

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: 7
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR: Mr FIRST: Edward MI: J NICKNAME: _____ LAST: Marez SUFFIX: _____	OFFICE USE ONLY Date Received <div style="text-align: center; color: blue; font-weight: bold;"> FILED FOR RECORD AT 2:20 PM JAN 15 REC'D KARA SANDS CLERK, COUNTY COURT, NUECES COUNTY, TEXAS BY _____ DEPUTY </div> Date Hand-delivered or Date Postmarked Receipt # Amount \$ Date Processed Date Imaged	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE 521 Vaky Campus Christi, Tx 78404		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (361) 813 2105		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR: Mr FIRST: Pete MI: _____ NICKNAME: _____ LAST: Rivera SUFFIX: _____	Date Hand-delivered or Date Postmarked 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 5810 Pheasant Cir Corpus Christi TX 78412		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (361) 658 2575		
9 REPORT TYPE	<input checked="" 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 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)		
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year 7 / 1 / 19 THROUGH 12 / 31 / 19		
11 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	
12 OFFICE	OFFICE HELD (if any) Nueces County Commissioner	13 OFFICE SOUGHT (if known)	

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2020-0019

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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16 NOTICE FROM POLITICAL COMMITTEE(S)

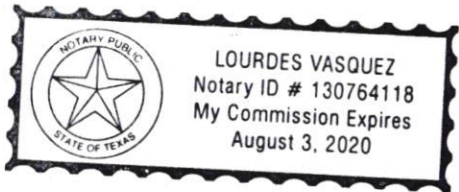
THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO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

<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE COMMITTEE NAME COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS
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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	\$ 2,380.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 7,880.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ - 0 -
	4. TOTAL POLITICAL EXPENDITURES	\$ 5,497.45
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 7,055.36
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ - 0 -

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]

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Edward John Marez, this the 15th day of Jan, 20 20, to certify which, witness my hand and seal of office.

<i>[Signature]</i>	Lourdes Vasquez	Senior Clerk
Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 7,880 ⁰⁰
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 5,497.45
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> 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

3 Filer ID (Ethics Commission Filers)

4 Date

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

7 Amount of contribution (\$)

8/29/19

Dr Vish Reddy

1,000

6 Contributor address; City; State; Zip Code

917 S Port Ave CorpusChrist TX 78414

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Doctor

Self

Date

Full name of contributor out-of-state PAC (ID#: _____)

Amount of contribution (\$)

8/29/19

Swil Reddy

3,500

Contributor address; City; State; Zip Code

1315 S Santa Fe CorpusChrist, TX 78404

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

CEO Core Integrated Behavioral Health

Self

Date

Full name of contributor out-of-state PAC (ID#: _____)

Amount of contribution (\$)

8/29/19

Frank Lazerde

1,000

Contributor address; City; State; Zip Code

CorpusChrist, TX 78404

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Attorney

Self

Date

Full name of contributor out-of-state PAC (ID#: _____)

Amount of contribution (\$)

8/29/19

Moe Matraghi

1,000

Contributor address; City; State; Zip Code

201 Ocean Dr CorpusChrist, TX 78404

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Retired

Self

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.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	
6 Amount (\$)	7 Payee address;	City; State; Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	(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	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)	Payee address;	City; State; Zip Code
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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)	Payee address;	City; State; Zip Code
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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

See Attachment F1

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Political EXPENSES

F1

7/5/19	The Post 411 Doddridge St, CCTX 78404	Event Expense	\$200
7/5/19	Luciano's Italian Restaurant 1821 S Alameda St, CCTX 78404	Food/Beverage Exp	
7/22/19	Coastal Bend Democratic Women 2701 Morgan., CCTX	Fees	50.00
7/29/19	CCAUSE 5858 S Alameda., CCTX 78412	Fundraising Expense	475.00
7/30/19	HEB 3133 S Alameda St, CCTX 78404	Donation School Supplies Travel in District	32.99
7/30/19	Stripes 2754 S Staples St, CCTX 78404	Travel in District	4.14
7/31/19	Squ Aka Downtown 415 N Water St, CCTX 78401	Food/Beverage Exp	82.16
8/2/19	Banquete ISD Athletic Boosters 5519 State HWY 44, Robstown 78380	Other/Donation Football Program	150.00
8/8/19	PosterMyWall 969-G Edgewater Blvd, Foster City, CA	Event Expense	2.99
8/9/19	WalMart 4109 S Staples, CCTX 78411	Event Expense	21.52
8/10/19	Switcher Studios	Fees	588.00
8/22/19	Squ Aka Downtown 415 N Water St, CCTX 78401	Food/Beverage Exp	65.17
8/22/19	Rene Vasquez/Magic 104.9 2209 NPID, CC TX	Ad Expense	125.00
8/22/19	League of Women Voters	Radio Promo Football Game Fees	15.00
8/23/19	Sangs Imperial Café 5650 Corona Dr. CCTX, 78415	Food/Beverage Exp	109.26
8/27/19	Dr Dons Buttons 3906 W Morrow, Glendale, AZ	Printing Expense	124.45
8/29/19	Happy Teac 5433 S Staples, CCTX	Campaign Signs Food/Beverage Exp	18.26
8/30/19	Taqueria Jalisco Restaurant 2033 Airline., CCTX	Food/Beverage Exp Campaign Meeting	7.17
10/1/19	HEB 3133 S Alameda St, CCTX 78404	Travel in District	16.14
10/3/19	Hester Café 1902 N Shoreline., CCTX	Food/Beverage Exp Campaign Meeting	44.20
10/14/19	HEB 3133 S Alameda, CCTX	Food/Beverage Exp	18.00
10/23/19	Stripes 2754 S Staples St, CCTX 78404	Food for staff meeting Travel in District	20.00
11/5/19	Fermins 400 N Main, Robstown, TX	Food/Beverage Exp	31.32
11/6/19	Great Clips	Other/Donation	45.00

11/10/19	3133 S Alamedac CCTX 78404 Yalee's Bistro	Food/Beverage	24.85
11/23/19	5649 Saratoga Blvd, CCTX 78412 Mr Fancy Pants CarWash	Transportation Equipment Car Wash for Parade	20.00
11/29/19	5329 S Staples, CCTX 78412 Flock	Travel in District	79.00
12/3/19	Moon Dog Restaurant 100 N Casterline Dr, Fulton TX	Food/Beverage Exp Staff Lunch	62.00.
12/4/19	Hamlin Middle School Science Dept 3900 Hamlin Dr, CCTX 78411	Other/Donation Science Equipment	99.00
12/4/19	Nueces County Democratic Party 2701 Morgan, CCTX	Fees/Candidate Filing	1,250.00
12/6/19	HEB 3133 S Alameda St, CCTX 78404	Food/Beverage Exp Candy for Parade	64.56
12/7/19	Taqueria de Los Altos 829 Industrial, Robstown TX 78380	Food/Beverage Exp Meal for Campaign staff	50.95
12/9/19	Magic Q Radio 104.9fm 2209 NPID	Ad Expense Christmas Ad	350.00
12/10/19	Rey Saiz 1000 Shamsie Blvd., Robstown TX 78380	Polling Expense Campaign Signs	500.00
12/10/19	CCAUSE 5858 S Alameda., CCTX 78412	Fundraising Expense Christmas Donation for Kids Presents	500.00
12/19/19	HEB 3133 S Alameda St, CCTX 78404	Food/Beverage Exp Christmas Party Office Exp	183.63
12/19/19	Denny's 5165 IH-37, CCTX 78410	Food/Beverage Exp Staff Lunch	67.69

TOTAL
5,497.45