

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

7629

## 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:  11
3 CANDIDATE / OFFICEHOLDER NAME	MS <input checked="" type="checkbox"/> MRS / MR	FIRST <i>MARIA</i>	MI <i>L.</i>
	NICKNAME <i>CANCHOLA</i>	LAST	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX	APT / SUITE #	CITY STATE ZIP CODE
<input type="checkbox"/> change of address	<i>1900 EAST SIDE DR. AUSTIN TX 78704</i>		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	<i>(512)</i>	<i>940-2210</i>	
6 CAMPAIGN TREASURER NAME	MS <input checked="" type="checkbox"/> MRS / MR	FIRST <i>ANNE</i>	MI
	NICKNAME	LAST <i>McAFEE</i>	SUFFIX
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #	CITY STATE ZIP CODE
(residence or business)	<i>4831 TIMBERLINE DR. AUSTIN, TEXAS 78746</i>		
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	<i>(512)</i>	<i>327-0854</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 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)		
10 PERIOD COVERED	Month Day Year	THROUGH	Month Day Year
	<i>01 / 01 / 2011</i>		<i>06 / 30 / 2011</i>
11 ELECTION	ELECTION DATE		ELECTION TYPE
	Month Day Year	<i>03 / 06 / 2012</i>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)	
	<i>TRAVIS COUNTY CONSTABLE Pet 4</i>	<i>SAME</i>	
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		
	Address / PO Box Apt / Suite #, City, State Zip Code		
<input type="checkbox"/> additional pages			

**OFFICE USE ONLY**

Date Received: *JUL 15 PM 2:08*

Date Hand-delivered or Postmarked

Receipt #

Amount

Date Processed

Date Imaged

TRAVIS COUNTY CLERK  
TRAVIS COUNTY TEXAS

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

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

15 C/OH NAME

*MARIA L. CANCHOLA*

16 ACCOUNT # (Ethics Commission Filers)

17 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

GENERAL

SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

additional pages

18 CONTRIBUTION TOTALS

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

\$ *Itemized List Attached*

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

\$ *11,669.76*

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$ *see schedule F*

4. TOTAL POLITICAL EXPENDITURES

\$ *2,214.69*

CONTRIBUTION BALANCE

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

\$ *9,531.57*

OUTSTANDING LOAN TOTALS

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

\$ *23,764.68*

19 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.



*Maria L. Canchola*  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said *Maria L. Canchola*, this the *15<sup>th</sup>* day of *July*, 20 *11*, 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

11/19/2010 L. (29) JENKINS

SCHUBERT A.

CANDIDATE  
OFFICE HOLDER REPORT  
JAN - JUNE 2011 DONATIONS

FIRST NAME	LAST NAME	ADDRESS	CITY	ZIP	Amount Donated	Online
Ben & Nancy	Aleman	417 Clarke St	Austin, TX	78745-	\$ 100.00	
David & Lilly	Alonzo	6001 Wagon Bend	Austin, TX	78744-	\$ 20.00	
Hon. Judge Charlie	Baird	PO 1242	Austin, TX	78767	\$ 25.00	
Carlos	Barraera	4007 Eton Lane	Austin, TX	78727-6025	\$ 40.00	
Ruben I	Barrera	606 W Oltorf	Austin, TX	78704-5320	\$ 50.00	
Carlos	Berru	9500 Jollyville Rd #108	Austin, TX	78759	\$ 50.00	
Joseph L.	Bruch	204 La Vista St	Austin, TX	78704-6341	\$ 40.00	
Joseph L.	Bruch	204 La Vista St	Austin, TX	78704-6341	\$ 50.00	donation online
Gilbert & Mary G.	Cantu	3603 Lost Oasis Hollow	Austin, TX	78739-7506	\$ 40.00	
Gilbert & Mary G.	Cantu	3603 Lost Oasis Hollow	Austin, TX	78739-7506	\$ 25.00	donation online
Gregory J.	Cantu Jr.	2718 Garlic Creek	Buda, TX	78610-5082	\$ 20.00	
Bob	Carr				\$ 250.00	
Sam	Castro	401 Goldenrod St.	Kyle, TX	78640-5454	\$ 150.00	
Elna	Christopher	605 Kentshire Circle	Austin, TX	78704-5615	\$ 50.00	
Rosalyn	Clifton	1227 A Hillside Ave	Austin, TX	78704-1861	\$ 40.00	
Glen & Betty	Copeland	P. O. Box 1586	Pflugerville, TX	78691-1586	\$ 50.00	
Linda	Cortez	10001 Crown Ct	Austin, TX	78724	\$ 15.00	
Alicia	Del Rio	7400 Ladle Lane	Austin, TX	78749-2844	\$ 20.00	
Alicia	Del Rio	7400 Ladle Lane	Austin, TX	78749-2844	\$ 20.00	
Ann	Denkler	6112 Highlandale Dr	Austin, TX	78704-	\$ 100.00	
Hon. Bruce	Efant	4522 Avenue F	Austin, TX	78751	\$ 100.00	
Thomas	Esparza	1811 S 1st Street	Austin, TX	78704-4251	\$ 250.00	
Shudde	Fath	1005 Bluebonnet Lane	Austin, TX	78704-2003	\$ 200.00	
Marjorie & James	Ferrell	6407 Emerald St	Austin, TX	78745-4925	\$ 25.00	
Rodney	Florence	303 Lightsey Rd	Austin, TX	78704-7149	\$ 20.00	
Frank & Petra	Flores	13101 Winters Cove	Del Valle, TX	78617-	\$ 50.00	
Maria Luisa	Flores	1300 Alta Vista Ave	Austin, TX	78704-2515	\$ 100.00	
Raymond J & Carolyn	Flores	12613 Mistletoe Trail	Marchaca, TX	78652-3737	\$ 40.00	
Robert & Eva	Flores	1705 Buttercup Rd	Pflugerville, TX	78660-	\$ 100.00	
Robert & Eva	Flores	1705 Buttercup Rd	Pflugerville, TX	78660-	\$ 100.00	
Judy	Fowler	700 Bouldin Ave	Austin, TX	78704-1610	\$ 100.00	
Judy	Fowler	700 Bouldin Ave	Austin, TX	78704-1610	\$ 20.00	
Terry	Franz	1904 Kenwood	Austin, TX	78704-	\$ 100.00	
Blanca	Garcia	1715 South 1st St.	Austin, TX	78704-	\$ 100.00	

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CANDIDATE  
OFFICE HOLDER REPORT  
JAN - JUNE 2011 DONATIONS

FIRST NAME	LAST NAME	ADDRESS	CITY	ZIP	Amount Donated	Online
Blanca	Garcia	1715 South 1st St.	Austin, TX	78704-	\$ 50.00	
Margaret Ann (Bonny)	Gardner	3207 Kerbey Lane	Austin, TX	78703-	\$ 30.00	
Georgia J. (Gina)	Garza	2614 Brisbane Rd	Austin, TX	78745-6823	\$ 20.00	
Georgia J. (Gina)	Garza	2614 Brisbane Rd	Austin, TX	78745-6823	\$ 20.00	
Raquel S.	Gonzales	501 Havana	Austin, TX	78704-	\$ 20.00	
Jorge D. & Ninfa G.	Guerra	900 Linden	Austin, TX	78702-3629	\$ 25.00	
Olivia (Guillermo Carpins)	Guerrero	2313 S. 1st Street	Austin, TX	78704	\$ 100.00	
Joe & Dorothy	Gunn	6506 Williamson Rd	Creedmoor, TX	78610-3953	\$ 100.00	
Kirsha	Haverlah	6904 Star Dr	Austin, TX	78745-6466	\$ 20.00	
Jeff	Heard	PO Box 28624	Austin, TX	78755	\$ 20.00	
Hon. Tom G.	Herrera	2400 Mozelle Lane	Austin, TX	78744-8033	\$ 50.00	
Jeff	Jack	2008 B Rabb Glen	Austin, TX	78704-	\$ 25.00	
Maria L.	Jimenez	7400 Ladle Ln.	Austin, TX	78749-2844	\$ 50.00	
Shirley A	Johnson	2000 Woodward St. #421	Austin, TX	78741-7844	\$ 20.00	
Stan & Della	Johnson	4821 River Place Blvd	Austin, TX	78730-3511	\$ 50.00	
Hon. John	Lipscombe	6600 Mesa Drive	Austin, TX	78731-	\$ 50.00	
Carlos	Lopez	4330 Bull Creek Rd #3123	Austin, TX	78731	\$ 50.00	
Gubin	Lopez	12000 Capl. Bailey's Ct	Austin, TX	78753	\$ 200.00	
Lisa T.	Lucio	11905 Larch Valley Dr.	Austin, TX	78754-5864	\$ 25.00	
Norma A. & Robert E.	Machado, Sr.	1705 Frontier Valley Dr, #8201	Austin, TX	78741-5259	\$ 300.00	
Norma A. & Robert E.	Machado, Sr.	1705 Frontier Valley Dr, #8201	Austin, TX	78741-5259	\$ 200.00	
Robert & Rose	Maciel	2305 East 7th St	Austin, TX	78702-	\$ 40.00	
Anne	McAfee	4831 Timberline Dr	Austin, TX	78746-	\$ 35.00	
Donna Beth	McCormick	5703 Shoalwood	Austin, TX	78756-	\$ 100.00	
Rachel	Montez	401 Goldenrod St.	Kyle, TX	78640-6454	\$ 50.00	
Melissa & Tino	Moralez	1106 Keesbond Place	Round Rock, TX	78664	\$ 40.00	
Ben & Evie	Moreno	3521 Grimes Ranch Rd	Austin, TX	78732-	\$ 50.00	
Ben & Evie	Moreno	3521 Grimes Ranch Rd	Austin, TX	78732-	\$ 50.00	
Isaac & Amanda	Moreno	7600 Marble Crest Dr	Austin, TX	78747-4074	\$ 20.00	
Joe & Adelia	Moreno	1717 Shag Bark Trail	Austin, TX	78758-	\$ 20.00	
Manuel	Moreno	6206 Woodhugh Dr	Austin, TX	78745-4956	\$ 30.00	
Ken & Linda	Nates	7605 Pomona Trail #A	Austin, TX	78749-2900	\$ 80.00	
Sophia	Nates	7605 Pomona Trail #A	Austin, TX	78749-2900	\$ 20.00	
Shery	Nethaway	207 Pin Oak Drive	Mountain City, TX	78610-9285	\$ 100.00	
Jane	Norwood	4500 Eagles Landing Dr	Austin, TX	78735	\$ 40.00	
Jesse "Peanut"	Ortiz	3000 Locke Lane	Austin, TX	78704-6136	\$ 60.00	



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 4 of 5	
2 FILER NAME <i>MARIA L. CABOCHOLA</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>JAN - JUNE 2011</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>THOMAS ESPARZA</i>	7 Amount of contribution (\$) <i>\$300.00</i>	8 In-kind contribution description (if applicable) <i>WEB SITE</i>
6 Contributor address; City; State; Zip Code <i>1811 So. 1st STREET AUSTIN, TX 78704</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>APR 15, 2011</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>JOSE URIBEGAS MEXITAS RESTAURANT</i>	Amount of contribution (\$) <i>\$400.00</i>	In-kind contribution description (if applicable) <i>FOR SITE LOCATION + FINGEN FOODS FOR FUNDRAISER</i>
Contributor address; City; State; Zip Code <i>1107 N. IH35 AUSTIN, TX 78702</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>APRIL 15, 2011</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>JOHNNY GONZALES</i>	Amount of contribution (\$) <i>7100.00</i>	In-kind contribution description (if applicable) <i>MUSIC FOR FUNDRAISER</i>
Contributor address; City; State; Zip Code <i>11536 SUNNY CREEK LN. AUSTIN, TX 78653</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>APRIL 15, 2011</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>MARGE &amp; JAMES CERRELL</i>	Amount of contribution (\$) <i>\$75.00</i>	In-kind contribution description (if applicable) <i>CAMPAIGN BUTTONS</i>
Contributor address; City; State; Zip Code <i>6407 EMERALD ST AUSTIN, TX 78745</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>MAY 15, 2011</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>ROSA E. SOSA LITTLE MEXICO RESTAURANT</i>	Amount of contribution (\$) <i>\$500.00</i>	In-kind contribution description (if applicable) <i>FOR SITE LOCATION + FOOD FOR FUNDRAISER</i>
Contributor address; City; State; Zip Code <i>2304 SOUTH FIRST ST. AUSTIN, TX 78704</i>		(If travel outside of Texas, complete Schedule T)	
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 CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A:  
5 of 5

2 FILER NAME *MARIA CANCHOLA* 3 ACCOUNT # (Ethics Commission Filers)

4 Date <i>MAY 15, 2011</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>JULIAN FERNANDEZ #1 LOS TEXAS DRANGERS</i>	7 Amount of contribution (\$) <i>\$ 2500.00</i>	8 In-kind contribution description (if applicable) <i>LIVE MUSIC FOR FUNDRAISER</i>
6 Contributor address; City; State; Zip Code <i>2912 GOVALLA AVE AUSTIN, TX 78702</i>		(If travel outside of Texas, complete Schedule T)	

9 Principal occupation / Job title (See Instructions) 10 Employer (See Instructions)

Date <i>JAN 21, 2011</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>EL GALLO MEXICAN RESTAURANT</i>	Amount of contribution (\$) <i>\$ 628.76</i>	In-kind contribution description (if applicable) <i>SITE LOCATION + FOOD FOR FUNDRAISER</i>
Contributor address; City; State; Zip Code <i>2910 So Congress AUSTIN, TX 78704</i>		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	

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

# SCHEDULE F

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 1 of 4	2 FILER NAME MARIA L. CANDOLIA	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 1/6/2011	5 Payee name WORLEY PRINTING
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6 Amount (\$) 680.89	7 Payee address; City; State; Zip Code 3217 NORTH IH 35 AUSTIN, TX 78722
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) PRINTING EXPENSE	(b) Description (If travel outside of Texas, complete Schedule T) POSTCARDS; TYPESETTING & LAYOUT PRINTING INK SET
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 1/6/2011	Payee name WORLEY PRINTING
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Amount (\$) 190.07	Payee address; City; State; Zip Code 3217 NORTH IH 35 AUSTIN, TX 78722
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) POSTAGE	Description (If travel outside of Texas, complete Schedule T) BULK RATE
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 1/20/2011	Payee name EL GALLO RESTAURANT
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Amount (\$) 430.00	Payee address; City; State; Zip Code 2910 SO. CONGRESS AVE AUSTIN, TX 78704
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) EVENT EXPENSE	Description (If travel outside of Texas, complete Schedule T) FOOD/BEVERAGE EXPENSE
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 1-28-11	Payee name Office DEPOT
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Amount (\$) 64.90	Payee address; City; State; Zip Code 2101 S. LAMAR AUSTIN, TX 78704
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Supplies	Description (If travel outside of Texas, complete Schedule T) PAPER / INK PRINTERS / CARTRIDGES
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Complete ONLY 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



**POLITICAL EXPENDITURES**

**SCHEDULE F**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

The Instruction Guide explains how to complete this form.

1 Total pages, Schedule F: <i>2 of 4</i>		2 FILER NAME <i>MARIA L. CANCHOLA</i>		3 ACCOUNT # (Ethics Commission Filer)	
4 Date <i>2/3/2011</i>		5 Payee name <i>SOUTH EAST Post Office</i>			
6 Amount (\$) <i>44.00</i>		7 Payee address; City; State; Zip Code <i>AUSTIN, TEXAS 78744</i>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule)		(b) Description (If travel outside of Texas, complete Schedule T)	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <i>2/17/11</i>		Payee name <i>TRAVIS COUNTY DEMOCRATIC PARTY</i>			
Amount (\$) <i>\$ 120.00</i>		Payee address; City; State; Zip Code <i>1311 EAST 6TH STREET AUSTIN, TX 78702</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>CONTRIBUTION</i>		Description (If travel outside of Texas, complete Schedule T) <i>SUSTAINING MEMBERSHIP</i>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <i>2/22/11</i>		Payee name <i>GREATER AUSTIN HISPANIC CHAMBERS OF COMMERCE</i>			
Amount (\$) <i>\$ 110.00</i>		Payee address; City; State; Zip Code <i>2800 SOUTH 35, STE 260 AUSTIN, TX 78704</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>CONTRIBUTION</i>		Description (If travel outside of Texas, complete Schedule T) <i>ANNUAL AWARDS BANQUET</i>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <i>2/25/11</i>		Payee name <i>OPINION ANALYSTS, INC.</i>			
Amount (\$) <i>\$ 86.58</i>		Payee address; City; State; Zip Code <i>906 RIO GRANDE ST. AUSTIN, TX 78701</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>POLLING EXPENSE</i>		Description (If travel outside of Texas, complete Schedule T) <i>WALK LISTS</i>	
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**

**SCHEDULE F**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

The instruction Guide explains how to complete this form.

1 Total pages Schedule F: 3 of 4	2 FILER NAME MARIA CANCHOLA	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 3/30/11	5 Payee name P.O.O.E.R
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6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code 2604 E CESAR CHAVEZ AUSTIN, TX 78702
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) ADVERTISING	(b) Description (If travel outside of Texas, complete Schedule T) PROGRAM BOOKLET
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4-14-11	Payee name OFFICE DEPOT
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Amount (\$) \$23.05	Payee address; City; State; Zip Code 2101 SOUTH LAMAR AUSTIN, TX 78704
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) OFFICE SUPPLIES	Description (If travel outside of Texas, complete Schedule T) PRINTER INK CARTRIDGES
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4-14-11	Payee name A-TECH NETWORKS
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Amount (\$) \$54.07	Payee address; City; State; Zip Code 6102 BLARWOOD DR. AUSTIN, TX 78745
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) OFFICE	Description (If travel outside of Texas, complete Schedule T) COMPUTER TUNE UP
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 5-10-11	Payee name A-TECH NETWORKS
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Amount (\$) \$59.51	Payee address; City; State; Zip Code 6102 BLARWOOD DR. AUSTIN, TX 78745
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) OFFICE	Description (If travel outside of Texas, complete Schedule T) COMPUTER MEMORY
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Complete ONLY 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

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 4 of 4		2 FILER NAME MARIA CANCHOLA		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 5/17/11		5 Payee name TOPS office Supply			
6 Amount (\$) \$ 33.56		7 Payee address; City; State; Zip Code 1300 E. 5TH ST. AUSTIN, TX 78702			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) office		(b) Description (if travel outside of Texas, complete Schedule T) office Supplies	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 5/23/11		Payee name U.S. Post Office			
Amount (\$) \$ 44.00		Payee address; City; State; Zip Code SOUTHEAST STATION AUSTIN, TX 78744			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) office		Description (if travel outside of Texas, complete Schedule T) POSTAGE	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 6/1/11		Payee name Hyper Web			
Amount (\$) \$ 87.50		Payee address; City; State; Zip Code 2005 BARTON PARKWAY AUSTIN, TX 78704			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) ADVERTISING EXPENSE		Description (if travel outside of Texas, complete Schedule T) WEB SITE	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 6/19/11		Payee name OFFICE DEPOT			
Amount (\$) \$ 86.56		Payee address; City; State; Zip Code 2101 SO LAMAR AUSTIN, TX 78704			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) OFFICE		Description (if travel outside of Texas, complete Schedule T) PRINTER INK CARTRIDGES	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED