		CEHOLDER E REPORT		FORM C/OH COVER SHEET PG 1
The C/OH Instruction G	Guide explains how	to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR Mrs.	FIRST Maria	м ₁ L.	OFFICE USE ONLY
NAME	NICKNAME	LAST Cruz	SUFFIX	Date Received
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX	Roma, TX 78584	CITY; STATE; ZIP CODE	7/15/2024 MBelmonts
Change of Address		2.2.5		
5 CANDIDATE/ OFFICEHOLDER PHONE	(956)	437-5841	EXTENSION	Date Hand-delivered or Date Postmarked
6 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Carlos	мі М .	Receipt # Amount \$ Date Processed
IVAIVIE	NICKNAME	LAST Reyes	SUFFIX	Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)		t Street, Roma, Te		STATE; ZIP CODE
8 CAMPAIGN TREASURER PHONE	(956)	330-6779	EXTENSION	
9 REPORT TYPE	January 15	30th day before e	lection Runoff	15th day after campaign treasurer appointment (Officeholder Only)
	July 15	8th day before ele	Exceeded Modified Reporting Limit	Final Report (Attach C/OH - FR)
10 PERIOD COVERED	Month 1	Day Year / 1 / 24	THROUGH 6	Day Year / 30 / 24
11 ELECTION	ELECTION DA Month Day 11 / 5	Year Primary 24 General	ELECTION TYPE Runoff Other Description Special	
12 OFFICE	OFFICE HELD (if any)	School Board Trus	13 OFFICE SOUGHT (if known stee Roma ISD School	
14 NOTICE FROM POLITICAL COMMITTEE(S)	THE CANDIDATE / OFFIC	EHOLDER. THESE EXPENDITURES	MAY HAVE BEEN MADE WITHOUT THE CAND	ADE BY POLITICAL COMMITTEES TO SUPPORT DIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR HEY RECEIVE NOTICE OF SUCH EXPENDITURES.
Additional Pages	GENERAL	COMMITTEE ADDRESS		
,	SPECIFIC	COMMITTEE CAMPAIGN TRE	ASURER NAME	
		COMMITTEE CAMPAIGN TRE	EASURER ADDRESS	

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME Maria L. Cruz		16 File	r ID (Ethics (Commission Filers)
17 CONTRIBUTION TOTALS	 TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER T PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) 	HAN	\$	0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOA	NS)	\$ 2	2,161.42
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.		\$	0.00
	4. TOTAL POLITICAL EXPENDITURES		\$	0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE OF REPORTING PERIOD	LAST DAY	\$	250.00
OUTSTANDING LOAN TOTALS	 TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS A LAST DAY OF THE REPORTING PERIOD 	S OF THE	\$	0.00
	wear, or affirm, under penalty of perjury, that the accompanying report is quired to be reported by me under Title 15, Election Code.	true and co	orrect and in	cludes all information
	Signature o	f Candidate	or Officehol	der
	Please complete either option be	low:		
(1) Affidavit				
NOTARY STAMP/SEAL				
Sworn to and subscribed		the	_ day of	ı
20, to certify	which, witness my hand and seal of office.			
Signature of officer administer	ring oath Printed name of officer administering oath		Title of offic	er administering oath
	OR			
(2) Unsworn Declaration	on			
My name is Maria L. Cr				<u> </u>
My address is 1615 E. 3		,, _	78584	USA
Executed in Starr	(street) (city) County, State of Texas , on the 10TH day of July (mathematical contents of the contents of t	(state)	(zip code) , 20 24 (year)	(country)
	Signature of Ca	indidate/Offic	ceholder (De	arant)

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

-0.00	ILER NAME	20 Filer ID (Ethics Co	mmiss	sion Filers)
Mari	ia L. Cruz			
	CHEDULE SUBTOTALS AME OF SCHEDULE			SUBTOTAL AMOUNT
1.	■ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	250.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	3	\$	1,911.42
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	SCHEDULE E: LOANS		\$	
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL (CONTRIBUTIONS	\$	
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICA	AL CONTRIBUTIONS	\$	
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL F	FUNDS	\$	
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO	A BUSINESS OF C/OH	\$	
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL	CONTRIBUTIONS	\$	
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIE TO FILER	UTIONS RETURNED	\$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.						
The	Instruction Guide explains how to	complete this	s form.	1 Total pages Schedule A1:		
2 FILER NAME Maria L. Cr	uz			3 Filer ID (Ethics Commission Filers)		
4 Date	5 Full name of contributor Jesus Rios, Jr.		C (ID#:)	7 Amount of contribution (\$)		
06/13/2024		City;	State; Zip Code	250.00		
8 Principal occu Pharmacist	pation / Job title (See Instructions)		9 Employer (See Instruct	tions)		
Date	Full name of contributor		C (ID#:)	Amount of contribution (\$)		
	Contributor address;	City;	State; Zip Code			
Principal occup	nation / Job title (See Instructions)		Employer (See Instruct	tions)		
Date	Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$)		
	Contributor address;	City;	State; Zip Code			
Principal occup	pation / Job title (See Instructions)		Employer (See Instruct	tions)		
Date	Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$)		
	Contributor address;	City;	State; Zip Code			
Principal occup	nation / Job title (See Instructions)		Employer (See Instruct	tions)		
	ATTACH ADDITIO	NAL CODIES	OE THIS SCHEDING AS N	EEDED		
	ATTACH ADDITIO	MAL COPIES	OF THIS SCHEDULE AS N			

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

SCHEDULE A2

If the requested information is not applicable, DO NOT include this page in the report.

Т	ne Instruction Guide explains how to complete this for	n.	1 Total pages Sched	lule A2: 6
2 FILER NAM	E		3 Filer ID (Ethics Commission Filers)	
Maria L.	Cruz			
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRI	BUTIONS	\$	
5 Date	6 Full name of contributor)	8 Amount of Contribution \$	9 In-kind contribution description
06/12/2024	7 Contributor address; City; State;	Zip Code	350.00	Campaign Caps
	1820 5th Street, Roma, TX 78584		Check if travel outs	 ide of Texas. Complete Schedule T.
The state of the s	cupation / Job title (FOR NON-JUDICIAL) (See Instructions)	11 Employe	er (FOR NON-JUDICI	AL)(See Instructions)
First ADA		229th Dist	trict Attorney's Offi	ice
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contribu	itor's job title (FOR JU	JDICIAL) (See Instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm	of contributor's spou	se (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date	Full name of contributor)	Amount of	In-kind contribution
	Abel Villarreal, Jr.		Contribution \$	description
06/13/2024	Contributor address; City; State;	Zip Code	82.14	Food for Kick-Off Event
	1820 5th Street, Roma, TX 785	84	Check if travel outsi	l de of Texas. Complete Schedule T.
Principal occ	cupation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employe	er (FOR NON-JUDICI	AL)(See Instructions)
First AD	A	229th District Attorney's Office		
Contributor's	principal occupation (FOR JUDICIAL)	Contribu	itor's job title (FOR JU	JDICIAL) (See Instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm	of contributor's spou	se (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
	ATTACH ADDITIONAL CODIES OF T	IIIC COLIEDI	U E AC NEEDED	

SCHEDULE A2

If the requested information is not applicable, DO NOT include this page in the report.

	ne Instruction Guide explains how to complete this form	n.	1 Total pages Sched	ule A2:
2 FILER NAM			3 Filer ID (Ethics Co	mmission Filers)
Maria L.	Cruz			
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$	
5 Date	6 Full name of contributor)	8 Amount of Contribution \$	9 In-kind contribution description
	Jaime Gonzalez		242.50	Use of Ballroom for
06/13/2024	7 Contributor address; City; State;	Zip Code	212.50	Kick-Off Event
	701 N. Athens Street, Roma, TX 78	584	Check if travel outsi	l de of Texas. Complete Schedule T.
10 Principal occ Ballroom (upation / Job title (FOR NON-JUDICIAL)(See Instructions) Owner	11 Employe Self-Empl	er (FOR NON-JUDICI/	AL)(See Instructions)
12 Contributor's	principal occupation (FOR JUDICIAL)			IDICIAL) (See Instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm	n of contributor's spous	se (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date	Full name of contributor)	Amount of	In-kind contribution
Date	Carlos M. Reyes		Contribution \$	description
06/13/2024	Contributor address; City; State;	Zip Code	35.00	Plates, Utensils, Drinks for Kick-Off Event
	708 N. Grant Street, Roma, TX	78584	Check if travel outside	de of Texas. Complete Schedule T.
Principal occ	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employe	er (FOR NON-JUDICIA	AL)(See Instructions)
Pharmad	cy Manager	Lino's Pl	harmacy	
Contributor's	principal occupation (FOR JUDICIAL)	Contribu	itor's job title (FOR JU	DICIAL) (See Instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
				* *
= =				
	ATTACH ADDITIONAL COPIES OF T	HIS SCHEDU	ILE AS NEEDED	

Forms provided by Texas Ethics Commission

www.ethics.state.tx.us

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

SCHEDULE A2

If the requested information is not applicable, DO NOT include this page in the report.

Th	ne Instruction Guide explains how to complete this form	n.	1 Total pages Sched	ule A2:
2 FILER NAME	E		3 Filer ID (Ethics Co	mmission Filers)
Maria L.	Cruz			
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$	
5 Date	6 Full name of contributor ut-of-state PAC (ID#:)	8 Amount of Contribution \$	9 In-kind contribution description
	Roberto Muniz		400.00	i .
06/14/2024	7 Contributor address; City; State;	Zip Code	100.00	Newspaper ad - Las Noticias Newspaper
	500 Dr. Mario Ramirez Ave., Roma, T	X 78584	Check if travel outsi	I de of Texas. Complete Schedule T.
10 Principal occ	supation / Job title (FOR NON-JUDICIAL)(See Instructions)	11 Employe Self-Empl	er (FOR NON-JUDICIA oyed	AL)(See Instructions)
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contribu	utor's job title (FOR JU	IDICIAL) (See Instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm	n of contributor's spou	se (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date	Full name of contributor)	Amount of	In-kind contribution
54.5	Carlos M. Reyes		Contribution \$	description
06/14/2024	Contributor address; City; State;	Zip Code	50.00	Newspaper ad - Las Noticias Newspaper
	708 N. Grant Street, Roma, TX	78584	Check if travel outside	l de of Texas. Complete Schedule T.
Principal occ	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employe	er (FOR NON-JUDICI	AL)(See Instructions)
Pharmad	cy Manager	Lino's P	harmacy	
Contributor's	principal occupation (FOR JUDICIAL)	Contribu	utor's job title (FOR JU	DICIAL) (See Instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm	n of contributor's spou	se (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
	ATTACH ADDITIONAL COPIES OF T			

SCHEDULE A2

If the requested information is not applicable, DO NOT include this page in the report.

Th	ne Instruction Guide explains how to complete this form	n.	1 Total pages Sched	ule A2:
2 FILER NAMI	E		3 Filer ID (Ethics Co	mmission Filers)
Maria L.	Cruz			
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$	
5 Date	6 Full name of contributor)	8 Amount of	9 In-kind contribution
	Cristy Garza-Ortega		Contribution \$	description
06/13/2024			90.00	Cake & Cupcakes for
		Zip Code		Kick-Off Event
	830 E. Bluebird Street, Roma, TX 7	8584	Check if travel outsi	de of Texas. Complete Schedule T.
10 Principal occ	cupation / Job title (FOR NON-JUDICIAL) (See Instructions)	11 Employe	er (FOR NON-JUDICI	AL)(See Instructions)
		Self-Empl	loyed	
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contribu	utor's job title (FOR JU	DICIAL) (See Instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm	n of contributor's spou	se (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date	Full name of contributor)	Amount of	In-kind contribution
	Abel Villarreal, Jr.		Contribution \$	description
06/13/2024	Contributor address; City; State;	Zip Code	357.50	Campaign Coroplast Signs - Sign Works, LLC
	1820 5th Street, Roma, TX 785		Check if travel outside	de of Texas. Complete Schedule T.
Principal occ	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employe	er (FOR NON-JUDICIA	AL)(See Instructions)
First AD/	A		istrict Attorney's	
Contributor's	principal occupation (FOR JUDICIAL)	Contribu	utor's job title (FOR JU	DICIAL) (See Instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm	n of contributor's spou	se (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

SCHEDULE A2

If the requested information is not applicable, DO NOT include this page in the report.

-				
Th	ne Instruction Guide explains how to complete this form	n.	1 Total pages Sched	ule A2:
2 FILER NAMI	E		3 Filer ID (Ethics Co	mmission Filers)
Maria L.	Cruz			
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$	
5 Date	6 Full name of contributor)	8 Amount of	9 In-kind contribution
	Abel Villarreal, Jr.		Contribution \$	description
06/14/2024		Zip Code	312.50	Billboard Banners - Garely Graphics
	1820 5th Street, Roma, TX 78584		Check if travel outsi	de of Texas. Complete Schedule T.
10 Principal occ First ADA	cupation / Job title (FOR NON-JUDICIAL) (See Instructions)		er (FOR NON-JUDICIA strict Attorney's Of	
12 Contributor's	principal occupation (FOR JUDICIAL)			DICIAL) (See Instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm	of contributor's spou	se (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date	Full name of contributor)	Amount of	In-kind contribution
	Abel Villarreal, Jr.		Contribution \$	description
06/21/2024	Contributor address; City; State;	Zip Code	121.78	Campaign Bumper Stickers - Sign Works, LLC
	1820 5th Street, Roma, TX 785		Check if travel outside	de of Texas. Complete Schedule T.
Principal occ	upation / Job title (FOR NON-JUDICIAL) (See Instructions)		er (FOR NON-JUDICIA	
First AD/			strict Attorney's	
Contributor's	principal occupation (FOR JUDICIAL)	Contribu	itor's job title (FOR JU	DICIAL) (See Instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm	of contributor's spou	se (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

SCHEDULE A2

If the requested information is not applicable, DO NOT include this page in the report.

TH	ne Instruction Guide explains how to complete this form	n.	1 Total pages Schedule A2:
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Maria L.	Cruz		
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$
5 Date	6 Full name of contributor ut-of-state PAC (ID#:)	8 Amount of 9 In-kind contribution
	Jose E. Rodriguez		Contribution \$ description
06/14/2024	_	Zip Code	200.00 Newspaper Advertising - La Pistolera
	602 Grant Street, STE. A, Roma, TX	78584	 Check if travel outside of Texas. Complete Schedule T.
10 Principal occ	rupation / Job title (FOR NON-JUDICIAL) (See Instructions)	11 Employe	er (FOR NON-JUDICIAL)(See Instructions)
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contribu	utor's job title (FOR JUDICIAL) (See Instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm	n of contributor's spouse (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date	Full name of contributor	7:- 0 - 1 -	Amount of In-kind contribution Contribution \$ description
	Contributor address; City; State;	Zip Code	
Principal occ	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employe	er (FOR NON-JUDICIAL)(See Instructions)
Contributor's	principal occupation (FOR JUDICIAL)	Contribu	ator's job title (FOR JUDICIAL) (See Instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm	n of contributor's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
	ATTACH ADDITIONAL COPIES OF T	HIS SCHEDU	ILE AS NEEDED

Forms provided by Texas Ethics Commission

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.



Filer name Maria L . Cruz

AFFIDAVIT FOR CANDIDATE OR OFFICEHOLDER: ELECTRONIC FILING EXEMPTION

An exemption affidavit must be submitted with each paper report.

Beginning on January 1, 2024, a candidate or officeholder who has accepted more than \$32,810 in political contributions or made more than \$32,810 in political expenditures in <u>any</u> calendar year must file all subsequent reports electronically.

OFFICE U	ISE UNLT		
Date Received			
Date Hand-delivered or Date Postmarked			
Receipt #	Amount \$		
Date Processed			
Date Imaged			

- 1. I swear or affirm that I have not accepted more than \$32,810 in political contributions or made more than \$32,810 in political expenditures in a calendar year.
- 2. I further swear or affirm that I do not use computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.

Filer ID #

- 3. I further swear or affirm that no person acting as my agent or consultant, and no person with whom I contract, uses computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
- 4. I further swear or affirm that I understand that I am required to file my campaign finance reports electronically if I, my agent or consultant, or a person with whom I contract exceeds \$32,810 in political contributions or political expenditures in a calendar year, or uses computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
- 5. I am filing this affidavit with the July 15 report due on July 15, 2024.

 I understand that this affidavit is required to be filed with each campaign finance report for which I am claiming an exemption from electronic filing.

Please complete either option below:

(1) Affidavit		
	Sign	ature of Filer
NOTARY STAMP/SEAL		
Sworn to and subscribed before me by	this the	, day of,
20, to certify which, witness my har	and and seal of office.	
Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath
	OR	
(2) Unsworn Declaration My name is Maria L. Cruz	, and my date of birth is	01/22/1954
My address is 1615 E. 3rd (stre	Roma , Roma (stay)	78584 USA (country)
Executed in Starr County, St	tate of Texas, on the 10th day of July (mont	, 20 24 .
	Marian	of Filer (Declarant)
	Signature	of Filer (Declarant)

FILERS WHO ARE EXEMPT FROM THE ELECTRONIC FILING REQUIREMENT ARE STILL REQUIRED TO FILE CAMPAIGN FINANCE REPORTS ON PAPER