

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

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

14 C/OH NAME MARIA CANCHOLA 15 ACCOUNT # (Ethics Commission Filers)

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 <input type="checkbox"/> additional pages	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	\$ 1,972.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 7,442.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 5,595.83
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 6,327.33
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 29,764.68

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.

STEPHANIE MARTINEZ
Notary Public, State of Texas
My Commission Expires
July 26, 2014

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 21st day of May, 20 12, to certify which, witness my hand and seal of office.

Stephanie Martinez
Signature of officer administering oath

Stephanie Martinez
Printed name of officer administering oath

Notary public
Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 1 of 13	
2 FILER NAME MARIA CANCHOLA		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 5/9/12	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Nicholas Chu	7 Amount of contribution (\$) 50⁰⁰	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 2114 Pecos, Grapevine Tx 76051		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 5/9/12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Rubin + Lilly Lopez	Amount of contribution (\$) 50⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 303 Cross meadow Ct Buda Tx 78710		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/9/12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Fidel Estrada	Amount of contribution (\$) 50⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 5000 Kleberg Trl. Austin, Tx 78747		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/15/12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Mykle Tomlinson	Amount of contribution (\$) 50⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 5102 Delores Ave Austin Tx 78721		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/15/12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Anita Estrada	Amount of contribution (\$) 50⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 9207 Rodriguez Rd. Austin Tx 78745		(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: 2 of 13	
2 FILER NAME MARIA CANCULA		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 5/9/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Farrah Rivera Ortiz 6 Contributor address; City; State; Zip Code 21 Waller St. # 513 Austin Tx 78702	7 Amount of contribution (\$) 50 ⁰⁰	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 5/9/12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: M. Elaine Burkhardt Contributor address; City; State; Zip Code PO Box 91504 Austin Tx 78709	Amount of contribution (\$) 50 ⁰⁰	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/9/12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Walter Timberlake Contributor address; City; State; Zip Code PO Box 292 Austin Tx 78767	Amount of contribution (\$) 50 ⁰⁰	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/9/12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Jane Downer Contributor address; City; State; Zip Code 517 E Mary St Austin Tx 78704	Amount of contribution (\$) 50 ⁰⁰	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/9/12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Benjamin Moreno Contributor address; City; State; Zip Code 3521 Grimes Ranch Rd Austin Tx 78732	Amount of contribution (\$) 50 ⁰⁰	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 3 of 13	
2 FILER NAME Marie Canchola		3 ACCOUNT # (Ethics Commission Filers) .	
4 Date 5/9/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlos Lopez Campaign 6 Contributor address; City; State; Zip Code 4300 S. Westwood Dr Austin Tx 78745 4330 Bull Creek Rd Austin Tx 78748	7 Amount of contribution (\$) 50⁰⁰	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 5/9/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Celia Israel Contributor address; City; State; Zip Code 3604 Carla Ori. Austin Tx 78754	Amount of contribution (\$) 50⁰⁰	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/9/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rachel Gunner Contributor address; City; State; Zip Code 1333 Bonham Terr. Austin Tx 78704	Amount of contribution (\$) 50⁰⁰	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/9/12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sophia & Kenneth Nates Contributor address; City; State; Zip Code 7605 Panama Fl. Austin, Tx, 78749	Amount of contribution (\$) 50⁰⁰	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/9/12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) F. & R. Estrada Contributor address; City; State; Zip Code 1107 E. 2nd Austin, Tx 78702	Amount of contribution (\$) 50⁰⁰	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A:
49 13

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

4 Date 5/9/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Marjorie + James Fowler	7 Amount of contribution (\$) 100 ⁰⁰	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 6407 Emerald St. Austin Tx 78745		(If travel outside of Texas, complete Schedule T)	

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

Date 5/9/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rose Ann Maciel	Amount of contribution (\$) 100 ⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 9703 Cattle Dr. Austin Tx 78753		(If travel outside of Texas, complete Schedule T)	

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

Date 4/20/12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Angel + Frances Ramirez	Amount of contribution (\$) 50 ⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 221 Indian Paintbrush Trl. Kyle Tx 78764		(If travel outside of Texas, complete Schedule T)	

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

Date 4/27/12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Elna Christopher	Amount of contribution (\$) 50 ⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 665 Kentshire Circle Austin Tx 78704		(If travel outside of Texas, complete Schedule T)	

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

Date 5/9/12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Chris + Barbara Frondsen	Amount of contribution (\$) 50 ⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4601 Pinehurst Dr. S. Austin, Tx 78747		(If travel outside of Texas, complete Schedule T)	

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

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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 13	
2 FILER NAME Marie Canchola		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 5/9/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Hermelinda Zamarripa 6 Contributor address; City; State; Zip Code 4811 Caswell Ave Austin Tx 78751	7 Amount of contribution (\$) 100 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 5/9/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Franklin + Gigi Gomez Contributor address; City; State; Zip Code 6904 Whispering oaks Austin, TX 78745	Amount of contribution (\$) 100 ⁰⁰ (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/9/12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Robn Barrera, PC, Contributor address; City; State; Zip Code 606 W. Oltorf St. Austin Tx 78704	Amount of contribution (\$) 100 ⁰⁰ (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/9/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Eva + Eric Penton Contributor address; City; State; Zip Code 7537 S. Glenn St. Austin, TX 78744	Amount of contribution (\$) 100 ⁰⁰ (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/9/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Juan Cokra Contributor address; City; State; Zip Code 1502 Norris Dr. Austin, Tx 78704	Amount of contribution (\$) 100 ⁰⁰ (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:
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2 FILER NAME

Maria Canchola

3 ACCOUNT # (Ethics Commission Filers)

4 Date

5/9/12

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

CWA - Cape PCC

6 Contributor address; City; State; Zip Code

501 3rd St., NW
Washington DC 20001

7 Amount of contribution (\$)

500⁰⁰

(If travel outside of Texas, complete Schedule T)

8 In-kind contribution description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

5/9/12

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

John Danisi

Contributor address; City; State; Zip Code

2220 Park wa St. Austin Tx
78702

Amount of contribution (\$)

300.00

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/9/12

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

Bianca Zamora Garcia

Contributor address; City; State; Zip Code

1715 1st St. Austin Tx 78704

Amount of contribution (\$)

200⁰⁰

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/11/12

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

Thomas Esparza Jr.

Contributor address; City; State; Zip Code

1811 S. 1st St. Austin, Tx 78704

Amount of contribution (\$)

200⁰⁰

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/6/12

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

Judith Fowler

Contributor address; City; State; Zip Code

700 Boulden Ave Austin Tx 78709

Amount of contribution (\$)

100⁰⁰

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A:
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2 FILER NAME: **MARIA CANCLOLA** 3 ACCOUNT # (Ethics Commission Filers)

4 Date 5/7/12	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Paul Sullivan	7 Amount of contribution (\$) 100⁰⁰	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 1910 15th St. Apt 603 Washington DC 20005		(If travel outside of Texas, complete Schedule T)	

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

Date 5/8/12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Tanya Tarr	Amount of contribution (\$) 50⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 5102 Delores Ave Austin Tx 78721		(If travel outside of Texas, complete Schedule T)	

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

Date 5/8/12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Coleen Beck	Amount of contribution (\$) 100⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2806 Enfield Dr. Austin Tx 78703		(If travel outside of Texas, complete Schedule T)	

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

Date 5/9/12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Hugh + Claudette Love	Amount of contribution (\$) 100⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 400 Academy Dr. Austin Tx 78704		(If travel outside of Texas, complete Schedule T)	

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

Date 5/9/12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Stanley Johnson Jr	Amount of contribution (\$) 100⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4821 River Place Blvd Austin Tx 78730		(If travel outside of Texas, complete Schedule T)	

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

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A:
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2 FILER NAME: **Maria Canchola** 3 ACCOUNT # (Ethics Commission Filers)

4 Date 5/19/12	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leticia Vallejo	7 Amount of contribution (\$) 80⁰⁰	8 In-kind contribution description (if applicable) food for fundraiser
6 Contributor address; City; State; Zip Code 10555 Maha Circle Austin TX 78747		(If travel outside of Texas, complete Schedule T)	

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

Date 5/19/12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gloria Aleman	Amount of contribution (\$) 50⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2544 Stoutwood Circle Austin TX 78745		(If travel outside of Texas, complete Schedule T)	

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

Date 5/4/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Danette Chimenti	Amount of contribution (\$) 100⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 200 The Circle Austin TX 78701		(If travel outside of Texas, complete Schedule T)	

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

Date 5/7/12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ernesto Camacho	Amount of contribution (\$) 250	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2506 e. 7th St. Austin TX 78702		(If travel outside of Texas, complete Schedule T)	

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

Date 5/5/12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rod Rice	Amount of contribution (\$) 50⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1715 Maciposa BR. Austin TX 78704		(If travel outside of Texas, complete Schedule T)	

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

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

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2 FILER NAME

MARIA CANCHOLA

3 ACCOUNT # (Ethics Commission Filers)

4 Date

5/19/12

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

Joe & Adelia Moreno

6 Contributor address; City; State; Zip Code

1717 Shag Bark Tr
Austin TX 78758

7 Amount of contribution (\$)

50.00

8 In-kind contribution description (if applicable)

Food / labor

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

5/19/12

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

Ben & Evie Moreno

Contributor address; City; State; Zip Code

3521 Grimes Ranch Rd
Austin TX 78732

Amount of contribution (\$)

50⁰⁰

In-kind contribution description (if applicable)

Food / labor

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/19/12

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

Jimmy & Lupe Moreno

Contributor address; City; State; Zip Code

10807 Thaxton Rd
Austin TX 78747

Amount of contribution (\$)

50⁰⁰

In-kind contribution description (if applicable)

Food / labor

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/19/12

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

Amy Bloomquist

Contributor address; City; State; Zip Code

3835 Cologne Ln
Austin TX 78727

Amount of contribution (\$)

50⁰⁰

In-kind contribution description (if applicable)

Food / labor

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/19/12

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

DBA Borego de Oro

Contributor address; City; State; Zip Code

3900 S Congress
Austin TX 78704

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

Food

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A:
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2 FILER NAME: **MARIA CANCHOLA** 3 ACCOUNT # (Ethics Commission Filers)

4 Date 5/19/12	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Roben & Eva Flores	7 Amount of contribution (\$) 80.00	8 In-kind contribution description (if applicable) food / labor
6 Contributor address; City; State; Zip Code 1705 Buttencup Rd Austi TX 78660		(If travel outside of Texas, complete Schedule T)	

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

Date 5/19/12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Gubin & Lilly Lopez	Amount of contribution (\$) 80.00	In-kind contribution description (if applicable) Food / labor
Contributor address; City; State; Zip Code 3003 Cross Meadows Austi TX 78610		(If travel outside of Texas, complete Schedule T)	

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

Date 5/19/12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Robert Machado	Amount of contribution (\$) 80.00	In-kind contribution description (if applicable) Food / labor
Contributor address; City; State; Zip Code 1705 Frontier Valley Dr #8201 Austi TX 78741		(If travel outside of Texas, complete Schedule T)	

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

Date 5/19/12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: David & Lilly Alonzo	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable) Food / labor
Contributor address; City; State; Zip Code 6001 Wagon Bend Austin TX 78744		(If travel outside of Texas, complete Schedule T)	

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

Date 5/19/12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Manuel & Anita Moreno	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable) Food / labor
Contributor address; City; State; Zip Code 6206 Woodhue Austi TX 78745		(If travel outside of Texas, complete Schedule T)	

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

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <i>11 of 13</i>	
2 FILER NAME <i>MARIA CANCHOLA</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>5/9/12</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Gregory Cantu</i>	7 Amount of contribution (\$) <i>5000</i>	8 In-kind contribution description (if applicable) <i>Food for fundraiser</i>
6 Contributor address; City; State; Zip Code <i>2718 Garlic Creek Austin TX 78610</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>5/9/12</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Andus & Esther Bernal</i>	Amount of contribution (\$) <i>150.00</i>	In-kind contribution description (if applicable) <i>Food for fundraiser</i>
Contributor address; City; State; Zip Code <i>10013 Isle Royale Way Austin TX 78747</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>5/9/12</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>DBA Little Matico Restaurant</i>	Amount of contribution (\$) <i>50.00</i>	In-kind contribution description (if applicable) <i>Food for fundraiser</i>
Contributor address; City; State; Zip Code <i>2304 South 1st Austin TX 78704</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>5/9/12</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>DBA Joe's Bakery</i>	Amount of contribution (\$) <i>50.00</i>	In-kind contribution description (if applicable) <i>cookies for event</i>
Contributor address; City; State; Zip Code <i>2305 E 7th Austin TX 78702</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>5/19/12</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Gilbert Estada</i>	Amount of contribution (\$) <i>200.00</i>	In-kind contribution description (if applicable) <i>MUSIC</i>
Contributor address; City; State; Zip Code <i>4528 Creek Bend Dr Austin TX 78744</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: 12 of 13	
2 FILER NAME MARIA CANCHOLA		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 5/19/12	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) DBA Moreno's	7 Amount of contribution (\$) 100⁰⁰	8 In-kind contribution description (if applicable) Food
6 Contributor address; City; State; Zip Code 4606 Burleson Austi TX 78744		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 5/19/12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) DBA Little Mexico	Amount of contribution (\$) 100⁰⁰	In-kind contribution description (if applicable) Food
Contributor address; City; State; Zip Code 2304 S 1st Austin TX 78704		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/19/12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Franklin & Gisi Mendez	Amount of contribution (\$) 50⁰⁰	In-kind contribution description (if applicable) labor for fundraiser
Contributor address; City; State; Zip Code 6904 Whispering Oaks Austin 78745		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/19/12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dale Muller	Amount of contribution (\$) 50⁰⁰	In-kind contribution description (if applicable) labor for fundraiser
Contributor address; City; State; Zip Code 200 Mandy Ln Round Rock TX 78662		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/19/12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bertha David de la Cruz	Amount of contribution (\$) 100⁰⁰	In-kind contribution description (if applicable) labor for fundraiser
Contributor address; City; State; Zip Code 108 Bobbin Cv. Buda, TX		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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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:
13 of 13

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

4 Date <u>5/9/12</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Kevin Lewis</u>	7 Amount of contribution (\$) <u>50⁰⁰</u>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <u>1002 Bouldin Ave Austin Tx 78704</u>		(If travel outside of Texas, complete Schedule T)	

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

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.

LOANS

SCHEDULE E

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

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

4 TOTAL OF UNITEMIZED LOANS: $\Rightarrow \Rightarrow \Rightarrow \Rightarrow \Rightarrow \Rightarrow$ \$

5 Date of loan: 5/11/2012 7 Name of lender: Maria Canchola out-of-state PAC (ID#: _____) 9 Loan Amount (\$): 5000⁰⁰

6 Is lender a financial institution? Y (N) 8 Lender address; City; State; Zip Code: 1900 E. Side Pr Austin Tx 78704 10 Interest rate: 0%

11 Maturity date: NA

12 Principal occupation / Job title (See Instructions): Constable 13 Employer (See Instructions): Travis County

14 Description of Collateral: none 15 Check if personal funds were deposited into political account:

16 GUARANTOR INFORMATION: not applicable 17 Name of guarantor: _____ 18 Guarantor address; City; State; Zip Code: _____ 19 Amount Guaranteed (\$): _____

20 Principal Occupation (See Instructions): _____ 21 Employer (See Instructions): _____

Date of loan: 5/08/2012 Name of lender: Maria Canchola out-of-state PAC (ID#: _____) Loan Amount (\$): 1000⁰⁰

Is lender a financial institution? Y (N) Lender address; City; State; Zip Code: 1900 E. SIDE Pr Austin Tx 78704 Interest rate: 0%

Maturity date: NA

Principal occupation / Job title (See Instructions): Constable Employer (See Instructions): Travis County

Description of Collateral: none Check if personal funds were deposited into political account:

GUARANTOR INFORMATION: not applicable Name of guarantor: _____ Guarantor address; City; State; Zip Code: _____ Amount Guaranteed (\$): _____

Principal Occupation (See Instructions): _____ Employer (See Instructions): _____

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
if lender 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 3	2 FILER NAME MARIA CANCHOLA	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 5-9-12	5 Payee name HEB
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6 Amount (\$) 41.77	7 Payee address; City; State; Zip Code 2400 S Congress Austin TX 78704
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Event Expense	(b) Description (If travel outside of Texas, complete Schedule T) drinks
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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 5-8-12	Payee name HEB
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Amount (\$) 55.24	Payee address; City; State; Zip Code 2400 S Congress 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
------------------------	---	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 5-7-12	Payee name Sam's Club
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Amount (\$) 140.96	Payee address; City; State; Zip Code 9900 S IH 35 Austin TX 78748
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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 & drinks
------------------------	---	--

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4-29-12	Payee name Jonathon Martinez
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Amount (\$) 55.00	Payee address; City; State; Zip Code 1710 E O'Harf Apt 710 Austin TX 78741
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract labor	Description (If travel outside of Texas, complete Schedule T) data entry
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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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 3</i>	2 FILER NAME <i>MARIA CAUCHOLA</i>	3 ACCOUNT # (Ethics Commission Filers)
4 Date <i>5/16/12</i>	5 Payee name <i>Office Depot</i>	
6 Amount (\$) <i>43.28</i>	7 Payee address; City; State; Zip Code <i>2101 S. Lamar Austin TX 78704</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Office overhead</i>	(b) Description (If travel outside of Texas, complete Schedule T) <i>Printer ink</i>
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <i>5/19/12</i>	Payee name <i>Bread Basket</i>	
Amount (\$) <i>13.90</i>	Payee address; City; State; Zip Code <i>8101 Salt Springs Rd. Austin TX 78744</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Travel In District</i>	Description (If travel outside of Texas, complete Schedule T) <i>Gas</i>
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <i>5/18/12</i>	Payee name <i>HEB</i>	
Amount (\$) <i>44.33</i>	Payee address; City; State; Zip Code <i>6607 S IH35 Austin TX 78744</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Event Expense</i>	Description (If travel outside of Texas, complete Schedule T) <i>food purchase</i>
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <i>5/19/12</i>	Payee name <i>Fiesta Tostilla</i>	
Amount (\$) <i>5.80</i>	Payee address; City; State; Zip Code <i>Po Box 17563 Austin TX 78760</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Event Expense</i>	Description (If travel outside of Texas, complete Schedule T) <i>food purchase</i>
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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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 3	2 FILER NAME MARIA CANCHOLA	3 ACCOUNT # (Ethics Commission Filers)
4 Date 5-8-12	5 Payee name Mack Crouse Group	
6 Amount (\$) 4707.50	7 Payee address; City; State; Zip Code 2001 N. Beauregard St Suite 420 Alexandria, VA 22311	
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) Campaign Direct Mail
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 5-8-12	Payee name Chad Adams	
Amount (\$) 450.00	Payee address; City; State; Zip Code 550 Goldenrod St Kyle, TX 78640	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contact labor	Description (If travel outside of Texas, complete Schedule T) Photographs
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 5-19-12	Payee name Pirya	
Amount (\$) 38.05	Payee address; City; State; Zip Code 144 2nd St, 1st Floor San Francisco CA 94105	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) online fundraising
Complete ONLY 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 (If travel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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