

**JUDICIAL CANDIDATE / OFFICEHOLDER  
CAMPAIGN FINANCE REPORT**

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

The JC/OH Instruction Guide explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Maria N. NICKNAME LAST SUFFIX Morales-Martinez	<b>OFFICE USE ONLY</b>  Date Received 2012 JAN 17 PM 3:17 Hebra Ramos Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE 1112 S. McColl, Ste. 1 Edinburg, TX 78539 <input type="checkbox"/> Change of Address		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (956) 686-4229		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Veronica NICKNAME LAST SUFFIX Mendoza		
7 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: ZIP CODE 1601 Toronto St. McAllen, TX 78503		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (956) 827-4095		
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach COH - FR)		
10 PERIOD COVERED	Month Day Year    THROUGH    Month Day Year 09 / 01 / 2011                               01 / 15 / 2012		
11 ELECTION	ELECTION DATE    ELECTION TYPE Month Day Year <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special 04 / 03 / 2012		
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known) Judge of County Court At Law No. 7	
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			

**GO TO PAGE 2**

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

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

15 C/OH NAME: Maria Nereyda Morales-Martinez 16 ACCOUNT # (Ethics Commission Filers)

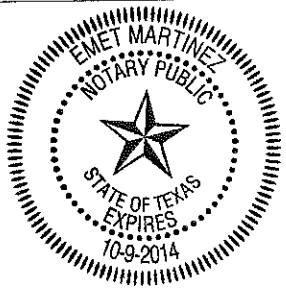
17 NOTICE FROM POLITICAL COMMITTEE(S) This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. --

<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

18 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ <u>0</u>
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <u>350.00</u>
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ <u>0</u>
	4. TOTAL POLITICAL EXPENDITURES	\$ <u>11,435.82</u>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>0</u>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>0</u>

19 AFFIDAVIT

AFFIX NOTARY STAMP / SEAL ABOVE



I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Nereyda Morales-Martinez  
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Nereyda Morales-Martinez, this the 17<sup>th</sup> day of January, 20 12, to certify which, witness my hand and seal of office.

[Signature] Emet Martinez Notary Public  
Signature of officer administering oath Print name of officer administering oath Title of officer administering oath

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

**SCHEDULE A (J)**

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A(J): **1**

2 FILER NAME: **Maria Nereyda Morales-Martinez** 3 ACCOUNT # (Ethics Commission filers)

4 Date <b>12/01/2011</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Artemio Rodriguez</b>	7 Amount of contribution (\$) <b>\$100<sup>00</sup></b>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <b>1322 E. Cano Edinburg, Tx 78539</b>		(If travel outside of Texas, complete Schedule T)	

9 Contributor's principal occupation <b>Construction Laborer</b>	10 Contributor's job title <b>Laborer</b>
---	--

11 Contributor's employer/law firm <b>Frontera Homes</b>	12 Law firm of contributor's spouse (if any)
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13 If contributor is a child, law firm of parent(s) (if any)

Date <b>12/07/2011</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>M. Teresa Coronado</b>	Amount of contribution (\$) <b>\$250<sup>00</sup></b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>324 W. University Edinburg, Tx 78539</b>		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation <b>Attorney</b>	Contributor's job title <b>owner</b>
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Contributor's employer/law firm <b>Law Office of M. Teresa Coronado</b>	Law firm of contributor's spouse (if any)
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If contributor is a child, law firm of parent(s) (if any)

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)	

Contributor's principal occupation	Contributor's job title
------------------------------------	-------------------------

Contributor's employer/law firm	Law firm of contributor's spouse (if any)
---------------------------------	---

If contributor is a child, law firm of parent(s) (if any)

**ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED**  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: **4**

2 FILER NAME

**Maria Nereyda Morales-Martinez**

3 ACCOUNT # (Ethics Commission filers)

4 Date

**11/16/11**

5 Payee name

**Frank's Grafix & Screen Printing Inc**

6 Payee address; City; State; Zip Code

**230 W. Park Pharr, Texas 78557**

7 Purpose of expenditure

**campaign advertising**  
(If travel outside of Texas, complete Schedule T)

8 Amount (\$)

**\$ 1360.<sup>00</sup>**

Reimbursement from political contributions intended

Date

**12/7/2011**

Payee name

**Beto's Screen Printing**

Payee address; City; State; Zip Code

**110 W. 4<sup>th</sup> St. San Juan, TX 78589**

Purpose of expenditure

**campaign advertising**  
(If travel outside of Texas, complete Schedule T)

Amount (\$)

**\$ 2,257.<sup>00</sup>**

Reimbursement from political contributions intended

Date

**1/14/2012**

Payee name

**Juanito's**

Payee address; City; State; Zip Code

**200 S. Illinois Mercedes, TX 78570**

Purpose of expenditure

**campaign advertising**  
(If travel outside of Texas, complete Schedule T)

Amount (\$)

**\$ 296.34**

Reimbursement from political contributions intended

Date

**12/15/2011**

Payee name

**Academy Sports & Outdoors**

Payee address; City; State; Zip Code

**3901 W. US Hwy 83 McAllen, TX 78501**

Purpose of expenditure

**campaign kickoff**  
(If travel outside of Texas, complete Schedule T)

Amount (\$)

**\$ 21.63**

Reimbursement from political contributions intended

Date

**12/30/2011**

Payee name

**The Home Depot**

Payee address; City; State; Zip Code

**801 Trenton Rd McAllen, Texas 78504**

Purpose of expenditure

**campaign signs/advertising**  
(If travel outside of Texas, complete Schedule T)

Amount (\$)

**\$ 125.28**

Reimbursement from political contributions intended

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# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

**SCHEDULE G**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: **4** 2

2 FILER NAME

*Maria Nereyda Morales-Martinez*

3 ACCOUNT # (Ethics Commission filers)

4 Date <i>12/07/2011</i>	5 Payee name <i>De Alba Bakery</i> 6 Payee address; City: State; Zip Code <i>2633 Pecan Blvd McAllen, Tx 78501</i>	8 Amount (\$)  <i>\$53.34</i>
7 Purpose of expenditure <i>Campaign promotion</i> (If travel outside of Texas, complete Schedule T)		<input checked="" type="checkbox"/> Reimbursement from political contributions intended

Date <i>12/07/2011</i>	Payee name <i>H.E.B.</i> Payee address; City: State; Zip Code <i>901 W. Expressway 83, San Juan, Tx 78589</i>	Amount (\$)  <i>\$ 43.29</i>
Purpose of expenditure <i>Campaign - meet the candidate function</i> (If travel outside of Texas, complete Schedule T)		<input checked="" type="checkbox"/> Reimbursement from political contributions intended

Date <i>12/07/2011</i>	Payee name <i>H.E.B.</i> Payee address; City: State; Zip Code <i>901 W. Expressway 83, San Juan, Tx 78589</i>	Amount (\$)  <i>\$ 32.46</i>
Purpose of expenditure <i>Campaign - meet the candidate function</i> (If travel outside of Texas, complete Schedule T)		<input checked="" type="checkbox"/> Reimbursement from political contributions intended

Date <i>11/28/2011</i>	Payee name <i>Plata Publicidad</i> Payee address; City: State; Zip Code <i>No. Heron Ramirez 1230, Reynosa, Tamps, Mexico</i>	Amount (\$)  <i>\$ 2279.60</i>
Purpose of expenditure <i>Campaign signs/advertising</i> (If travel outside of Texas, complete Schedule T)		<input checked="" type="checkbox"/> Reimbursement from political contributions intended

Date <i>1/14/2012</i>	Payee name <i>Beto's Screen Printing</i> Payee address; City: State; Zip Code <i>110 W. 4th St. San Juan, Tx 78589</i>	Amount (\$)  <i>\$ 1353.<sup>00</sup></i>
Purpose of expenditure <i>Campaign advertising</i> (If travel outside of Texas, complete Schedule T)		<input checked="" type="checkbox"/> Reimbursement from political contributions intended

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# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

**SCHEDULE G**

The Instruction Guide explains how to complete this form. 1 Total pages Schedule G: **4** 3

2 FILER NAME **Maria Nereyda Morales-martinez** 3 ACCOUNT # (Ethics Commission filers)

4 Date <b>11/22/2011</b>	5 Payee name <b>Epic Sports, Inc</b> 6 Payee address; City; State; Zip Code <b>400 S. Emporia Wichita, KS 67202</b>	8 Amount (\$) <b>\$ 172.39</b> <input checked="" type="checkbox"/> Reimbursement from political contributions intended
7 Purpose of expenditure <b>Campaign advertising / Shirts</b> <small>(If travel outside of Texas, complete Schedule T)</small>		

Date <b>12/30/2011</b>	Payee name <b>The Home Depot</b> Payee address; City; State; Zip Code <b>801 Trenton Rd McAllen, TX 78504</b>	Amount (\$) <b>\$ 441.31</b> <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Purpose of expenditure <b>Campaign signs</b> <small>(If travel outside of Texas, complete Schedule T)</small>		

Date <b>12/29/2011</b>	Payee name <b>Beto's Screen Printing</b> Payee address; City; State; Zip Code <b>110 W. 4th St. San Juan, TX 78589</b>	Amount (\$) <b>\$ 1299.00</b> <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Purpose of expenditure <b>Campaign signs/advertising</b> <small>(If travel outside of Texas, complete Schedule T)</small>		

Date <b>12/12/2011</b>	Payee name <b>Beto's Screen Printing</b> Payee address; City; State; Zip Code <b>110 W. 4th St. San Juan, TX 78589</b>	Amount (\$) <b>\$ 400.00</b> <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Purpose of expenditure <b>Campaign signs/advertising</b> <small>(If travel outside of Texas, complete Schedule T)</small>		

Date <b>1/12/2012</b>	Payee name <b>SC Productions</b> Payee address; City; State; Zip Code <b>3101 N. 31st St. McAllen, TX 78504</b>	Amount (\$) <b>\$ 412.50</b> <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Purpose of expenditure <b>Campaign signs, advertising</b> <small>(If travel outside of Texas, complete Schedule T)</small>		

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**POLITICAL EXPENDITURES  
MADE FROM PERSONAL FUNDS**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule G: <b>4</b>	<b>4</b>
2 FILER NAME <b>Maria Nereyda Morales-Martinez</b>		3 ACCOUNT # (Ethics Commission files)	
4 Date <b>12/5/2011</b>	5 Payee name <b>SC Productions</b>	8 Amount (\$) <b>\$ 81.18</b>	
	6 Payee address; City: State: Zip Code <b>3101 N. 31<sup>st</sup></b>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended	
	7 Purpose of expenditure <b>campaign advertising,</b> (If travel outside of Texas, complete Schedule T)		
Date <b>12/8/2011</b>	Payee name <b>SC Productions</b>	Amount (\$) <b>\$60.<sup>00</sup></b>	
	Payee address; City: State: Zip Code <b>3101 N. 31<sup>st</sup> McAllen, TX 78504</b>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended	
	Purpose of expenditure <b>campaign advertising</b> (If travel outside of Texas, complete Schedule T)		
Date <b>12/15/2011</b>	Payee name <b>SC Productions</b>	Amount (\$) <b>\$ 412.50</b>	
	Payee address; City: State: Zip Code <b>3101 N. 31<sup>st</sup> St. McAllen, TX 78504</b>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended	
	Purpose of expenditure <b>campaign signs, advertising</b> (If travel outside of Texas, complete Schedule T)		
Date <b>12/12/11</b>	Payee name <b>SC Productions</b>	Amount (\$) <b>\$210.<sup>00</sup></b>	
	Payee address; City: State: Zip Code <b>3101 N. 31<sup>st</sup> St. McAllen, TX 78504</b>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended	
	Purpose of expenditure <b>campaign signs</b> (If travel outside of Texas, complete Schedule T)		
Date <b>12/22/2011</b>	Payee name <b>George Garza</b>	Amount (\$) <b>\$ 125.<sup>00</sup></b>	
	Payee address; City: State: Zip Code <b>4909 N. McColl Rd McAllen, TX 78504</b>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended	
	Purpose of expenditure <b>campaign advertising</b> (If travel outside of Texas, complete Schedule T)		

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