



# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

14 C/OH NAME **Mary Louise L. Garcia**

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	BY: _____ 2015 JAN 14 PM 12:46 FILED TARRANT COUNTY FRANK PHILLIPS ELECTIONS ADMINISTRATOR
		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

\$

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

\$

EXPENDITURE  
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED

\$

4. TOTAL POLITICAL EXPENDITURES

\$ 2038.00

CONTRIBUTION  
BALANCE

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

\$ 43784.01

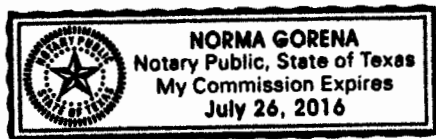
OUTSTANDING  
LOAN TOTALS

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

\$

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.



*Mary Louise Garcia*  
 \_\_\_\_\_  
 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Mary Louise Garcia, this the 13 day of January, 20 15, to certify which, witness my hand and seal of office.

*Norma Gorena*  
 \_\_\_\_\_  
 Signature of officer administering oath

Norma Gorena  
 \_\_\_\_\_  
 Printed name of officer administering oath

Notary Public,  
 \_\_\_\_\_  
 Title of officer administering oath  
State of Texas

# 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.

<b>1</b> Total pages Schedule F: 2	<b>2</b> FILER NAME Mary Louise L. Garcia	<b>3</b> ACCOUNT # (Ethics Commission Filers)
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<b>4</b> Date 10/01/2014	<b>5</b> Payee name Murphy Nasica
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<b>6</b> Amount (\$) \$200.00	<b>7</b> Payee address; City; State; Zip Code 815-A Brazos St., Ste. 304 Austin, Texas 78701
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10/22/2014	Payee name Friends of Senator Jane Nelson
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Amount (\$) \$150.00	Payee address; City; State; Zip Code P.O. Box 608 Grapevine, Texas 76099
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<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Contribution/Donation	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Check if Austin, TX, officeholder living 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 10/20/2014	Payee name Texas for Greg Abbott
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Amount (\$)	Payee address; City; State; Zip Code 504 Lavaca Street Austin, Texas 78701
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<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Contribution/Donation	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Check if Austin, TX, officeholder living 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 11/1/2014	Payee name Murphy Nasica
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Amount (\$) \$200.00	Payee address; City; State; Zip Code 815-A Brazos St., Ste. 304 Austin, Texas 78701
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<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Consulting Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Check if Austin, TX, officeholder living 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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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

BY: FRANK PHILLIPS  
 ELECTIONS ADMINISTRATOR  
 FILED  
 TARRANT COUNTY  
 2015 JAN 14 PM 12:46

# 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            |
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| Fees                | Printing Expense              | Office Overhead/Rental Expense   | OTHER (enter a category not listed above)  |

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<b>1</b> Total pages Schedule F: <b>2</b>	<b>2</b> FILER NAME Mary Louise L. Garcia	<b>3</b> ACCOUNT # (Ethics Commission Filers)
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<b>4</b> Date 11/3/2014	<b>5</b> Payee name Crestview Printing
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<b>6</b> Amount (\$) \$744.00	<b>7</b> Payee address; City; State; Zip Code P.O. Box 161487 Fort Worth, Texas 76161
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<b>8</b> PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Printing Expense -Christmas Cards	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
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Date 11/2/2014	Payee name USPS
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Amount (\$) \$294.00	Payee address; City; State; Zip Code 317 East Kennedale Parkway Kennedale, Texas 76060
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<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Other-Postage for Christmas Cards	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
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Date 12/1/2014	Payee name Murphy Nasica
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Amount (\$) \$200.00	Payee address; City; State; Zip Code 815-A Brazos St., Ste. 304 Austin, Texas 78701
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<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Consulting Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
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Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

FILED  
 TARRANT COUNTY  
 2015 JAN 14 PM 12:46  
 FRANK PHILLIPS  
 ELECTIONS ADMINISTRATOR  
 BY: