

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines. 12FE4M5  
**EDDIE ZAMORA FOR CONGRESS**

ADDRESS (number and street) 5111 NORTH 10TH STREET, #108  
 Check if different than previously reported. (ACC) MCALLEN TX 78504

2. **FEC IDENTIFICATION NUMBER** C C00427708 3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A)  
CITY STATE ZIP CODE STATE DISTRICT  
TX 15

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on 03 / 04 / 2014 in the State of TX  
(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on   /   /   in the State of  

5. Covering Period 01 / 01 / 2014 through 02 / 12 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer Eddie Zamora  
Signature of Treasurer Eddie Zamora [Electronically Filed] Date 04 / 17 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**EDDIE ZAMORA FOR CONGRESS**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	5750.00	28655.55
(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)).....	5750.00	28655.55
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	5510.15	28903.26
(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)).....	5510.15	28903.26
8. Cash on Hand at Close of Reporting Period (from Line 27).....	9498.59	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**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

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**EDDIE ZAMORA FOR CONGRESS**

Report Covering the Period: From:  /  /  To:  /  /

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	5050.00	23583.30
(ii) Unitemized.....	700.00	5072.25
(iii) TOTAL of contributions from individuals ▶	5750.00	28655.55
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	5750.00	28655.55
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	5750.00	28655.55

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	5510.15	28903.26
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. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	5510.15	28903.26

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	9258.74
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	5750.00
25. SUBTOTAL (add Line 23 and Line 24).....	15008.74
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	5510.15
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	9498.59

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 22
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**EDDIE ZAMORA FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Kathryn Brady**

Mailing Address 4982 FM 1104

City Kingsbury State TX Zip Code 78638

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation rancher

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 27 / 2014

**Transaction ID : SA11AI.5004**

Amount of Each Receipt this Period  
 contribution 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Hilmar Cowey**

Mailing Address 1156 Sandy Elm Rd

City La Vernia State TX Zip Code 78121

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation rancher

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 27 / 2014

**Transaction ID : SA11AI.5002**

Amount of Each Receipt this Period  
 contribution 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Linda Dwyer**

Mailing Address

City Seguin State TX Zip Code 78155

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation businesswoman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 25 / 2014

**Transaction ID : SA11AI.5001**

Amount of Each Receipt this Period  
 contribution 750.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 22
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**EDDIE ZAMORA FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Linda Dwyer**

Mailing Address

City State Zip Code  
Seguin TX 78155

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation  
self businesswoman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1100.00

Date of Receipt  
MM / DD / YYYY  
02 / 07 / 2014

**Transaction ID : SA11AI.4987**

Amount of Each Receipt this Period  
contribution 350.00

**B.** Full Name (Last, First, Middle Initial)  
**Susan Dyess**

Mailing Address 3735 fm 1117

City State Zip Code  
Seguin TX 78155

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation  
self businesswoman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
MM / DD / YYYY  
01 / 17 / 2014

**Transaction ID : SA11AI.5006**

Amount of Each Receipt this Period  
contribution 500.00

**C.** Full Name (Last, First, Middle Initial)  
**John Ewald**

Mailing Address P.O. Box 1287

City State Zip Code  
Seguin TX 78156

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation  
self businessman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
MM / DD / YYYY  
01 / 24 / 2014

**Transaction ID : SA11AI.4995**

Amount of Each Receipt this Period  
contribution 500.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1350.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 22
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**EDDIE ZAMORA FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Charles Koehler**

Mailing Address 234 Parkridge

City Seguin State TX Zip Code 78155

FEC ID number of contributing federal political committee. **C**

Name of Employer The Koehler Company Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 23 / 2014**

**Transaction ID : SA11AI.4996**

Amount of Each Receipt this Period  
**100.00**  
 contribution

**B.** Full Name (Last, First, Middle Initial)  
**Leonora Kuhn**

Mailing Address 1/23/2014

City Kingsbury State TX Zip Code 78638

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 23 / 2014**

**Transaction ID : SA11AI.4997**

Amount of Each Receipt this Period  
**500.00**  
 contribution

**C.** Full Name (Last, First, Middle Initial)  
**P.O.C.G.**

Mailing Address 3405 Seguin Luling Rd

City Seguin State TX Zip Code 78155

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 06 / 2014**

**Transaction ID : SA11AI.4989**

Amount of Each Receipt this Period  
**500.00**  
 contribution

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1100.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 22
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**EDDIE ZAMORA FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Bill Shepherd**

Mailing Address 3601 Mimosa Court

City Cibolo State TX Zip Code 78108

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **800.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 02 / 2014

**Transaction ID : SA11AI.5007**

Amount of Each Receipt this Period  
**100.00**

In-kind -

**B.** Full Name (Last, First, Middle Initial)  
**Bill Shepherd**

Mailing Address 3601 Mimosa Court

City Cibolo State TX Zip Code 78108

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **900.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 03 / 2014

**Transaction ID : SA11AI.5008**

Amount of Each Receipt this Period  
**100.00**

In-kind -

**C.** Full Name (Last, First, Middle Initial)  
**Bill Shepherd**

Mailing Address 3601 Mimosa Court

City Cibolo State TX Zip Code 78108

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 04 / 2014

**Transaction ID : SA11AI.5010**

Amount of Each Receipt this Period  
**100.00**

In-kind -

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**300.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 22
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**EDDIE ZAMORA FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Bill Shepherd**

Mailing Address 3601 Mimosa Court

City Cibolo State TX Zip Code 78108

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1100.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**01 / 08 / 2014**

**Transaction ID : SA11AI.5011**

Amount of Each Receipt this Period  
**100.00**

In-kind -

**B.** Full Name (Last, First, Middle Initial)  
**shirley shepherd**

Mailing Address 3601 Mimos Ct

City Cibolo State TX Zip Code 78108

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**01 / 23 / 2014**

**Transaction ID : SA11AI.5015**

Amount of Each Receipt this Period  
**100.00**

In-kind -

**C.** Full Name (Last, First, Middle Initial)  
**shirley shepherd**

Mailing Address 3601 Mimos Ct

City Cibolo State TX Zip Code 78108

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**01 / 24 / 2014**

**Transaction ID : SA11AI.5016**

Amount of Each Receipt this Period  
**100.00**

In-kind -

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**300.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 22
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**EDDIE ZAMORA FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**shirley shepherd**

Mailing Address 3601 Mimos Ct

City Cibolo State TX Zip Code 78108

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**01 / 25 / 2014**

**Transaction ID : SA11AI.5017**

Amount of Each Receipt this Period  
**100.00**

In-kind -

**B.** Full Name (Last, First, Middle Initial)  
**shirley shepherd**

Mailing Address 3601 Mimos Ct

City Cibolo State TX Zip Code 78108

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**01 / 25 / 2014**

**Transaction ID : SA11AI.5018**

Amount of Each Receipt this Period  
**100.00**

In-kind -

**C.** Full Name (Last, First, Middle Initial)  
**shirley shepherd**

Mailing Address 3601 Mimos Ct

City Cibolo State TX Zip Code 78108

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**01 / 26 / 2014**

**Transaction ID : SA11AI.5019**

Amount of Each Receipt this Period  
**100.00**

In-kind -

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**300.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 22
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**EDDIE ZAMORA FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**shirley shepherd**

Mailing Address 3601 Mimos Ct

City Cibolo State TX Zip Code 78108

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 05 / 2014

**Transaction ID : SA11AI.5020**

Amount of Each Receipt this Period  
 100.00

In-kind -

**B.** Full Name (Last, First, Middle Initial)  
**shirley shepherd**

Mailing Address 3601 Mimos Ct

City Cibolo State TX Zip Code 78108

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 06 / 2014

**Transaction ID : SA11AI.5021**

Amount of Each Receipt this Period  
 100.00

In-kind -

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

200.00

5050.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 12 OF 22	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**EDDIE ZAMORA FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Dairy Queen #14157</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2014
Mailing Address 1350 Hwy 281 South		Amount of Each Disbursement this Period 6.70 <b>Transaction ID : SB17.4891</b>
City State Zip Code George West TX 78022	Purpose of Disbursement food	
Candidate Name <b>EDDIE ZAMORA FOR CONGRESS</b>		Category/Type 002
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 15	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. El Ranchito</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2014
Mailing Address 983 N Hwy 123 Bypass		Amount of Each Disbursement this Period 13.85 <b>Transaction ID : SB17.4929</b>
City State Zip Code Seguin TX 78155	Purpose of Disbursement food	
Candidate Name <b>EDDIE ZAMORA FOR CONGRESS</b>		Category/Type 002
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 15	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>C. GCRP</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2014
Mailing Address 2585 hey 46		Amount of Each Disbursement this Period 325.00 <b>Transaction ID : SB17.4981</b>
City State Zip Code Seguin TX 78155	Purpose of Disbursement Lincoln Day Dinner	
Candidate Name <b>EDDIE ZAMORA FOR CONGRESS</b>		Category/Type 004
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 15	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	345.55
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 22			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**EDDIE ZAMORA FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. H.E.B. #26</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2014
Mailing Address 17460 IH 35 North		Amount of Each Disbursement this Period 43.40 <b>Transaction ID : SB17.4925</b>
City San Antonio State TX Zip Code 78154	Purpose of Disbursement fuel 002 Category/Type	
Candidate Name <b>EDDIE ZAMORA FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 15		

Full Name (Last, First, Middle Initial) <b>B. H.E.B. #26</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2014
Mailing Address 17460 IH 35 North		Amount of Each Disbursement this Period 58.17 <b>Transaction ID : SB17.4967</b>
City San Antonio State TX Zip Code 78154	Purpose of Disbursement fuel 002 Category/Type	
Candidate Name <b>EDDIE ZAMORA FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 15		

Full Name (Last, First, Middle Initial) <b>C. H.E.B. #26</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 26 / 2014
Mailing Address 17460 IH 35 North		Amount of Each Disbursement this Period 48.47 <b>Transaction ID : SB17.4970</b>
City San Antonio State TX Zip Code 78154	Purpose of Disbursement fuel 002 Category/Type	
Candidate Name <b>EDDIE ZAMORA FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 15		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	150.04
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 22			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**EDDIE ZAMORA FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. H.E.B. #26</b>		Date of Disbursement MM / DD / YYYY 02 / 07 / 2014
Mailing Address 17460 IH 35 North		Amount of Each Disbursement this Period 50.39 <b>Transaction ID : SB17.4872</b>
City San Antonio State TX Zip Code 78154	Purpose of Disbursement fuel 002 Category/Type	
Candidate Name <b>EDDIE ZAMORA FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 15		

Full Name (Last, First, Middle Initial) <b>B. H.E.B.#2 Trenton Road</b>		Date of Disbursement MM / DD / YYYY 02 / 07 / 2014
Mailing Address 911 Trenton Rd		Amount of Each Disbursement this Period 52.03 <b>Transaction ID : SB17.4870</b>
City McAllen State TX Zip Code 78504	Purpose of Disbursement fuel 002 Category/Type	
Candidate Name <b>EDDIE ZAMORA FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 15		

Full Name (Last, First, Middle Initial) <b>c. H.E.B. Seguin</b>		Date of Disbursement MM / DD / YYYY 01 / 18 / 2014
Mailing Address 9/26/13		Amount of Each Disbursement this Period 29.00 <b>Transaction ID : SB17.4940</b>
City Seguin State TX Zip Code 78155	Purpose of Disbursement fuel 002 Category/Type	
Candidate Name <b>EDDIE ZAMORA FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 15		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	131.42
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 22			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**EDDIE ZAMORA FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Al Hinojosa</b>		Date of Disbursement MM / DD / YYYY 02 / 01 / 2014
Mailing Address 800 North Shoreline		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : SB17.4983</b>
City Corpus Christ	State TX	
Purpose of Disbursement consultation	Category/ Type 001	
Candidate Name <b>EDDIE ZAMORA FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 15	

Full Name (Last, First, Middle Initial) <b>B. Loves #463</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2014
Mailing Address 3158 West IH-10		Amount of Each Disbursement this Period 1.61 <b>Transaction ID : SB17.4889</b>
City Seguin	State TX	
Purpose of Disbursement tea	Category/ Type 002	
Candidate Name <b>EDDIE ZAMORA FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 15	

Full Name (Last, First, Middle Initial) <b>c. Sam's Club #4850</b>		Date of Disbursement MM / DD / YYYY 01 / 02 / 2014
Mailing Address 7601 North 10th Street		Amount of Each Disbursement this Period 62.37 <b>Transaction ID : SB17.4897</b>
City McAllen	State TX	
Purpose of Disbursement fuel	Category/ Type 002	
Candidate Name <b>EDDIE ZAMORA FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 15	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2063.98
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 16 OF 22	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**EDDIE ZAMORA FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Sam's Club #4850</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2014
Mailing Address 7601 North 10th Street		Amount of Each Disbursement this Period 8.01
City McAllen	State TX	
Zip Code 79407	Purpose of Disbursement fuel	Category/ Type 002
Candidate Name <b>EDDIE ZAMORA FOR CONGRESS</b>		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: TX District: 15	

Full Name (Last, First, Middle Initial) <b>B. Sam's Club #4850</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2014
Mailing Address 7601 North 10th Street		Amount of Each Disbursement this Period 51.32
City McAllen	State TX	
Zip Code 79407	Purpose of Disbursement fuel	Category/ Type 002
Candidate Name <b>EDDIE ZAMORA FOR CONGRESS</b>		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: TX District: 15	

Full Name (Last, First, Middle Initial) <b>c. Sam's Club #4850</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2014
Mailing Address 7601 North 10th Street		Amount of Each Disbursement this Period 34.94
City McAllen	State TX	
Zip Code 79407	Purpose of Disbursement fuel	Category/ Type 002
Candidate Name <b>EDDIE ZAMORA FOR CONGRESS</b>		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: TX District: 15	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	94.27
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 22			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**EDDIE ZAMORA FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Sam's Club #4850</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2014
Mailing Address 7601 North 10th Street		Amount of Each Disbursement this Period 32.10 <b>Transaction ID : SB17.4931</b>
City McAllen	State TX	
Purpose of Disbursement fuel	Category/ Type 002	
Candidate Name <b>EDDIE ZAMORA FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 15	

Full Name (Last, First, Middle Initial) <b>B. Sam's Club #4850</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2014
Mailing Address 7601 North 10th Street		Amount of Each Disbursement this Period 35.42 <b>Transaction ID : SB17.4934</b>
City McAllen	State TX	
Purpose of Disbursement fuel	Category/ Type 002	
Candidate Name <b>EDDIE ZAMORA FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 15	

Full Name (Last, First, Middle Initial) <b>c. Sam's Club #4850</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2014
Mailing Address 7601 North 10th Street		Amount of Each Disbursement this Period 35.66 <b>Transaction ID : SB17.4956</b>
City McAllen	State TX	
Purpose of Disbursement fuel	Category/ Type 002	
Candidate Name <b>EDDIE ZAMORA FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 15	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	103.18
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 22			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**EDDIE ZAMORA FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Sam's Club #4850</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2014
Mailing Address 7601 North 10th Street		Amount of Each Disbursement this Period 11.26 <b>Transaction ID : SB17.5036</b>
City State Zip Code McAllen TX 79407	Purpose of Disbursement fuel	
Candidate Name <b>EDDIE ZAMORA FOR CONGRESS</b>		Category/ Type 002
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 15		

Full Name (Last, First, Middle Initial) <b>B. Bill Shepherd</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2014
Mailing Address 3601 Mimosa Court		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : SB17.5035</b>
City State Zip Code Cibolo TX 78108	Purpose of Disbursement In-kind -	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Bill Shepherd</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2014
Mailing Address 3601 Mimosa Court		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : SB17.5034</b>
City State Zip Code Cibolo TX 78108	Purpose of Disbursement In-kind -	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	211.26
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 19 OF 22	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**EDDIE ZAMORA FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Bill Shepherd</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2014
Mailing Address 3601 Mimosa Court		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : SB17.5033</b>
City Cibolo	State TX Zip Code 78108	
Purpose of Disbursement In-kind -	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Bill Shepherd</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2014
Mailing Address 3601 Mimosa Court		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : SB17.5032</b>
City Cibolo	State TX Zip Code 78108	
Purpose of Disbursement In-kind -	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. shirley shepherd</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2014
Mailing Address 3601 Mimos Ct		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : SB17.5029</b>
City Cibolo	State TX Zip Code 78108	
Purpose of Disbursement In-kind -	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	300.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 20 OF 22	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**EDDIE ZAMORA FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. shirley shepherd</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address 3601 Mimos Ct		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : SB17.5028</b>
City Cibolo	State TX Zip Code 78108	
Purpose of Disbursement In-kind -	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. shirley shepherd</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 25 / 2014
Mailing Address 3601 Mimos Ct		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : SB17.5026</b>
City Cibolo	State TX Zip Code 78108	
Purpose of Disbursement In-kind -	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. shirley shepherd</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 25 / 2014
Mailing Address 3601 Mimos Ct		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : SB17.5027</b>
City Cibolo	State TX Zip Code 78108	
Purpose of Disbursement In-kind -	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	300.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 22			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**EDDIE ZAMORA FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. shirley shepherd</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 26 / 2014
Mailing Address 3601 Mimos Ct		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : SB17.5025</b>
City Cibolo	State TX Zip Code 78108	
Purpose of Disbursement In-kind -	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. shirley shepherd</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2014
Mailing Address 3601 Mimos Ct		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : SB17.5024</b>
City Cibolo	State TX Zip Code 78108	
Purpose of Disbursement In-kind -	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. shirley shepherd</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2014
Mailing Address 3601 Mimos Ct		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : SB17.5023</b>
City Cibolo	State TX Zip Code 78108	
Purpose of Disbursement In-kind -	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	300.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 22	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**EDDIE ZAMORA FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Su Casa</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2014
Mailing Address 1142 East Kingsbur Street		Amount of Each Disbursement this Period 7.75 <b>Transaction ID : SB17.4881</b>
City Seguin	State TX	
Zip Code 78155	Purpose of Disbursement food	Category/ Type 002
Candidate Name <b>EDDIE ZAMORA FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 15	

Full Name (Last, First, Middle Initial) <b>B. Su Casa</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2014
Mailing Address 1142 East Kingsbur Street		Amount of Each Disbursement this Period 3.70 <b>Transaction ID : SB17.4903</b>
City Seguin	State TX	
Zip Code 78155	Purpose of Disbursement food	Category/ Type 002
Candidate Name <b>EDDIE ZAMORA FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 15	

Full Name (Last, First, Middle Initial) <b>C. Su Casa</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2014
Mailing Address 1142 East Kingsbur Street		Amount of Each Disbursement this Period 19.50 <b>Transaction ID : SB17.4951</b>
City Seguin	State TX	
Zip Code 78155	Purpose of Disbursement food	Category/ Type 002
Candidate Name <b>EDDIE ZAMORA FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 15	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	30.95
<b>TOTAL</b> This Period (last page this line number only).....	4030.65