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FEC

REPORT OF RECEIPTS AND DISBURSEMENTS

	Authorized C	ommittee	Offic	e Use Only
NAME OF TYPE OR PR COMMITTEE (in full)	IINT ▼	Example: If typing, type over the lines.	12FE4M5	
ELOISE GOMEZ REYES FOR C	ONGRESS			I
ADDRESS (number and street)	EY HILL RD			
Check if different				
than previously reported. (ACC)	RRACE		CA 9231	13
2. FEC IDENTIFICATION NUMBER ▼	CITY 4	A	STATE A	ZIP CODE ▲
C C00544809	3. IS THIS REPOR	~	AMENDED (A)	STATE ▼ DISTRICT CA 31
4. TYPE OF REPORT (Choose One)	(b) 10 Day 1	DDF Clastics Danset for the		
(a) Quarterly Reports:	(b) 12-Day I	PRE-Election Report for the:		
April 15 Quarterly Report (Q1)		Primary (12P)	General (12G)	Runoff (12R)
=		Convention (12C)	Special (12S)	
July 15 Quarterly Report (Q2)		M M / D D	/ Y Y Y Y	in the
October 15 Quarterly Report (Q3)	Election	on		State of
January 31 Year-End Report (YE)	(c) 30-Day I	POST-Election Report for the	e:	
	[General (30G)	Runoff (30R)	Special (30S)
Termination Report (TER)	Election	on M M / D D	/ Y Y Y Y	in the State of
5. Covering Period 10 / 01	/ Y Y Y Y Y Y 2017	through 12	M / D D / Y	Y Y Y Z017
I certify that I have examined this Report and Smith. Will	I to the best of m	y knowledge and belief it is	true, correct and cor	nplete.
Type or Print Name of Treasurer	, ,, =			
Smith, William, P,, C	CPA	[Electronically Filed]	Date 01 /	31 / Y Y Y Y Y 2018
NOTE: Submission of false, erroneous, or incom	plete information n	nay subject the person signing	g this Report to the pe	enalties of 52 U.S.C. §30109
Office Use Only				FEC FORM 3 (Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

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Write or Type Committee Name

ELOISE GOMEZ REYES FOR CONGRESS

2017 10 2017 12 01 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 0.00 0.00 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) (c) Net Contributions (other than loans) 0.00 0.00 (subtract Line 6(b) from Line 6(a)) 7. Net Operating Expenditures (a) Total Operating Expenditures 0.00 37.90 (from Line 17) (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 37.90 0.00 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 1436.41 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 119061.15 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

DETAILED SUMMARY PAGE

of Receipts

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Write or Type Committee Name

ELOISE GOMEZ REYES FOR CONGRESS

10 2017 12 31 2017 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
((b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) The Candidate(e) 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 AUTHORIZED COMMITTEES	0.00	0.00
3.	LOANS:		
•	(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
	OFFSETS TO OPERATING		
	EXPENDITURES Refunds, Rebates, etc.)	0.00	0.00
	OTHER RECEIPTS Dividends, Interest, etc.)	0.00	0.00
	TOTAL RECEIPTS (add Lines 11(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 SU	JMMARY	
23.	CASH ON HAND AT BEGINNING OF REPO	1436.41	
24	TOTAL RECEIPTS THIS PERIOD (from Line	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	G PERIOD	1436.41

SCHEDULE C (FEC Form 3) **LOANS**

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

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

X 13a 13b

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 FOR LINE NUMBER: (check only one)

x 13a 13b

LOISE GOMEZ RET LOAN SOURCE Full Nan REYES, ELOISE G	me (Last, First, Mic		☐ Memo Item	Election: 214 x Primary	
Mailing Address 1190 Honey Hill Dr				General Other (specify) ▼	
City		State	ZIP Code		
Grand Terrace		CA	92313	Personal Funds of the Candidate	
Original Amount of Loan		Cumulative Pa	nent To Date Bal	ance Outstanding at Close of This Period	
	8000.00	,	0.00	8000.00	
TERMS Date Incur	rred		te Due Interest Rat		
M08 ^M / D26 ^D /	^Y Ž014 ^Y	M M / D D	` '	.00 % (apr) Yes X No	
List All Endorsers or Gu	uarantors (if any) to	o Loan Source			
1. Full Name (Last, First,	, Middle Initial)		Name of Employer		
Mailing Address			Occupation		
City	State	ZIP Code Amount Guaranteed Outstanding:		9 9	
2. Full Name (Last, First, Middle Initial)			Name of Employer	Name of Employer	
Mailing Address			Occupation		
			Amount Guaranteed		
City	State	ZIP Code	Outstanding:		
3. Full Name (Last, First,	Middle Initial)	•	Name of Employer		
Mailing Address			Occupation		
	T	T	Amount Guaranteed		
City	State	ZIP Code	Outstanding:	g	
4. Full Name (Last, First,	Middle Initial)	•	Name of Employer		
Mailing Address			Occupation		
	La	T	Amount		
City	State	ZIP Code	Guaranteed Outstanding:	9 9 9 9	
			_		
JBTOTALS This Period Th	nis Page (optional)		······	8000.00	

SCHEDULE D (FEC Form 3) **DEBTS AND OBLIGATIONS**

Excluding Loans

NAME OF COMMITTEE (In Full)

(Use separate schedule(s) for each numbered line)

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

	9
x	10

ELOISE GOMEZ RE	1 E 2	FOR CONGRE	55
A. Full Name (Last, First, Middle Initial) of Discrete 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		Payment This Period	Outstanding Balance at Close of This Period
0.00		0.00	456.00
B. Full Name (Last, First, Middle Initial) of De The New Media Firm	ebtor or Cre	ditor	Nature of Debt (Purpose): Media Consulting, 2014 Primary - Dispute
Mailing Address 1730 Rhode Island Ave NW Ste 213	1		
City Washington	State DC	Zip Code 20036-3118	
Outstanding Balance Beginning This Period	d		Transaction ID : SD10.4110
10605.15			
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 D	ebtor or Cre	editor	Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	
Outstanding Balance Beginning This Period	d		
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
		9 9 9	
SUBTOTALS This Period This Page (options	al)		11061.15
TOTALS This Period (last page this line nur	mber only) ···		11061.15
TOTAL OUTSTANDING LOANS from Sched	dule C (last	page only)	108000.00
ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)			_