

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 <i>John</i> <i>Marez</i>	OFFICE USE ONLY <hr/> Date Received FILED FOR RECORD AT 3:04 PM FEB 24 2020 KARA SANDS CLERK, COUNTY COURT, NUECES COUNTY, TEXAS BY <i>Kara Murgueta</i> DEPUTY <hr/> Date Hand-delivered or Date Postmarked <hr/> Receipt # Amount \$ <hr/> Date Processed <hr/> Date Imaged	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <i>521 Vaky Cc Tx 78404</i> <input type="checkbox"/> Change of Address		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION <i>(361) 813 2105</i>		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI NICKNAME LAST SUFFIX <i>Mr Pete</i> <i>Ravena</i>		
7 CAMPAIGN TREASURER ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <i>5310 Pheasant Cir Cc Tx 78412</i>		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION <i>(361) 658 7575</i>		
9 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 type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year <i>1 / 1 / 20</i> <i>THROUGH</i> <i>2 / 24 / 20</i>		
11 ELECTION	ELECTION DATE Month Day Year <i>3 / 3 / 20</i>	ELECTION TYPE <input checked="" 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) <i>Nueces County Commissioner Pet 3</i>	13 OFFICE SOUGHT (if <i>Same 2020-0067</i>	

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CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

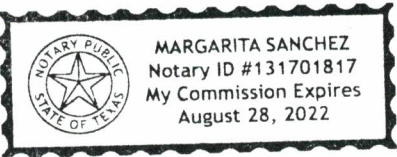
14 C/OH NAME	15 Filer ID (Ethics Commission Filers)
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16 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO 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 UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 11,988
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 12,610.47
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 6432.89
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.



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 24th day of February, 2020, to certify which, witness my hand and seal of office.

Margarita Sanchez
Signature of officer administering oath

Margarita Sanchez
Printed name of officer administering oath

SENIOR CLERK
NOTARY
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	\$ 11,988.00
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	\$ 12,610.47
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 <input type="checkbox"/> out-of-state PAC (ID#: _____) 6 Contributor address; City; State; Zip Code	7 Amount of contribution (\$)
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

See Attached

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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Contributions

2/22/20

Emilio/Bernice Saenz 222 Glendale Dr CC TX 78404	Retired	\$16
Kirby/Linda Harrison 4306 Killarmet CC TX 78413	Truck Driver/Court Reporter	\$40
Stephanie M Guerrero 6022 Sweet Gum CC TX 78415	Educator	\$32
Andrew/Luci Carrizales 7662 Sable Creek Dr CC TX 78414	Law Enforcement Officer/Educator	\$24
Coretta Graham PO BOX 60026 CC TX 78466	Attorney	\$50
Jaime Rodriguez 6326 Penny Ln CC TX 78414	Educator	\$100
Laura Estrada 434 Pennington Dr CC TX 78412	Retired	\$16
Gloria Mondragon 5468 Buggywhip CC TX 78415	Retired	\$15
Charles & Dr Lisa Perez 6721 Stuyvesant Ct CC Tx 78414	Business Owner/Educator	\$250
Juan Solis, Jr 7301 Taldora St CC TX 78414	Retired	\$100
Joe & Saeideh Ommani 3529 Morgan CC TX 78405	Business Owner	\$100

2/21/20

Bryan Gulley, DDS Oral Surgeon/Developer \$500
6421 Saratoga
CC Tx 78414

Phillip Hurst \$500
5401 Adair
CC Tx 78413

Issac Camacho Business Owner/Demolition \$1000
PO BOX 10306
CC Tx 78460

Roy/Olivia Gutierrez Director,Robstown Utility Systems \$100
105 Magee LN
Robstown, Tax 78380

2/20/20

Sunil/Geeta Reddy Business Owner/Investor \$2000
6906 Sir Lancelot
CC TX 78413

Vish Reddy Doctor \$1000
38 E Bar Le Doc Dr
CC TX 78414

2/7/20

LINNEBARGER Goggan Attorneys \$1000
Blair & Sampson
PO BOX 17428
Austin, Texas 78760

Doug Allison Attorney \$500
403 N Tanchahua
CC TX 78401

Gowan/Elizondo Attorneys \$300
555 N Carancahua
CC TX 78401

Robert Hilliard Attorney \$500
719 S Shoreline
CC TX 78401

James Bell, Jr Attorney \$500
101 N Shoreline
CC TX 78401

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Michael Hurst 13822 Suntan Ave CC TX 78418	Retired	\$300
Scott Humpal 5026 Deepwood Cir CC TX 78415	Business Owner/Therapist	\$300
Paul Elvira Chapa 8022 Saint Laurent CC TX 78414	Attorney	\$500
William Ashley Cocke 36 Hewit Dr CC TX 78404		\$300
1/10/20 Charles Schechter, MD 613 Elizabeth St CC TX 78404	Cardiologist	\$100
2/22/20 Cash Donations Less than \$50 each		\$1845
	TOTAL	\$11,988

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

See Attached

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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Expenditures

1/10/20 Susie Luna 4855 S Alameda CC TX 78412	Donation/KTMV Studio Equipment	\$500
Aaron Munoz 101 N Shoreline Blvd CC TX 78401	Consultant Fees	\$500
1/14/20 Rene Vasquez 841 Martinez Robstown, TX 78380	Donation Robstown LL	\$400
1/18/20 NC Junior Livestock Show PO BOX 260968 CC TX 78426	Scholarship Donations	\$600
1/22/20 Gulf Coast Mailing Services 6901 SPID, 103A CC TX 78412	Campaign Materials	\$216.50
1/28/20 Coastal Bend TDW 2701 Morgan CC TX 78405	Dues	\$100
2/1/20 Aaron Munoz 101 N Shoreline Blvd CC TX 78401	Consultant Fees	\$500
2/4/20 Susie Luna 4855 S Alameda CC TX 78412	Donation/Benefit Norma Hernandez	\$500
2/8/20 NC Little Miss Kickball 415 Mainer Robstown, Tx 78380	Fundraiser	\$50

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Gloria Perez 324 SH-44 Robstown, Tx 78380	Fundraiser	\$75
Gulf Coast Mailing Services 6901 SPID, 103A CC TX 78412	Campaign Materials	\$2210.89
2/10/20 NC Democratic Party GOTV 2701 Morgan CC TX 78405	Convention Ad	\$200
Albert Perez 749 Horne CC TX 78416	Campaign Signs	\$1250
2/15/20 Banquete Baseball Boosters 5519 SH 44 Robstown, Tx 78380	Fundraiser/Donation	\$100
Rene Vasquez 841 Martinez Robstown, TX 78380	GOTV	\$250
2/18/20 Gulf Coast Mailing Services 6901 SPID, 103A CC TX 78412	Campaign Materials	\$2210.89
Magic 104.9FM 2209 NPID CC TX 78416	Radio Ads	\$1000
2/20/20 Magic 104.9FM 2209 NPID CC TX 78416	Radio Ads	\$800
2/22/20 Aaron Munoz 101 N Shoreline Blvd CC TX 78401	Consultant Fees	\$1000
Waffles Unlimited	Fundraiser Breakfast	\$947.19

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6225 Bradley
CC TX 78414

Ramon Funeral Home
800 Lincoln Ave
Robstown, Tx 78380

Donation- Juan Martinez

\$100

TOTAL

\$12,610.47