

**FEC FORM 3**

**REPORT OF RECEIPTS AND DISBURSEMENTS**  
For An Authorized Committee

RECEIVED  
FEC MAIL CENTER  
2016 FEB 8 AM 7:39  
Office Use Only

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

**RUBEN RAMIREZ HINOJOSA FOR CONGRESS**

ADDRESS (number and street) **5415 N. McColl Rd.**

Check if different than previously reported. (ACC)

**MCALLEN** CITY ▲ **TX** STATE ▲ **78504** ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER** ▼ **00506675**

3. IS THIS REPORT  **NEW (N)** OR  **AMENDED (A)**

STATE ▼ DISTRICT **TX** **115**

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  M M /  D D /  Y Y Y Y in the State of

(c) 30-Day **POST**-Election Report for the:

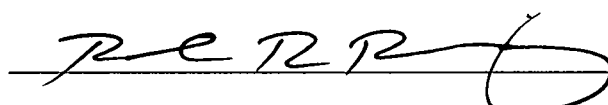
General (30G)  Runoff (30R)  Special (30S)

Election on  M M /  D D /  Y Y Y Y in the State of

5. Covering Period **01 01 2015** through **02 31 2015**

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 **RUBEN RAMIREZ**

Signature of Treasurer  Date **01 30 2016**

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

RUBEN RAMIREZ HINOJOSA FOR CONGRESS

Report Covering the Period: From: 

M	M
0	1

 / 

D	D
0	1

 / 

Y	Y	Y	Y
2	0	1	5

 To: 

M	M
1	2

 / 

D	D
9	1

 / 

Y	Y	Y	Y
2	0	1	5

	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)) ....	4,820.32	4,820.32
(b) Total Contribution Refunds (from Line 20(d)) .....		
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	4,820.32	4,820.32
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	3,820.32	3,820.32
(b) Total Offsets to Operating Expenditures (from Line 14) .....		
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	3,820.32	3,820.32
8. Cash on Hand at Close of Reporting Period (from Line 27) .....	1,000.00	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....		
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

# DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

Ruben RAMIREZ Hinojosa For Congress

Report Covering the Period: From:

M M / D D / Y Y Y Y  
0 1 / 0 1 / 2 0 1 5

To:

M M / D D / Y Y Y Y  
1 2 / 3 1 / 2 0 1 5

## 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) .....
  - (ii) Unitemized .....
  - (iii) TOTAL of contributions from individuals ▶
- (b) Political Party Committees.....
- (c) Other Political Committees (such as PACs).....
- (d) The Candidate .....
- (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

1,000.00

1,000.00

3,820.32

4,820.32

1,000.00

1,000.00

3,820.32

4,820.32

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....

13. LOANS:

- (a) Made or Guaranteed by the Candidate.....
- (b) All Other Loans.....
- (c) TOTAL LOANS (add Lines 13(a) and (b)).....

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)..... ▶

4,820.32

4,820.32

**DETAILED SUMMARY PAGE**  
of Disbursements

**II. DISBURSEMENTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	3,820.32	3,820.32
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.....		
(c) Other Political Committees (such as PACs).....		
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....		
21. OTHER DISBURSEMENTS .....		
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	3,820.32	3,820.32

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	3,820.32
25. SUBTOTAL (add Line 23 and Line 24).....	3,820.32
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	3,820.32
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1,000.00

**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)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

PAGE 1 OF 1

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)  
**Ruben RAMIREZ For CONGRESS**

A. Full Name (Last, First, Middle Initial)  
**JAMES STAFFORD**

Mailing Address  
**515 CAROLINE ST.**

City **HOUSTON** State **TX** Zip Code **77004**

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

Name of Employer **SELF** Occupation **ATTORNEY**

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1,000.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**12 / 15 / 2015**

Amount of Each Receipt this Period  
**1,000.00**

B. 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

Amount of Each Receipt this Period

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

Amount of Each Receipt this Period

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

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

**1,000.00**

**1,000.00**

NON-FEDERAL CAMPAIGN CONTRIBUTION

**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)

<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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PAGE 1 OF 4

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NAME OF COMMITTEE (In Full)  
**RUBEN RAMIREZ HINOJOSA FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Print Fly Corporation.**

Mailing Address  
**2727 COMMERCE WAY**

City **Philadelphia** State **PA** Zip Code **19154**

Purpose of Disbursement  
**Advertising Expense - SHIRTS**

Candidate Name  
**Ruben RAMIREZ HINOJOSA**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: **TX** District: **15**

Date of Disbursement  
**12 / 10 / 2015**

Amount of Each Disbursement this Period  
**393.50**

Category/Type  
**004**

Full Name (Last, First, Middle Initial)

**B. Facebook, Inc**

Mailing Address  
**1601 Willow Rd.**

City **Menlo Park** State **CA** Zip Code **94025-1452**

Purpose of Disbursement  
**Advertising Expense**

Candidate Name  
**Ruben RAMIREZ HINOJOSA**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: **TX** District: **15**

Date of Disbursement  
**12 / 31 / 2015**

Amount of Each Disbursement this Period  
**50.10**

Category/Type  
**004**

Full Name (Last, First, Middle Initial)

**C. Facebook Inc**

Mailing Address  
**1601 Willow Rd.**

City **Menlo Park** State **CA** Zip Code **94025-1452**

Purpose of Disbursement  
**Advertising Expense**

Candidate Name  
**Ruben RAMIREZ HINOJOSA**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: **TX** District: **15**

Date of Disbursement  
**12 / 26 / 2015**

Amount of Each Disbursement this Period  
**50.00**

Category/Type  
**004**

**SUBTOTAL** of Disbursements This Page (optional) ..... **493.60**

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

2010 RELEASE UNDER E.O. 13526

**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)			
	<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)  
**Ruben RAMIREZ HINOJOSA FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>Ruben RAMIREZ HINOJOSA</b>		Date of Disbursement M M / D D / Y Y Y Y <b>12 21 2015</b>	
A. <b>Facebook, INC</b> Mailing Address <b>1601 Willow Rd.</b>		Amount of Each Disbursement this Period  <b>25.20</b>	
City <b>MENLO PARK</b>	State <b>CA</b>		Zip Code <b>94025-1452</b>
Purpose of Disbursement <b>Advertising Expense</b>			Category/ Type <b>004</b>
Candidate Name <b>Ruben RAMIREZ HINOJOSA</b>			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: <b>TX</b> District: <b>15</b>			

Full Name (Last, First, Middle Initial) <b>Ruben RAMIREZ HINOJOSA</b>		Date of Disbursement M M / D D / Y Y Y Y <b>12 12 2015</b>	
B. <b>FAT Cow</b> Mailing Address <b>10 CORPORATE DR Suite 300</b>		Amount of Each Disbursement this Period  <b>129.27</b>	
City <b>BURLINGTON</b>	State <b>MA</b>		Zip Code <b>01803</b>
Purpose of Disbursement <b>Advertising Expense</b>			Category/ Type <b>004</b>
Candidate Name <b>Ruben RAMIREZ HINOJOSA</b>			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: <b>TX</b> District: <b>15</b>			

Full Name (Last, First, Middle Initial)		Date of Disbursement M M / D D / Y Y Y Y	
C. Mailing Address		Amount of Each Disbursement this Period	
City	State		Zip Code
Purpose of Disbursement			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>154.47</b>
<b>TOTAL</b> This Period (last page this line number only).....	

2015-01-08 10:00:00 AM

**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)			
	<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)  
Ruben Ramirez Hinojosa For Congress

Full Name (Last, First, Middle Initial) <u>Ruben Ramirez Hinojosa For Congress</u>			Date of Disbursement M M / D D / Y Y Y Y <u>12 / 14 / 2015</u>
A. <u>TEXAS Democratic Party</u> Mailing Address <u>PO Box 116</u>			Amount of Each Disbursement this Period  <u>3,125.00</u>
City <u>Austin</u>	State <u>TX</u>	Zip Code <u>78767</u>	
Purpose of Disbursement <u>Filing Fee</u>		Category/ Type <u>001</u>	
Candidate Name <u>Ruben RAMIREZ HINOJOSA</u>			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: <u>TX</u> District: <u>15</u>			

Full Name (Last, First, Middle Initial) B.			Date of Disbursement M M / D D / Y Y Y Y
Mailing Address			Amount of Each Disbursement this Period
City	State	Zip Code	
Purpose of Disbursement		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y
Mailing Address			Amount of Each Disbursement this Period
City	State	Zip Code	
Purpose of Disbursement		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<u>3,125.00</u>
<b>TOTAL</b> This Period (last page this line number only).....	

20150108 10:00 AM



**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)			
	<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)  
Ruben RAMIREZ HINOJOSA FOR CONGRESS

**A.** STAR STOP

Mailing Address: 2212 HWY 71 S.

City: Columbus State: TX Zip Code: 78934

Purpose of Disbursement: TRAVEL EXPENSE - GAS

Candidate Name: Ruben RAMIREZ HINOJOSA

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: TX District: 15

Date of Disbursement: 12/24/2015

Amount of Each Disbursement this Period: 25.25

Category/Type: 002

**B.** STAR STOP

Mailing Address: 2111 Southmore

City: Houston State: TX Zip Code: 77004

Purpose of Disbursement: TRAVEL EXPENSE - GAS

Candidate Name: Ruben RAMIREZ HINOJOSA

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: TX District: 15

Date of Disbursement: 12/15/2015

Amount of Each Disbursement this Period: 22.00

Category/Type: 002

**C.**

Mailing Address:

City: State: Zip Code:

Purpose of Disbursement:

Candidate Name:

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement:

Amount of Each Disbursement this Period:

Category/Type:

**SUBTOTAL** of Disbursements This Page (optional) ..... 47.25

**TOTAL** This Period (last page this line number only) ..... 3,820.32

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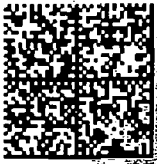
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