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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	For An	Authorized Co	mmittee		Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRIN		Example: If typing, ty	/pe 12FE4M5	
ELOISE GOMEZ RE	YES FOR CO	ONGRESS			
ADDRESS (number and street)	11900 HONE	Y HILL RD			
▼					
Check if different than previously reported. (ACC)	GRAND TERI	RACE		CA	92313
2. FEC IDENTIFICATION	NIIMRED \	CITY A		STATE ▲	ZIP CODE ▲
	NOMBER V				STATE ▼ DISTRICT
C C00544809		3. IS THIS REPORT	NEW (N) C	OR AMEND (A)	CA 31
4. TYPE OF REPORT (Choose One)				
(a) Quarterly Reports:	,	(b) 12-Day Pi	RE -Election Report fo	or the:	
April 15 Quarter	lv Report (Q1)	L	Primary (12P)	General (1	2G) Runoff (12R)
			Convention (12C)	Special (1	2S)
July 15 Quarterly	y Report (Q2)		M M / D	D / Y Y Y Y	in the
October 15 Qua	rterly Report (Q3)	Election	on L		State of
January 31 Year	-End Report (YE)	(c) 30-Day P (OST-Election Report	for the:	
			General (30G)	Runoff (30	OR) Special (30S)
Termination Rep	ort (TER)	Election	on M M / D	D / Y Y Y	in the State of
5. Covering Period	07 / 01	/ Y Y Y Y Y 2022	through	M M / D D /	Y Y Y Y Z022
I certify that I have examined	Smith, Willia		knowledge and belie	ef it is true, correct and	d complete.
Type or Print Name of Treasu					
Signature of Treasurer	Smith, William, P, , CP	PA	[Electronically Filed	Date 10	09 2022
NOTE: Submission of false, err	oneous, or incomple	ete information ma	ay subject the person	signing this Report to th	ne penalties of 52 U.S.C. §30109
Office Use					FEC FORM 3
Only					(Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

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FEC Form 3 (Revised 05/2016)

Write or Type Committee Name ELOISÉ GOMEZ REYES FOR CONGRESS

о7 М09М 30 2022 2022 01 Report Covering the Period: From: To:

		COLUMN A This Period	COLUMN B Election Cycle-to-Date
	Net Contributions (other than loans)		
	(a) Total Contributions (other than loans) (from Line 11(e))	0.00	0.00
	(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
	(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	0.00	0.00
	Net Operating Expenditures		
	(a) Total Operating Expenditures (from Line 17)	0.00	37.90
	(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
	(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	0.00	37.90
	Cash on Hand at Close of Reporting Period (from Line 27)	1436.41	
	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
0.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	119061.15	

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts PAGE 3 / 7 FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

ELOISE GOMEZ REYES FOR CONGRESS

07 2022 09 30 2022 01 Report Covering the Period: From: To:

	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. (CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than		
	Political Committees (i) Itemized (use Schedule A)	0.00	0.00
	(ii) Unitemized	0.00	0.00
	(iii) TOTAL of contributions from individuals	0.00	0.00
(1	b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
`	d) The Candidatee) TOTAL CONTRIBUTIONS	0.00	0.00
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	0.00
	TRANSFERS FROM OTHER	0.00	0.00
<i></i>	AUTHORIZED COMMITTEES	0.00	0.00
	OANS: a) Made or Guaranteed by the		
(Candidate	0.00	0.00
(1	b) All Other Loans	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	0.00
	DFFSETS TO OPERATING		
	EXPENDITURES Refunds, Rebates, etc.)	0.00	0.00
	OTHER RECEIPTS Dividends, Interest, etc.)	0.00	0.00
- 1	TOTAL RECEIPTS (add Lines 1(e), 12, 13(c), 14, and 15) Carry Total to Line 24, page 4)	0.00	0.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 05/2016)

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	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	0.00	37.90
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19.	LOAN REPAYMENTS:		
	(a) Of Loans Made or Guaranteed by the Candidate	0.00	0.00
	(b) Of All Other Loans	0.00	0.00
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	0.00
20.	REFUNDS OF CONTRIBUTIONS TO:		
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00
21.	OTHER DISBURSEMENTS	0.00	0.00
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	0.00	37.90
	III. CASH SI	UMMARY	
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD			1436.41
24 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)			0.00
25. SUBTOTAL (add Line 23 and Line 24)			1436.41
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)	0.00
27.	CASH ON HAND AT CLOSE OF REPORTIN (subtract Line 26 from Line 25)	NG PERIOD	1436.41

SCHEDULE C (FEC Form 3) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 5 (FOR LINE NUMBER: (check only one)

X	13a
	13b

OF

Transaction ID: SC/10.4111 NAME OF COMMITTEE (In Full) **ELOISE GOMEZ REYES FOR CONGRESS** LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary REYES, ELOISE GOMEZ, , , General Mailing Address 1190 Honey Hill Dr Other (specify) \blacktriangledown City State ZIP Code X Personal Funds of the Candidate CA 92313 **Grand Terrace** Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 100000.00 0.00 100000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 ^D24^D M 06M ž013 Noně x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 100000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 6 OF 7
FOR LINE NUMBER: (check only one)

13b Transaction ID: SC/10.4112 NAME OF COMMITTEE (In Full) **ELOISE GOMEZ REYES FOR CONGRESS** LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 214 Memo Item Primary REYES, ELOISE GOMEZ, , , General Mailing Address 1190 Honey Hill Dr Other (specify) \blacktriangledown City State ZIP Code X Personal Funds of the Candidate CA 92313 **Grand Terrace** Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 8000.00 0.00 8000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 ^D26^D ^M80^M ž014 Noně x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 8000.00 TOTALS This Period (last page in this line only) 108000.00 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3) DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 7 OF
FOR LINE NUMBER:
(check only one)

	9
X	10

NAME OF COMMITTEE (In Full)

ELOISE GOMEZ RE	YESI	FOR CONGRE	SS		
A. Full Name (Last, First, Middle Initial) of D Smith Marion & Co	Nature of Debt (Purpose): Payroll Processing Fees - 2014 Primary Debt				
Mailing Address 38605 Calistoga Dr Ste 120					
City Murrieta	State CA	Zip Code 92563-4882			
Outstanding Balance Beginning This Period	d		Transaction ID : SD10.4109		
456.00					
Amount Incurred This Period	4	Payment This Period	Outstanding Balance at Close of This Period		
0.00		0.00	456.00		
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor The New Media Firm			Nature of Debt (Purpose): Media Consulting, 2014 Primary - Dispute		
Mailing Address 1730 Rhode Island Ave NW Ste 213	,				
City Washington	State DC	Zip Code 20036-3118			
Outstanding Balance Beginning This Period	d		Transaction ID : SD10.4110		
10605.15					
Amount Incurred This Period	Amount Incurred This Period Payment This Period		Outstanding Balance at Close of This Period		
0.00		0.00	10605.15		
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):		
Mailing Address					
City	State	Zip Code			
Outstanding Balance Beginning This Period	Outstanding Balance Beginning This Period				
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period		
	<u> </u>	7 7 7	, , , , , , , , , , , , , , , , , , ,		
1) SUBTOTALS This Period This Page (options	al)		11061.15		
2) TOTALS This Period (last page this line nur	TOTALS This Period (last page this line number only)				
) TOTAL OUTSTANDING LOANS from Schedule C (last page only)			108000.00		
ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)			119061.15		