2030792818

FEC FORM 3

Only

FE5AN018

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED

2012 APR 23 PM 12: 03

OFFITER

(Revised 02/2003)

1.	NAME OF COMMITTEE (in full)	TYPE OR PRIN	Τ ▼		mple: If typing r the lines.	g, type	12	FE4M5			
 M	ARIA, Luis	9	RAC	<u> </u>	1111	 		111	 		
ADI	DRESS (number and street)	1135 K	loiei	I LIEIR	CT						
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Above and development					ט נ	782	<u>2.3</u> -L				
2.	FEC IDENTIFICATION N	UMBER ▼		CITY			STATI	_		ZIP CODE	N
	C005086	2.1		THIS EPORT	NEW (N)	OR		AMEND (A)	ED	STATE ▼	3 ₁ 5
4.	TYPE OF REPORT (Ch. (a) Quarterly Reports: April 15 Quarterly Reports	Report (Q1)	(b) 12	-Day PRE-	Election Repo Primary (12P) Convention (1			General (1 Gpecial (12		Runo	off (12R)
	July 15 Quarterly Re October 15 Quarterly	rly Report (Q3)		lection on			1	<u> </u>		in the State of	
	January 31 Year-Er	ia Neport (TE)	(c) 30	-Day POS 1	General (30G)		ier g	Runoff (30	R)	Spec	cial (30S)
	Termination Report	(TER)	E	lection on	M M /	(D D	4;	· '		in the State of	
5.	Covering Period C	1 6 1	Žů	ĭ Ž	through	Ď	3 ′	31	Žo.	įž	
	ertify that I have examined th	_		_	•	pelief it is	true, co	orrect and	i comple	te.	······································
	e or Print Name of Treasurer	SA MU	el Va	Aluaa L	2Adu		Date	o y	' <u>"</u>	Ý Ž	2/2
NO	TE: Submission of false, erron	eous, or incomple	ete inform	ation may s	ubject the per	son signin	ng this R	eport to th	ne penalti	es of 2 U.S.	C. §437g.
	Office								FEC	FORM	3 .

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FEC	Form	3	(Revised	02/2003) '	01

SUMMARY PAGE of Receipts and Disbursements

Page 2

Write or Type Committee Name MARIA LUISA

Report Covering the Period:

From:

To:

			COLUMN A This Period	COLUMN B Election Cycle-to-Date
6.	Net	t Contributions (other than loans)		
	(a)	Total Contributions (other than loans) (from Line 11(e))	, 1,985.00	
	(b)	Total Contribution Refunds (from Line 20(d))	0 <u>0</u>	
	(c)	Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	1,98500	<u></u>
7.	Net	Operating Expenditures		
	(a)	Total Operating Expenditures (from Line 17)	4,391.20	
	(b)	Total Offsets to Operating Expenditures (from Line 14)	[a	

Cash on Hand at Close of Reporting Period (from Line 27).....

Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)

(c) Net Operating Expenditures

(subtract Line 7(b) from Line 7(a))

10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)

For further information contact:

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

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

12030792820

DETAILED SUMMARY PAGE

of Receipts

Page 3

FEC Form 3 (Revised 12/2003)

Write	or	Type	Cor	nmittee	Name	

MARIA	Luisa	Aluaeado	for	CONGRESS
	·		•	

Report Covering the Period:

From:

To:

03/31/2012

	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11.	CONTRIBUTIONS (other than loans) FROM	l :	
	(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	1,300.00	
	(ii) Unitemized(iii) TOTAL of contributions from individuals	, 1,985.00	
	(b) Political Party Committees	0.0	, o o
	(d) The Candidate	1,985.00	
12.	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	1. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.	<u> </u>
13.	LOANS: (a) Made or Guaranteed by the Candidate	, 1,860.00	<u>0.0</u>
	(c) TOTAL LOANS (add Lines 13(a) arrd (b))	, 2,0 bo.o <i>0</i>	<u> </u>
14.	OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		
15.	OTHER RECEIPTS (Dividends, Interest, etc.)		
16.	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	, 4,045.00	0.0

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DETAILED SUMMARY PAGE

of Disbursements

Page 4

FEC Form 3 (Revised 02/2003) **COLUMN A COLUMN B** II. DISBURSEMENTS **Total This Period Election Cycle-to-Date** 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed by the Candidate..... (b) Of All Other Loans (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other Than Political Committees (b) Political Party Committees..... Other Political Committees (such as PACs)..... (d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))..... 21. OTHER DISBURSEMENTS 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) III. CASH SUMMARY 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...... TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... 25. SUBTOTAL (add Line 23 and Line 24)..... 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...... 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE	NUMBER:	PAGE		OF 2
(check only	one)		•	
11a	11b [11c	□ 11	d
12	13a	13b	14	15

HEMIZED RECEIPTS	Detailed Summary Page	12 13a 13b 14 15
Any information copied from such Reports and S or for commercial purposes, other than using the		erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)		
Full Name (Last, First, Middle Initial)	ARADO FOR CONGR	ESS
	tne	
Mailing Address		Date of Receipt
CM R 467	Box 5575 State Zip Code	03082012
	09096	
FEC ID number of contributing	^	Amount of Each Receipt this Period
federal political committee.	· Comment of the second	The first of the formation of the first of t
Name of Employer Retired	Occupation	300.00
Receipt For:	Election Cycle-to-Date	
Primary General Other (specify)	, 300.00	
Cure (specify)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Full Name (Last, First, Middle Initial) Alvarado Sam	uel.	Date of Receipt
Mailing Address		M 3 / 9 20 / 2
5476 B FM	State Zip Code	105 14 2012
Belton	7× 76513	
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer Self-Employed	Occupation	30000
Receipt For:	Election Cycle-to-Date	
Primary General Other (specify)	, ,30000	
Full Name (Last, First, Middle Initial) Mya Hi da		Date of Receipt
Mailing Address 541 Hot we		M. W. / D. D. / A. A. A. A.
34/ Hot We	Shake Tin Code	03 30 2012
San Antonio,	State Zip Code 7 x 78223	
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer	Occupation	200.00
Edgewood /SD Receipt For:	Election Cycle-to-Date	-
Primary General	Amministration of the management of the statement of the	}
Other (specify)	ing sa	
SUBTOTAL of Receipts This Page (optional)	8 80.00	
TOTAL This Period (last page this line number of	3	

SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 2 OF 2 (check only one)
Any information copied from such Reports and Sta or for commercial purposes, other than using the	atements mand and a	ay not be sold or used by any p ddress of any political committe	erson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MARIA UNSA ALL SUIL NAME (I CALL STATE MINISTER)	ALAI	DO FOR CONGR	2ESS
Full Name (Last, First, Middle Initial) Alvavado, Simo Mailing Address 1448 Private City San Antonio	n Road State		Date of Receipt O 3 / 0 9 / 2012
FEC ID number of contributing federal political committee. Name of Employer Retired	Occupation		Amount of Each Receipt this Period
Receipt For: Primary General Other (specify)	<u>'</u>	cle-to-Date	
Full Name (Last, First, Middle Initial) Mailing Address		V-	Date of Receipt
City	State	Zip Code	
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
Name of Employer Receipt For: Primary General Other (specify)	- }}	cle-to-Date	
Full Name (Last, First, Middle Initial)			Date of Receipt
Mailing Address City	State	Zip Code	M = M / [D = D] / [V = V = V = V]
EEC ID number of contributing	(C)	na ngawaga kapika garang karang Hi Shikasad kapi San San Labad Labad	Amount of Each Receipt this Period
Receipt For: Primary General Other (specify)	j)	cle-to-Date	
SUBTOTAL of Receipts This Page (optional)	50000		
TOTAL This Period (last page this lime number or	13.00.00		

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Surumary Page	FOR LINE NUMBER: PAGE OF 9 (check only one) 17
Any information copied from such Reports and Statements m or for commercial purposes, other than using the name and a		person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) MARIA LUISA ALVAR	<u> </u>	
Full Name (Last, First, Middle Initial) A. La Quint Mailing Address 11901 North City State Purpose of Disbursement Candidate Name Office Sought: House Senate President Disbursement Form Primary Other (s	Mopac Zip Code 787-59 g 007 Category/ Type :	Date of Disbursement Date of Disbursement Date of Date of Disbursement Date of D
State: District: Full Name (Last, First, Middle Initial) B.	Rd Zip Code 78238 Printing 006 Category/ Type General	
Full Name (Last, First, Middle Initial) C. Texas Democrat Mailing Address 505 West 12th State City State Zig	8 7 0 1 Category, Type General	in the contract that I may also had been a second as the s
SUBTOTAL of Disbursements This Page (optional)		3,310,61
TOTAL This Period (last page this line number only)		

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TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	17 18 19a 19b				
Any information copied from such Reports and Statements m		20a 20b 20c 21 person for the purpose of soliciting contributions				
or for nommercial purposes, ether than using the name and address of any political committee to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)						
MARIA LUISA ALV.	ARADO FOR	CONGRESS				
Full Name (Last, First, Middle Initial)		Date of Disbursement				
Cilantro Creatin	·	M-M / 10 10 / Y - Y - Y - Y - Y - Y - Y - Y - Y - Y				
Mailing Address 5739 Callaghan	Rd Ste 102D	12 23 2011				
San Antonio, Tx	Zip Code 78223	Amount of Each Disbursement this Period				
Purpose of Disbursement	77 - 377	,25500				
Candidate Name Web Design	C. T. T. L.	ا ز.				
	Category/ Type					
Office Sought: House Disbursement Formula Senate Primary	: General					
President Other (s.						
State: District: Full Name (Last, First, Middle Initial)						
		Date of Disbursement				
Mailing Address 52/3 Bandero State		72 28 2011				
5213 Bandera	z Rd	- Committee (State of the Committee of t				
San Antomio, Tx	Zip Code 7 8 2 3 8	Amount of Each Disbursement this Period				
Purpose of Disbursement						
Candidate Name Donation Envelope Candidate Name		2				
	Category/ Type					
Office Sought: House Disbursement Form	: General					
President Other (s	LJ					
State: District: Full Name (Last, First, Middle Initial)		+				
2. P! / A		Date of Disbursement				
Mailing Address Market Creative		77 19 6 13 7 7 2				
4230 Garden da	Le Bldg 601	2012				
	78229	Amount of Each Disbursement this Period				
Purpose of Disbursement	1 militarium	3.7.7.5.3				
Candidate Name Web Design						
	Category/ Type					
Office Sought: House Disbursement For Senate Primary	: General					
President Other (s	<u></u>					
State: District:		<u> </u>				
SUBTOTAL of Disbursements This Page (optional)		71362				
TOTAL This Pariod (last page this line number only)						

B.

C.

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

FOR LINE NUMBER: PAGE 3 OF 9 Use separate schedule(s) (check only one) for each category of the 417 19b Detailed Suramary Page 20a 21 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) ALVARADO FOR CONGRESS **Date of Disbursement** Faceboo Mailing Address Zip Code City Amount of Each Disbursement this Period Purpose of Disbursement 004 Candidate Name Category/ Type Office Sought: Disbursement For: House Senate **Primary** General President Other (specify) District: Full Name (Last, First, Middle Initial) Date of Disbursement Mailing Address tornia City Amount of Each Disbursement this Period Purpose of Disbursement Barana and a supplied to the supplied of the s Candidate Name Category/ Type Office Sought: House Disbursement For: Senate **Primary** General President Other (specify) State: District: Full Name (Last, First, Middle Initial) Date of Disbursement Mailing Address City Zip Code Amount of Each Disbursement this Period Purpose of Disbursement 0.0 Candidate Name Category/ Disbursement For: Office Sought: House Primary General Senate President Other (specify)

SUBTOTAL of Disbursements This Page (optional).....

District:

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State:

SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 40F 9 (check only one) 18 19a 19b 20a 20b 20c 21					
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 FUII) MARIA LIMSA ALVARA	um Em Coula	0 csc					
Full Name (Last, First, Middle Initial)	too FOR CONG						
. Bexar County Elections	;	Date of Disbursement					
Mailing Address 203 W. Nueva		02 15 20.12					
San Antonio, State	Zip Code 78207	Amount of Each Disbursement this Period					
Purpose of Disbursement Voter Data (035 001	300.0					
Candidate Name	Category/ Type						
Office Sought: House Senate Primary Other (s	General						
State: District: Full Name (Last, First, Middle Initial)		· · · · · · · · · · · · · · · · · · ·					
B. <u>beyon County Elect</u> Mailing Address 203 W. Nueva	Tons	Date of Disbursement					
City State	Zip Code						
San Antonio, Tx Purpose of Disbursement	78107	Amount of Each Disbursement this Period					
Candidate Name Primary Date	2010 001 Category/ Type	A STATE OF THE STA					
Office Sought: House Disbursement For	General						
Full Name (Last, First, Middle Initial)	· ••						
C. Bexar County Elect	10215	Date of Disbursement					
Mailing Address 203 W. Nuer	50-	02 06 2012					
San An torrib, Zi	p Code T _* 78207	Amount of Each Disbursement this Period					
Purpose of Disbursement Primary Dat Candidate Name	~ 2010 001	25.00					
	Category/ Type						
Office Sought: House Disbursement For Senate Primary Other (s	General						
State: District:	.	<u> </u>					
SUBTOTAL of Disbursements This Page (optional)		\$0.00					

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

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PAGE FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the 717 18 19a 19b Detailed Summary Page 20b 20c 21 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) Aluagado MARIA Full Name (Last, First, Middle Initial) Date of Disbursement max LD_CD_ Zip Code City State Amount of Each Disbursement this Period 78209 TV Purpose of Disbursement <u>څ د بو</u> <u>0,0</u> Candidate Name Category/ Type Disbursement For: Office Sought: House Senate Primary General President Other (specify) State: District: Full Name (Last, First, Middle Initial) Date of Disbursement LAUREL Mailing Address Zip Code Amount of Each Disbursement this Period フ8212 TZ Purpose of Disbursement <u>0.0,</u> Candidate Name Category/ Type Disbursement For: Office Sought: House Primary General Senate President Other (specify) State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Laupel Mailing Address Zip Code Amount of Each Disbursement this Period Purpose of Disbursement $O_{\cdot}O_{-\cdot}$ Candidate Name Category/ Type Disbursement For: Office Sought: House **Primary** General Senate President Other (specify) State: District: SUBTOTAL of Disbursements This Page (optional).....

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

	SCHEDULE B (FEC Form 3)		FOR LINE NUMBER: PAGE 6 OF 4
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	ITEMIZED DISBURSEMENTS	Detailed Summary Page	17 18 19a 19b 20a 20b 20c 21
	Any information copied from such Reports and Statements n	nay not be sold or used by any	
	or for nommercial purposes, other than using the name and		
	NAME OF COMMITTEE (In Full)		
	/ man = 1		
	Full Name (Last, First, Middle Initial)		
	• • •		Date of Disbursement
	Office Depot		الممممما ، [ممعا ، لمممما
	Mailing Address S. E. Militan, Da		0.2 0.8 2012
	City	Zip Code	Amount of Each Disbursement this Period
	SA ANDRIO TR Purpose of Disbursement	78223	1347
(I)	office lain-line	٥٥٠	
8	Candidate Name	Category	
Ň		Туре	<u>'</u>
Ó	Office Sought: House Disbursement For		
0	Senate Primary President Other (s		
M	State: District:	spoony,	
0	Full Name (Last, First, Middle Initial)		
	B. 1/2.		Date of Disbursement
	Mailing Address		
	3142 5.6. Military		
	City State	Zip Code	Amount of Each Disbursement this Period
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	Purpose of pisoursement		1,6,2,9
	Candidate Name	Category	
			· 1
		Туре	
	Office Sought: House Disbursement For	r:	
	Senate Primary	r: General	
		r: General	
	Senate Primary President Other (s	r: General	
	Senate Primary President Other (s	r: General	Date of Disbursement
	Senate President State: District: Full Name (Last, First, Middle Initial) C. Mailing Address	r: General	Date of Disbursement O 2 / 2012
	Senate President State: District: Full Name (Last, First, Middle Initial) C. Mailing Address 150 N. Ceoss Roads	r: General	
	Senate President President State: Full Name (Last, First, Middle Initial) C. Mailing Address City State State TX Primary Other (state) State TX	r: General specify)	
	State: District: Full Name (Last, First, Middle Initial) C. Office Depot Mailing Address City State Z Purpose of Disbursement	ip Code	
	Senate President President State: Full Name (Last, First, Middle Initial) C. Mailing Address City State State TX Primary Other (state) State TX	r: General specify) ip Code	Amount of Each Disbursement this Period

General

Disbursement For:

Primary

Other (specify)

Office Sought:

State:

House

Senate President

District:

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LI	NE NUMBE	R:	PAGE 7	OF	9
(check	only one)			_	
	17	18	19a] 191
	20a	20b	200	: Г	21

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) Date of Disbursement D_C_D 31 State Zip Code City Amount of Each Disbursement this Period 78223 Purpose of Disbursement <u>00</u>, Candidate Name Category/ Type Office Sought: Disbursement For: House Senate Primary General President Other (specify) State: District: Full Name (Last, First, Middle Initial) Date of Disbursement -- B. Zip Code Amount of Each Disbursement this Period 78227 6.0 Candidate Name Category/ Type Office Sought: Disbursement For: House Senate Primary General President Other (specify) State: District: Full Name (Last, First, Middle Initial) Date of Disbursement Constant Mailing Address Zip Code City State Amount of Each Disbursement this Period WALTLAM Purpose of Disbursement Candidate Name Category/ Office Sought: House Disbursement For: Senate **Primary** General Other (specify) President State: District: SUBTOTAL of Disbursements This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3)

Use separate schedule(s)

PAGE & OF FOR LINE NUMBER: (check only one)

ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	20a 20b 20c 21
Any information copied from such Reports and Statements n or for commercial purposes, other than using the name and	nay not be sold or used by any po address of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MARIA LUISA ALJARAD	for angles	5
A. CONSTANT CONTACT Mailing Address TRAPELD 2d. City State WAITAM Purpose of Disbursement Eman manketing Candidate Name Office Sought: House Disbursement Formany	Zip Code O 245 Category/ Type	Date of Disbursement Amount of Each Disbursement this Period
State: District: Full Name (Last, First, Middle Initial) B. Day Day Mailing Address 221 Nooth 15th 5theet	specify)	Date of Disbursement
City State State CA Purpose of Disbursement Account From Candidate Name Office Sought: House Disbursement Fo Senate Primary President State: District:	General	Amount of Each Disbursement this Period
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City State Z Purpose of Disbursement Account of Candidate Name Office Sought: House Disbursement Fo Senate Primary	ip Code 9 4 50) Category/ Type	Amount of Each Disbursement this Period
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FOR LINE NU	PAGE 6	OF 9	
(check only or	ne)		
17	18	19a	198
20a	20b	200	21

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An or	y information copied from such Reports and Statements m for commercial purposes, other than using the name and a	ay not be sold or used baddress of any political co	y any personmittee to	son for the purpo o salicit aontribu	ose of solic tions from	iting contrib such comm	utions ittee.
\rangle	NAME OF COMMITTEE (IN FUII) MARIA LIJSA ALVARI	Hon 130-	ر در	U60EC	c		
_	MARIA LUISA ALVARI Full Name (Last, First, Middle Initial)	TO POR		- 0 100 3	<u>, </u>		
A.	Piryx, Inc	10-		Date of Disbu	rsement	201	2
	Mailing Address 144 2nd Street, Fin City San Francis Co CA	St Plub V Zip Code		Amount of Ea	ch Disburs	ement this F	eriod
	San Francis Co CA Purpose of Disbursement	94501	Õl				45
	Candidate Name		tegory/				
	Office Sought: House Senate President State: Disbursement For Primary Other (s	General					
	Full Name (Last, First, Middle Initial)			·			
В.			Ì	Date of Disbu	rsement		
	Mailing Address			M M /	D / [Y
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	Purpose of Disbursement						
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C.	Full Name (Last, First, Middle Initial)			Date of Disbu			
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	Candidate Name	tegory/					
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_	State: District:						
S	SUBTOTAL of Disbursements This Page (optional)						
T	TOTAL This Period (last page this line number only)						

CHEDULE C (FEC	Form 3)		Use separate schedule for each category of the	FOR LINE NOWIDER.
OANS			Detailed Summary Pag	
NAME OF COMMITTEE (In Ful)			
MARIA LU	ISA ALVAR	Ada		
LOAN SOURCE Full Nam	e (Last, First, Middle Initial)	v	,	Election:
Aluarada	Santos			Primary General
Mailing Address				Other (specify)
City	State	ZIP Code		
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growing a company of the second secon	N 4		~ ~ ii ii	,,,,200.00
Date Incurre	2012		interest Rate	
	rantors (if any) to Loan So		·	
1. Full Name (Last, First, I	viiddle Initial)		lame of Employer	·
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SCHEDULE C (FEC LOANS	Form 3)	Use separate schedule(s) for each category of the Detailed Suramary Page FOR LINE NUMBER: (check only one) 13:
NAME OF COMMITTEE (In Fu	 (I)	
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	e (Last, First, Middle Initial)	Election:
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Mailing Address	TARIA C	General Other (specify) ▼
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135 Koe City San Anto	pio TX	78223
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List All Endorsers or Gua	rantors (if any) to Loan Source	
1. Full Name (Last, First,	Middle Initial)	Name of Employer
Mailing Address		Occupation
	*	Amount
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