 3965.84
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 7830 <sup>00</sup>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

**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.



AFFIX NOTARY STAMP / SEAL ABOVE

*E. John Marez*

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Edward John Marez, this the 11<sup>th</sup> day of July, 20 19, to certify which, witness my hand and seal of office.

*Emma Cruz*

Signature of officer administering oath

Emma Cruz

Printed name of officer administering oath

*Notary Public*

Title of officer administering oath

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

3 Filer ID (Ethics Commission Filers)

4 Date

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

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)

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)

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.

# 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.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> Date	<b>5</b> Payee name
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<b>6</b> Amount (\$)	<b>7</b> Payee address; 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)	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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<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	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <div style="font-size: 2em; color: blue; text-align: center;">See</div>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <div style="font-size: 2em; color: blue; text-align: center;">Attachment</div>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

1

### Contributions

Megan & Javier Rodriguez	933 Delaine CCTX	50.00
Linebarger Attorney's	PO Box 17428 AustinTX	1000.00
Jerry Guerra	PO Box 2526 CCTX	350.00
Wilfredo Rivera	610 Del Mar CCTx	200.00
Kathryn & Craig Thompson	823 Furman CCTX	200.00
Belinda Flores	6409 Legacy Point, CCTX	500.00
Roy/Irene Carrizales	3641 Dalraida, CCTX	30.00
Rolando Barrera	PO BOX 71832, CCTX	200.00
John/Jackie Michael	3117 Seafoam, CCTX	200.00
Rachel Canales	1374 Sandpiper, CCTX	200.00
Coretta Graham	PO BOX 60026, CCTX	50.00
Raymond Gignac	416 Starr, CCTX	500.00
Frank Lazarte	924 Leopard, CCTX	200.00
Ernest Garza	10201 Leopard, CCTX	300.00
John/Dr Crystal Valls	615 N Upper Broadway, CCTX	500.00
Lynn Allison	410 Miramar, CCTX	100.00
Richard Borchard	481 Meyer, Westoff, TX	300.00
David Engel	230 Amistad, CCTX	500.00
Diane Leonetti	515 N Upper Broadway, CCTX	200.00
Joe A Gonzalez	4009 D Oak Forest, CCTX	100.00
Raymond/Janiece Lucas	323 Twisted Wood, San Antonio, TX	1000.00
Philip Ramirez	3751 S Alameda, CCTX	1000.00
Sunil Reddy	1711 W Wheeler, Aransas Pass, TX	2500.00
		<b>TOTAL</b>
		<b>7830.00</b>

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**Expenditures**

1/11	HEB 3133 S Alameda CCTX	Food/Beverage Expenses "Coffee with the Commissioner	55.62
1/15	KTMV	Campaign Advertising	200.00
1/17	2209 NPID, CCTX	Radio Ads	
1/18	Fermins Mexican Restaurant Robstown	Food/Beverage Expenses Staff Lunch	143.22
1/31	Stripes 601 S Padre Island Dr	Transportation Related Expense	10.00
3/13	USPS 4801 Everhart	Postage/Mail Expenses	92.00
	Texas Secretary of State Austin, Tx	Campaign Registrar	7.19
3/20	Cracker Barrel 4229 S Padre Island Dr.	Food/Beverage Expenses Campaign Meeting	38.60
3/23	Banquete Little League Robstown, Tx	Donation/Fundraiser	100.00
3/24	Astor Restaurant 5533 Leopard	Food/Beverage Expenses Campaign Meeting	19.28
4/2	Bella Bistro 901 Leopard	Food/Beverage Expenses Provided for Breakfast Meeting	5.41
4/6	Alvardo Gonzalez Knights of Columbus Robstown, TX	Fundraiser/Donation	25.00
4/11	Squ Aka 415 N Water	Food/Beverage Expense	81.25
4/12	Bellas Bistro 901 Leopard	Food/Beverage Expenses Students Meeting at Courthouse	147.22
4/15	KTMV/Ernest Lopez 2209 NPID, CCTX	Radio Advertising Easter	150.00
4/17	Bellas Bistro 901 Leopard	Food/Beverage Expenses Students Meeting at Courthouse	15.15



4/19	Little Caesars 2744 S Staples	Food/Beverage Expenses Students Meeting at Courthouse	64.95
4/23	HEB 3133 S Alameda CCTX	Food/Beverage Expenses Staff Luncheon	55.62
4/26	Little Caesars 2744 S Staples	Food/Beverage Expenses Students Meeting at Courthouse	81.19
4/26	HEB 3133 S Alameda CCTX	Food/Beverage Expenses Staff Luncheon	34.50
5/1	AutoNation Chevrolet Corpus Christi	Transportation Equipment/Related Expenses	261.86
5/1	KTMV/Ernest Lopez 2209 NPID, CCTX	Radio Advertising Robstown HS Baseball	100.00
5/5	Whataburger	Food/Beverage Expenses Campaign Meeting	5.50
5/8	Boy Scouts of America 900 S Shoreline	Donation/Fundraiser	300.00
5/6	Office Depot 1737 S Staples	Office Supplies	15.79
5/8	KTMV/Carlos Lopez 2209 NPID, CCTX	Radio Advertising	124.50
5/13	Texas Debraz	Food/Beverage Expenses Campaign Meeting	230.48
5/13	N&F-Corpus Christi	Donation/Fundraiser	30.00
5/16	Nikos Steak House 5409 Saratoga	Food/Beverage Expenses Staff Luncheon	110.01
5/16	KTMV/Carlos Lopez 2209 NPID, CCTX	Radio Advertising	150.00
5/19	Robstown ADC 101 E Main, Robstown	Annual Banquet Fundraiser	750.00



5/29	Rumaldo Juarez	Donation/Fundraiser NW Rotary Club	50.00
5/29	First Christian Church Of Alice	Donation/Fundraiser	150.00
6/3	Boy Scouts of America 900 S Shoreline	Donation/Fundraiser	180.00
6/5	KTMV 2209 NPID, CCTX	Radio Advertising	181.50
			TOTAL 3965.84