

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

8599

**FORM C/OH
COVER SHEET PG 1**

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID	2 Total pages filed: 16				
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	OFFICE USE ONLY Date Received Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged			
		Maria					
	NICKNAME	LAST	SUFFIX				
		Canchola					
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY;		ZIP CODE				
	1900 East Side Drive Austin, TX 78704						
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI				
		MARIA LUISA					
	NICKNAME	LAST	SUFFIX				
	Lulu	FLORES					
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #;	CITY;	STATE; ZIP CODE			
	1301 W. 25TH STREET #400		AUSTIN, TX	78705			
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
	512	439-3200					
8 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)						
9 PERIOD COVERED	Month	Day	Year	Month	Day	Year	
	01	01	2015	THROUGH	06	30	2015
10 ELECTION	ELECTION DATE			ELECTION TYPE			
	Month	Day	Year	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other	
				<input type="checkbox"/> General	<input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT (if known)			
	Travis County Constable, Pct 4						

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

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

2 of 16

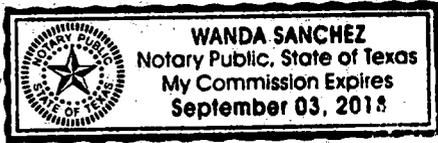
13 C / OH NAME Canchola, Maria	14 Filer ID
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15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.									
<table style="width:100%"> <tr> <td style="width:20%">COMMITTEE TYPE</td> <td>COMMITTEE NAME</td> </tr> <tr> <td><input type="checkbox"/> GENERAL</td> <td>COMMITTEE ADDRESS</td> </tr> <tr> <td><input type="checkbox"/> SPECIFIC</td> <td>COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td></td> <td>COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table>	COMMITTEE TYPE	COMMITTEE NAME	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME		COMMITTEE CAMPAIGN TREASURER ADDRESS		
	COMMITTEE TYPE	COMMITTEE NAME								
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS								
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME								
	COMMITTEE CAMPAIGN TREASURER ADDRESS									

16 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	2,710.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	1,368.66
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	3,089.02
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	29,764.68

17 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.



 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Maria L. Canchola, this the 13th day of July, 20 15, to certify which, witness my hand and seal of office.

 _____ Signature of officer administering	<u>Wanda Sanchez</u> _____ Printed name of officer administering	<u>Notary</u> _____ Title of officer administering oath
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SUBTOTALS - C/OH

18 FILER NAME Canchola, Maria	19 Filer ID
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20 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 2,710.00
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 FROM POLITICAL CONTRIBUTIONS	\$ 1,368.66
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8. <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
9. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
10. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
11. <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: Sch: 1/9 Rpt: 4/16
2 FILER NAME Canchola, Maria		3 Filer ID
4 Date 01/29/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrera, Irma and Hon. Carlos H. ----- 6 Contributor address; City; State; Zip Code 4007 Eton Lane Austin, TX 78727-6025	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bernal, Andres ----- Contributor address; City; State; Zip Code 2009 E. Price Laredo, TX 78043-2057	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruch, Joseph L. ----- Contributor address; City; State; Zip Code 204 La Vista St Austin, TX 78704-6341	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/12/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryant, James ----- Contributor address; City; State; Zip Code 506 C.R. 344 Marble Falls, TX 78654	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Sarah ----- Contributor address; City; State; Zip Code 1201 Woodland Ave Austin, TX 78704-3616	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/9 Rpt: 5/16
2 FILER NAME Canchola, Maria		3 Filer ID
4 Date 01/29/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caraway, Tharon	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code 3302 County Road 5830 Luccock, TX 79415		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/11/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christopher, Elna	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 605 Kentshire Circle Austin, TX 78704-5615		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cilley, Barbara	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code 1417 Travis Heights Blvd. Austin, TX 78704-2530		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Pamela Mayo	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 4100 Bluffridge Dr Austin, TX 78759		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/02/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Congressman Lloyd Doggett Cmpaign Account	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code PO Box 5843 Austin, TX 78763		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/9 Rpt: 6/16
2 FILER NAME Canchola, Maria		3 Filer ID
4 Date 01/29/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diaz, Raymond	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code 612 West Annie St. Austin, TX 78704-4102		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elfant, Lisa Harris and Bruce	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 4522 Avenue F Austin, TX 78751-3109		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Florence, Rodney	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code 303 Lightsey Rd. Austin, TX 78704		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/13/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fowler, Judy	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 700 Bouldin Ave Austin, TX 78704-1610		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/25/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Ernest	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code 401 Blueberry Hill Austin, TX 78745		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/9 Rpt: 7/16
2 FILER NAME Canchola, Maria		3 Filer ID
4 Date 01/29/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haverlah, Kirşha	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code 6904 Star Dr Austin, TX 78745-6466		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hendler, Lulu Flores and Scott	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 1300 Alta Vista Ave. Austin, TX 78704-2515		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holmes, David	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code 7900 Croftwood Austin, TX 78749		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jaramillo, Chriis	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code 1203 Vargas Road Austin, TX 78741		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/17/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Shirley A	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code 2000 Woodward St. #421 Austin, TX 78741-7879		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/9 Rpt: 8/16
2 FILER NAME Canchola, Maria		3 Filer ID
4 Date 01/29/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Stan and Delia <hr/> 6 Contributor address; City; State; Zip Code 4821 River Place Blvd Austin, TX 78730-3511	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Susan <hr/> Contributor address; City; State; Zip Code 2119 Brunswick Dr Austin, TX 78723-2052	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Tony and Maria <hr/> Contributor address; City; State; Zip Code 1303 Garden St Austin, TX 78702-5300	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCormick, Donna Beth <hr/> Contributor address; City; State; Zip Code 5703 Shoalwood Ave. Austin, TX 78756-1121	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/20/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nethaway, Sharon <hr/> Contributor address; City; State; Zip Code PO Box 369 Kyle, TX 78640	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/9 Rpt: 9/16
2 FILER NAME Canchola, Maria		3 Filer ID
4 Date 01/16/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nuwash, Neal and Cheryl 6 Contributor address; City; State; Zip Code 2715 Little John Ln Austin, TX 78704-5662	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Padilla, Gubin Lopez & Cecilia Contributor address; City; State; Zip Code 303 Cross Meadows Ct Buda, TX 78610-9428	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pope, Olie Contributor address; City; State; Zip Code 100 N. IH35, Ste 2400 Austin, TX 78701	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Esther and Domingo Contributor address; City; State; Zip Code 14300 Plover Place #B Del Valle, TX 78617-5201	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rowlan, Anna Contributor address; City; State; Zip Code 1010 S. Quinlan Park Rd #7 Austin, TX 78732	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/9 Rpt: 10/16
2 FILER NAME Canchola, Maria		3 Filer ID
4 Date 01/29/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sabino Renteria Campaign Account 6 Contributor address; City; State; Zip Code 1511 Haskell St Austin, TX 78702-5311	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sisson, John Contributor address; City; State; Zip Code 13100 Armaga Springs Rd Austin, TX 78727-3426	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Solis, Maria Contributor address; City; State; Zip Code PO Box 41504 Austin, TX 78704	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/06/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sullivan, Paul Contributor address; City; State; Zip Code 1809 S Street, #101 Sacramento, CA 95811	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Wordy Contributor address; City; State; Zip Code 1708 Canterbury St. Austin, TX 78702	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 8/9 Rpt: 11/16

2 FILER NAME
Canchola, Maria

3 Filer ID

4 Date
01/29/2015

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

7 Amount of Contribution (\$)
\$25.00

6 Contributor address; City; State; Zip Code
900 Shoal Creek Blvd

Austin, TX 78756

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
01/29/2015

Full name of contributor out-of-state PAC (ID#: _____)
Uballe-Thompson, Mary Jane

Amount of Contribution (\$)
\$25.00

Contributor address; City; State; Zip Code
1708 Canterbury St.

Austin, TX 78702

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
01/29/2015

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

Amount of Contribution (\$)
\$25.00

Contributor address; City; State; Zip Code
2311 Willow St

Austin, TX 78702-5625

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
01/29/2015

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

Amount of Contribution (\$)
\$250.00

Contributor address; City; State; Zip Code
2315 E. 8th

Austin, TX 78702

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
01/29/2015

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

Amount of Contribution (\$)
\$100.00

Contributor address; City; State; Zip Code
1904 Kenwood

Austin, TX 78704-3634

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/9 Rpt: 12/16
2 FILER NAME Canchola, Maria		3 Filer ID
4 Date 01/29/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wills, Sharon	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code 3801 Manchaca Road, #14 Austin, TX 78704		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Patty and Peck	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 3119 Silkgrass Bend Austin, TX 78748-5038		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zamarripa, Lupe	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 1403 Lorrain St. Austin, TX 78703-4022		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

POLITICAL EXPENDITURES 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

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: Sch: 1/4 Rpt: 13/16		2 FILER NAME Canchola, Maria		3 Filer ID	
4 Date 01/31/2015		5 Payee name <i>Refugio Moreno</i>			
6 Amount (\$) \$100.00		7 Payee address; City; State; Zip Code <i>4600 BULLERSON Rd. Austin, TX 78744</i>			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense event help and food prep	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 05/26/2015		Payee name Brad Urrutia Campaign			
Amount (\$) \$50.00		Payee address; City; State; Zip Code P.O. Box 252 Manchaca, TX 78652			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense donation	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 04/24/2015		Payee name CheckMark Typesetting			
Amount (\$) \$126.69		Payee address; City; State; Zip Code 3217 N IH 35 Austin, TX 78722			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense invitation printing	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

POLITICAL EXPENDITURES 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

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: Sch: 2/4 Rpt: 14/16	2 FILER NAME Canchoia, Maria	3 Filer ID
4 Date 04/30/2015	5 Payee name El Gallo Restaurant	
6 Amount (\$) \$378.14	7 Payee address; City; State; Zip Code 2910 S Congress Ave Austin, TX 78704	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense announcement event
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/28/2015	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$13.60	Payee name HEB Payee address; City; State; Zip Code 2400 S. Congress Austin, TX 78704	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food for event
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/28/2015	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$158.06	Payee name HEB Payee address; City; State; Zip Code 2400 S. Congress Austin, TX 78704	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food and beverages for event
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES 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

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: Sch: 3/4 Rpt: 15/16		2 FILER NAME Canchola, Maria		3 Filer ID	
4 Date 01/29/2015.		5 Payee name Mariachi Corbetas			
6 Amount (\$) \$200.00		7 Payee address; City; State; Zip Code 1310 Vargas Road Austin, TX 78741-3566			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense mariachi band fee	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 01/12/2015		Payee name US Postal Service			
Amount (\$) \$78.20		Payee address; City; State; Zip Code Capitol Station Austin, TX 78701-9997			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense postage for invitation	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 02/06/2015		Payee name US Postal Service			
Amount (\$) \$49.00		Payee address; City; State; Zip Code Southeast Station Austin, TX 78744-9998			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense postage	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES 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

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: Sch: 4/4 Rpt: 16/16	2 FILER NAME Canchola, Maria	3 Filer ID
4 Date 01/29/2015	5 Payee name Walmart	
6 Amount (\$) \$14.97	7 Payee address; City; State; Zip Code 710 E Ben White Blvd Austin, TX 78704	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense bottled water for event
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 02/04/2015	Payee name Welch Fitch, Laura	
Amount (\$) \$200.00	Payee address; City; State; Zip Code 2950 Old Spanish Trail #353 Houston, TX 77054	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fundraising and event consulting
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	