

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
The Reyes Committee, Inc.

ADDRESS (number and street) 1011 Montana Ave
 Check if different than previously reported. (ACC)
El Paso TX 79902

2. **FEC IDENTIFICATION NUMBER** C00309237
CITY **STATE** **ZIP CODE**
STATE DISTRICT TX 16
3. IS THIS REPORT NEW (N) OR AMENDED (A)

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 _____ in the State of _____
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 11 25 2008 through 12 31 2008

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 Ronald E. Pate

Signature of Treasurer Electronically Filed by Ronald E. Pate Date 04 14 2009

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

The Reyes Committee, Inc.

Report Covering the Period:

From:

M	M
1	1

D	D
2	5

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	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)).....	2550.00	6925.00
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	2550.00	6925.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	35335.62	61291.82
(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)).....	35335.62	61291.82
8. Cash on Hand at Close of Reporting Period (from Line 27).....	39281.15	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY 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

Write or Type Committee Name
The Reyes Committee, Inc.

Report Covering the Period: From:

M	M
1	1

D	D
2	5

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	8

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).....

250.00

4325.00

(ii) Unitemized.....

0.00

300.00

(iii) TOTAL of contributions

250.00

4625.00

from individuals..... ▶

0.00

0.00

(b) Political Party Committees.....

(c) Other Political Committees (such as PACS).....

2300.00

2300.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))

2550.00

6925.00

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

0.00

0.00

13. 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

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....

0.00

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc.).....

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

2550.00

6925.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	35335.62	61291.82
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.....	19664.83	26324.46
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	55000.45	87616.28

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	91731.60
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	2550.00
25. SUBTOTAL (add Line 23 and Line 24).....	94281.60
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	55000.45
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	39281.15

CONSOLIDATED REPORT OF GROSS RECEIPTS FOR AUTHORIZED COMMITTEES (11 CFR 104.19)
(Millionaires' Amendment)

Name of Candidate		Candidate ID Number	
Silvestre Reyes		H6TX00115	
Name of Principal Campaign Committee		Committee ID Number	
The Reyes Committee, Inc.		C C00309237	
Committee Address			
1011 Montana Ave			
City	State	ZIP	
El Paso	TX	79902-	
Report Covering Period (check one) <input type="checkbox"/> through June 30, or <input checked="" type="checkbox"/> through December 31 of the year preceding the year of the general election			
	Primary	General	
1. Gross receipts of authorized committees	6475.00	0.00	
2. Aggregate amount of contributions from personal funds of the candidate	0.00	0.00	
3. Gross receipts minus the candidate's personal contributions	6475.00	0.00	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 6 / 57	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 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) The Reyes Committee, Inc.

A.	Full Name (Last, First, Middle Initial) HeartPlace Federal Pac		Date of Receipt
	Mailing Address 14800 Landmark Blvd		<input type="text" value="12"/> / <input type="text" value="05"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Dallas	TX	75254
	FEC ID number of contributing federal political committee.		<input type="text" value="C00430124"/>
	Name of Employer		Occupation
Receipt For: 2010		Election Cycle-to-Date ▼	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="2300.00"/>	
<input type="checkbox"/> Other (specify) ▼			
			Transaction ID: 90128.C10061
			Amount of Each Receipt this Period
			<input type="text" value="2300.00"/>
			Receipt
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="2300.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="2300.00"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 57	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
The Reyes Committee, Inc.

A.

Full Name (Last, First, Middle Initial) Gilbert Tijerina		Date of Receipt
Mailing Address 3318 Craigo Avenue		<input type="text" value="12"/> / <input type="text" value="29"/> / <input type="text" value="2008"/>
City	State	Zip Code
El Paso	TX	79904
FEC ID number of contributing federal political committee.		Transaction ID: 90128.C10062
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer First Light Federal Credit Uni	Occupation Board member	Receipt
Receipt For: 2010	Election Cycle-to-Date ▼	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="250.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="250.00"/>

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)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
The Reyes Committee, Inc.

A.

Full Name (Last, First, Middle Initial)
Bank of the West

Mailing Address 500 N. Mesa

City El Paso State TX Zip Code 79901-

Purpose of Disbursement
-bank charges
Candidate Name

001
Category/
Type

Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify) ▼

Transaction ID: 90128.E7135
Date of Disbursement

11 / 28 / 2008

Amount of Each Disbursement this Period

172.55

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

-BANK CHARGES

B.

Full Name (Last, First, Middle Initial)
Bank of the West

Mailing Address 500 N. Mesa

City El Paso State TX Zip Code 79901-

Purpose of Disbursement
-bank charges
Candidate Name

001
Category/
Type

Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify) ▼

Transaction ID: 90128.E7266
Date of Disbursement

12 / 31 / 2008

Amount of Each Disbursement this Period

149.59

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

-BANK CHARGES

C.

Full Name (Last, First, Middle Initial)
Christ Chavez Photographer

Mailing Address 1002 Arizona #1

City El Paso State TX Zip Code 79902-

Purpose of Disbursement
-prints
Candidate Name

001
Category/
Type

Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify) ▼

Transaction ID: 90128.E7101
Date of Disbursement

12 / 23 / 2008

Amount of Each Disbursement this Period

539.12

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

-PRINTS

SUBTOTAL of Disbursements This Page (optional)

861.26

TOTAL 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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Reyes Committee, Inc.

A.	Full Name (Last, First, Middle Initial) Veronica Cintron	Transaction ID: 90128.E7105 Date of Disbursement 12 / 10 / 2008
	Mailing Address 651 Jeanny Marie Court	Amount of Each Disbursement this Period 236.84
	City El Paso State TX Zip Code 79932-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement -see below holiday wine bags Candidate Name	003 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		-SEE BELOW HOLIDAY WINE BAGS

B.	Full Name (Last, First, Middle Initial) Paper Mart	Transaction ID: 90128.E7121 Date of Disbursement 12 / 10 / 2008
	Mailing Address 5361 Alexander Street	Amount of Each Disbursement this Period 236.84
	City Los Angeles State CA Zip Code 90040-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement -holiday wine bags Candidate Name	003 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] MEMO: -HOLIDAY WINE BAGS

C.	Full Name (Last, First, Middle Initial) Veronica Cintron	Transaction ID: 90128.E7084 Date of Disbursement 12 / 10 / 2008
	Mailing Address 651 Jeanny Marie Court	Amount of Each Disbursement this Period 92.62
	City El Paso State TX Zip Code 79932-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement -see below gasoline < \$50 each Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		-SEE BELOW GASOLINE < \$50 EACH

SUBTOTAL of Disbursements This Page (optional)	▶	329.46
TOTAL 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)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
The Reyes Committee, Inc.

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Sams Club</p> <p>Mailing Address 7970 N. Mesa</p> <p>City El Paso State TX Zip Code 79932-</p> <p>Purpose of Disbursement -gasoline < \$50 each</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90128.E7118</p> <p>Date of Disbursement 12 / 10 / 2008</p> <p>Amount of Each Disbursement this Period 92.62</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] MEMO: -GASOLINE < \$50 EACH</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Veronica Cintron</p> <p>Mailing Address 651 Jeanny Marie Court</p> <p>City El Paso State TX Zip Code 79932-</p> <p>Purpose of Disbursement -see below campaign event food</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90128.E7109</p> <p>Date of Disbursement 12 / 10 / 2008</p> <p>Amount of Each Disbursement this Period 213.94</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>-SEE BELOW CAMPAIGN EVENT FOOD</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Sams Club</p> <p>Mailing Address 7970 N. Mesa</p> <p>City El Paso State TX Zip Code 79932-</p> <p>Purpose of Disbursement -campaign event food</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90128.E7125</p> <p>Date of Disbursement 12 / 10 / 2008</p> <p>Amount of Each Disbursement this Period 213.94</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] MEMO: -CAMPAIGN EVENT FOOD</p>

SUBTOTAL of Disbursements This Page (optional) ▶

213.94

TOTAL 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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Reyes Committee, Inc.

A. Full Name (Last, First, Middle Initial) Veronica Cintron <hr/> Mailing Address 651 Jeanny Marie Court <hr/> City El Paso State TX Zip Code 79932- <hr/> Purpose of Disbursement -see below office supplies phot Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90128.E7103 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 0 / 2 0 0 8
	Amount of Each Disbursement this Period 102.89
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	-SEE BELOW OFFICE SUPPLIES PHOT
	Category/ Type 001

B. Full Name (Last, First, Middle Initial) Sams Club <hr/> Mailing Address 7970 N. Mesa <hr/> City El Paso State TX Zip Code 79932- <hr/> Purpose of Disbursement -office supplies photos Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90128.E7119 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 0 / 2 0 0 8
	Amount of Each Disbursement this Period 102.89
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	[MEMO ITEM] MEMO: -OFFICE SUPPLIES PH- OTOS
	Category/ Type 001

C. Full Name (Last, First, Middle Initial) Veronica Cintron <hr/> Mailing Address 651 Jeanny Marie Court <hr/> City El Paso State TX Zip Code 79932- <hr/> Purpose of Disbursement -see below postage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90128.E7113 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 0 / 2 0 0 8
	Amount of Each Disbursement this Period 182.48
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	-SEE BELOW POSTAGE
	Category/ Type 001

SUBTOTAL of Disbursements This Page (optional) ▶

285.37

TOTAL 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)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
The Reyes Committee, Inc.

A.	Full Name (Last, First, Middle Initial) U.S. Postal Service	Transaction ID: 90128.E7129
	Mailing Address U.S. Postal Service 5300 E. Paisano	Date of Disbursement MM / DD / YYYY 12 / 10 / 2008
	City EL PASO	State TX
	Zip Code 79910-	Amount of Each Disbursement this Period 182.48
	Purpose of Disbursement -postage	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	001 Category/ Type
	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:	[MEMO ITEM] MEMO: -POSTAGE

B.	Full Name (Last, First, Middle Initial) Veronica Cintron	Transaction ID: 90128.E7116
	Mailing Address 651 Jeanny Marie Court	Date of Disbursement MM / DD / YYYY 12 / 10 / 2008
	City El Paso	State TX
	Zip Code 79932-	Amount of Each Disbursement this Period 454.65
	Purpose of Disbursement -see below campaign gifts	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	003 Category/ Type
	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:	-SEE BELOW CAMPAIGN GIFTS

C.	Full Name (Last, First, Middle Initial) Ramirez Pecan Farms	Transaction ID: 90128.E7132
	Mailing Address 13709 North Loop	Date of Disbursement MM / DD / YYYY 12 / 10 / 2008
	City Clint	State TX
	Zip Code 79836-	Amount of Each Disbursement this Period 454.65
	Purpose of Disbursement -campaign gifts	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	003 Category/ Type
	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:	[MEMO ITEM] MEMO: -CAMPAIGN GIFTS

SUBTOTAL of Disbursements This Page (optional)	▶	454.65
TOTAL 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)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
The Reyes Committee, Inc.

A.	Full Name (Last, First, Middle Initial) Veronica Cintron	Transaction ID: 90128.E7114
	Mailing Address 651 Jeanny Marie Court	Date of Disbursement MM / DD / YYYY 12 / 10 / 2008
	City El Paso State TX Zip Code 79932-	Amount of Each Disbursement this Period 11.81
	Purpose of Disbursement -see below shipping Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type: 001
		-SEE BELOW SHIPPING

B.	Full Name (Last, First, Middle Initial) Veronica Cintron	Transaction ID: 90128.E7108
	Mailing Address 651 Jeanny Marie Court	Date of Disbursement MM / DD / YYYY 12 / 10 / 2008
	City El Paso State TX Zip Code 79932-	Amount of Each Disbursement this Period 44.80
	Purpose of Disbursement -see below gasoline Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type: 001
		-SEE BELOW GASOLINE

C.	Full Name (Last, First, Middle Initial) Diamond Shamrock	Transaction ID: 90128.E7124
	Mailing Address 1959 Montana	Date of Disbursement MM / DD / YYYY 12 / 10 / 2008
	City El Paso State TX Zip Code 79902-	Amount of Each Disbursement this Period 44.80
	Purpose of Disbursement -gasoline Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type: 001
		[MEMO ITEM] MEMO: -GASOLINE

SUBTOTAL of Disbursements This Page (optional)	56.61
TOTAL 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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Reyes Committee, Inc.

A.

Full Name (Last, First, Middle Initial)
Veronica Cintron

Mailing Address 651 Jeanny Marie Court

City El Paso State TX Zip Code 79932-

Purpose of Disbursement
-see below campaign event food

Candidate Name

003
Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: 90128.E7112
Date of Disbursement

12 / 10 / 2008

Amount of Each Disbursement this Period

32.65

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

-SEE BELOW CAMPAIGN EVENT FOOD

B.

Full Name (Last, First, Middle Initial)
Costco Wholesale

Mailing Address 6000 Gateway West

City El Paso State TX Zip Code 79925-

Purpose of Disbursement
-campaign event food

Candidate Name

003
Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: 90128.E7128
Date of Disbursement

12 / 10 / 2008

Amount of Each Disbursement this Period

32.65

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
MEMO: -CAMPAIGN EVENT FOOD

C.

Full Name (Last, First, Middle Initial)
Veronica Cintron

Mailing Address 651 Jeanny Marie Court

City El Paso State TX Zip Code 79932-

Purpose of Disbursement
-see below campaign event food

Candidate Name

003
Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: 90128.E7110
Date of Disbursement

12 / 10 / 2008

Amount of Each Disbursement this Period

152.65

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

-SEE BELOW CAMPAIGN EVENT FOOD

SUBTOTAL of Disbursements This Page (optional) ▶

185.30

TOTAL 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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Reyes Committee, Inc.

<p>A. Full Name (Last, First, Middle Initial) Veronica Cintron</p> <p>Mailing Address 651 Jeanny Marie Court</p> <p>City El Paso State TX Zip Code 79932-</p> <p>Purpose of Disbursement -see below campaign meeting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90128.E7115</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="164.71"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>-SEE BELOW CAMPAIGN MEETING</p>
<p>B. Full Name (Last, First, Middle Initial) Veronica Cintron</p> <p>Mailing Address 651 Jeanny Marie Court</p> <p>City El Paso State TX Zip Code 79932-</p> <p>Purpose of Disbursement -see below paper and envelopes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90128.E7104</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="94.69"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>-SEE BELOW PAPER AND ENVELOPES</p>
<p>C. Full Name (Last, First, Middle Initial) Xpedx</p> <p>Mailing Address 6800 Gateway Blvd East, Suite 3D</p> <p>City El Paso State TX Zip Code 79915-</p> <p>Purpose of Disbursement -paper and envelopes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90128.E7120</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="94.69"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] MEMO: -PAPER AND ENVELOPES</p>

SUBTOTAL of Disbursements This Page (optional) ▶

TOTAL 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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Reyes Committee, Inc.

A.	Full Name (Last, First, Middle Initial) Veronica Cintron	Transaction ID: 90128.E7117 Date of Disbursement 12 / 10 / 2008
	Mailing Address 651 Jeanny Marie Court	Amount of Each Disbursement this Period 28.30
	City El Paso State TX Zip Code 79932-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement -see below campaign meal Candidate Name	003 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		-SEE BELOW CAMPAIGN MEAL

B.	Full Name (Last, First, Middle Initial) Veronica Cintron	Transaction ID: 90128.E7111 Date of Disbursement 12 / 10 / 2008
	Mailing Address 651 Jeanny Marie Court	Amount of Each Disbursement this Period 141.57
	City El Paso State TX Zip Code 79932-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement -see below campaign event food Candidate Name	003 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		-SEE BELOW CAMPAIGN EVENT FOOD

C.	Full Name (Last, First, Middle Initial) Tamales Lupita	Transaction ID: 90128.E7127 Date of Disbursement 12 / 10 / 2008
	Mailing Address 6860 Doniphan	Amount of Each Disbursement this Period 141.57
	City El Paso State TX Zip Code 79935-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement -campaign event food Candidate Name	003 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] MEMO: -CAMPAIGN EVENT FOOD

SUBTOTAL of Disbursements This Page (optional)	▶	169.87
TOTAL 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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Reyes Committee, Inc.

A.	Full Name (Last, First, Middle Initial) Veronica Cintron	Transaction ID: 90128.E7087 Date of Disbursement 12 / 17 / 2008
	Mailing Address 651 Jeanny Marie Court	Amount of Each Disbursement this Period 34.11
	City El Paso State TX Zip Code 79932-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement -see below gasoline Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		-SEE BELOW GASOLINE

B.	Full Name (Last, First, Middle Initial) Sams Club	Transaction ID: 90128.E7142 Date of Disbursement 12 / 17 / 2008
	Mailing Address 7970 N. Mesa	Amount of Each Disbursement this Period 34.11
	City El Paso State TX Zip Code 79932-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement -gasoline Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] MEMO: -GASOLINE

C.	Full Name (Last, First, Middle Initial) Veronica Cintron	Transaction ID: 90128.E7140 Date of Disbursement 12 / 17 / 2008
	Mailing Address 651 Jeanny Marie Court	Amount of Each Disbursement this Period 35.75
	City El Paso State TX Zip Code 79932-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement -see below toll road charges Candidate Name	002 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		-SEE BELOW TOLL ROAD CHAR- GES

SUBTOTAL of Disbursements This Page (optional)	69.86
TOTAL 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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Reyes Committee, Inc.

A.	Full Name (Last, First, Middle Initial) Veronica Cintron	Transaction ID: 90128.E7137 Date of Disbursement 12 / 17 / 2008
	Mailing Address 651 Jeanny Marie Court	Amount of Each Disbursement this Period 71.91
	City El Paso State TX Zip Code 79932-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement -see below staff holiday dinner Candidate Name	003 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		-SEE BELOW STAFF HOLIDAY DINNER

B.	Full Name (Last, First, Middle Initial) Sams Club	Transaction ID: 90128.E7144 Date of Disbursement 12 / 17 / 2008
	Mailing Address 7970 N. Mesa	Amount of Each Disbursement this Period 71.91
	City El Paso State TX Zip Code 79932-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement -staff holiday dinner Candidate Name	003 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] MEMO: -STAFF HOLIDAY DINN-ER

C.	Full Name (Last, First, Middle Initial) Veronica Cintron	Transaction ID: 90128.E7138 Date of Disbursement 12 / 17 / 2008
	Mailing Address 651 Jeanny Marie Court	Amount of Each Disbursement this Period 49.53
	City El Paso State TX Zip Code 79932-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement -see below postage Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		-SEE BELOW POSTAGE

SUBTOTAL of Disbursements This Page (optional)	▶	121.44
TOTAL 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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Reyes Committee, Inc.

A.	Full Name (Last, First, Middle Initial) U.S. Postal Service	Transaction ID: 90128.E7145 Date of Disbursement
	Mailing Address U.S. Postal Service 5300 E. Paisano	<input type="text" value="12"/> <input type="text" value="17"/> <input type="text" value="2008"/>
	City EL PASO State TX Zip Code 79910-	Amount of Each Disbursement this Period
	Purpose of Disbursement -postage	<input type="text" value="49.53"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM] MEMO: -POSTAGE
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Veronica Cintron	Transaction ID: 90128.E7136 Date of Disbursement
	Mailing Address 651 Jeanny Marie Court	<input type="text" value="12"/> <input type="text" value="17"/> <input type="text" value="2008"/>
	City El Paso State TX Zip Code 79932-	Amount of Each Disbursement this Period
	Purpose of Disbursement -see below staff holiday dinner	<input type="text" value="446.24"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	-SEE BELOW STAFF HOLIDAY DINNER
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Cappettos Italian Restaurant	Transaction ID: 90128.E7143 Date of Disbursement
	Mailing Address 2716 Montana	<input type="text" value="12"/> <input type="text" value="17"/> <input type="text" value="2008"/>
	City El Paso State TX Zip Code 79902-	Amount of Each Disbursement this Period
	Purpose of Disbursement -staff holiday dinner	<input type="text" value="446.24"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM] MEMO: -STAFF HOLIDAY DINN-ER
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="446.24"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Reyes Committee, Inc.

A.

Full Name (Last, First, Middle Initial)
Veronica Cintron

Mailing Address 651 Jeanny Marie Court

City El Paso State TX Zip Code 79932-

Purpose of Disbursement
-see below fax internet service

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: 90128.E7141
Date of Disbursement

12 / 17 / 2008

Amount of Each Disbursement this Period

73.29

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

-SEE BELOW FAX INTERNET SERVICE

B.

Full Name (Last, First, Middle Initial)
AT&T

Mailing Address PO Box 78522

City Phoenix State AZ Zip Code 85062-8522

Purpose of Disbursement
-internet fax line service

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: 90128.E7148
Date of Disbursement

12 / 17 / 2008

Amount of Each Disbursement this Period

73.29

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
MEMO: -INTERNET FAX LINE SERVICE

C.

Full Name (Last, First, Middle Initial)
Veronica Cintron

Mailing Address 651 Jeanny Marie Court

City El Paso State TX Zip Code 79932-

Purpose of Disbursement
-see below holiday gift supplies

Candidate Name

003
Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: 90128.E7139
Date of Disbursement

12 / 17 / 2008

Amount of Each Disbursement this Period

27.95

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

-SEE BELOW HOLIDAY GIFT SUPPLIES

SUBTOTAL of Disbursements This Page (optional) ▶

101.24

TOTAL 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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Reyes Committee, Inc.

A.	Full Name (Last, First, Middle Initial) Hobby Lobby Creative Center	Transaction ID: 90128.E7146 Date of Disbursement 12 / 17 / 2008
	Mailing Address 7930 N. Mesa Street	Amount of Each Disbursement this Period 27.95
	City El Paso State TX Zip Code 79932-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement -holiday gift supplies Candidate Name	[MEMO ITEM] MEMO: -HOLIDAY GIFT SUPPLIES
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	Category/Type: 003	

B.	Full Name (Last, First, Middle Initial) Veronica Cintron	Transaction ID: 90128.E7092 Date of Disbursement 12 / 18 / 2008
	Mailing Address 651 Jeanny Marie Court	Amount of Each Disbursement this Period 4700.00
	City El Paso State TX Zip Code 79932-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement -fundraising services Candidate Name	-FUNDRAISING SERVICES
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	Category/Type: 003	

C.	Full Name (Last, First, Middle Initial) Veronica Cintron	Transaction ID: 90128.E7100 Date of Disbursement 12 / 19 / 2008
	Mailing Address 651 Jeanny Marie Court	Amount of Each Disbursement this Period 3000.00
	City El Paso State TX Zip Code 79932-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement -fundraising services Candidate Name	-FUNDRAISING SERVICES
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	Category/Type: 003	

SUBTOTAL of Disbursements This Page (optional)	7700.00
TOTAL 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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Reyes Committee, Inc.

A.	Full Name (Last, First, Middle Initial) Country Club Self Storage	Transaction ID: 90128.E7083 Date of Disbursement 12 / 05 / 2008
	Mailing Address 5400 Rio Bravo	Amount of Each Disbursement this Period 100.00
	City Santa Teresa State NM Zip Code 88008-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement -storage facility Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type: 001 -STORAGE FACILITY

B.	Full Name (Last, First, Middle Initial) Davids Apparel	Transaction ID: 90128.E7095 Date of Disbursement 12 / 18 / 2008
	Mailing Address 9901 Carnegie	Amount of Each Disbursement this Period 374.11
	City El Paso State TX Zip Code 79925-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement -wine bags Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type: 003 -WINE BAGS

C.	Full Name (Last, First, Middle Initial) H & H Mailing Service	Transaction ID: 90128.E7098 Date of Disbursement 12 / 18 / 2008
	Mailing Address 9020 Mayflower	Amount of Each Disbursement this Period 1586.15
	City El Paso State TX Zip Code 79925-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement -christmas cards Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type: 003 -CHRISTMAS CARDS

SUBTOTAL of Disbursements This Page (optional)	2060.26
TOTAL 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)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
The Reyes Committee, Inc.

A.	Full Name (Last, First, Middle Initial) Lopez Advertising	Transaction ID: 90128.E7089
	Mailing Address 11169 La Quinta Place	Date of Disbursement 12 / 17 / 2008
	City El Paso State TX Zip Code 79935-	Amount of Each Disbursement this Period 889.29
	Purpose of Disbursement -advertising	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	004 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		-ADVERTISING

B.	Full Name (Last, First, Middle Initial) Lopez Advertising	Transaction ID: 90128.E7094
	Mailing Address 11169 La Quinta Place	Date of Disbursement 12 / 18 / 2008
	City El Paso State TX Zip Code 79935-	Amount of Each Disbursement this Period 459.08
	Purpose of Disbursement -advertising	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	004 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		-ADVERTISING

C.	Full Name (Last, First, Middle Initial) Gabrielle Mellado-Guevara	Transaction ID: 90128.E7086
	Mailing Address 1016 S. Wayne St., #603	Date of Disbursement 12 / 15 / 2008
	City Arlington State VA Zip Code 22204-	Amount of Each Disbursement this Period 4000.00
	Purpose of Disbursement -fundraising services	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	003 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		-FUNDRAISING SERVICES

SUBTOTAL of Disbursements This Page (optional)	5348.37
TOTAL 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)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
The Reyes Committee, Inc.

A.	Full Name (Last, First, Middle Initial) Gabrielle Mellado-Guevara	Transaction ID: 90128.E7149 Date of Disbursement 12 / 23 / 2008
	Mailing Address 1016 S. Wayne St., #603	Amount of Each Disbursement this Period 116.00
	City Arlington State VA Zip Code 22204-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement -see below rental vehicle Candidate Name	002 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		-SEE BELOW RENTAL VEHICLE

B.	Full Name (Last, First, Middle Initial) Hertz Rent A Car - El Paso	Transaction ID: 90128.E7155 Date of Disbursement 12 / 23 / 2008
	Mailing Address 6510 Convair Rd	Amount of Each Disbursement this Period 116.00
	City El Paso State TX Zip Code 79925-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement -rental vehicle Candidate Name	002 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] MEMO: -RENTAL VEHICLE

C.	Full Name (Last, First, Middle Initial) Gabrielle Mellado-Guevara	Transaction ID: 90128.E7102 Date of Disbursement 12 / 23 / 2008
	Mailing Address 1016 S. Wayne St., #603	Amount of Each Disbursement this Period 317.49
	City Arlington State VA Zip Code 22204-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement -see below airline tickets Candidate Name	002 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		-SEE BELOW AIRLINE TICKETS

SUBTOTAL of Disbursements This Page (optional)	433.49
TOTAL 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)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
The Reyes Committee, Inc.

A.	Full Name (Last, First, Middle Initial) American Airlines	Transaction ID: 90128.E7153 Date of Disbursement 12 / 23 / 2008
	Mailing Address PO Box 619612 MD 2400	Amount of Each Disbursement this Period 317.49
	City Fort Worth State TX Zip Code 76155-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: -AIRLINE TICKET
	Purpose of Disbursement -airline ticket Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Gabrielle Mellado-Guevara	Transaction ID: 90128.E7151 Date of Disbursement 12 / 23 / 2008
	Mailing Address 1016 S. Wayne St., #603	Amount of Each Disbursement this Period 461.00
	City Arlington State VA Zip Code 22204-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 -SEE BELOW RENTAL VEHICLE
	Purpose of Disbursement -see below rental vehicle Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Hertz Rent A Car - El Paso	Transaction ID: 90128.E7156 Date of Disbursement 12 / 23 / 2008
	Mailing Address 6510 Convair Rd	Amount of Each Disbursement this Period 461.00
	City El Paso State TX Zip Code 79925-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: -RENTAL VEHICLE
	Purpose of Disbursement -rental vehicle Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

461.00

TOTAL 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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Reyes Committee, Inc.

A.	Full Name (Last, First, Middle Initial) Gabrielle Mellado-Guevara	Transaction ID: 90128.E7150 Date of Disbursement 12 / 23 / 2008
	Mailing Address 1016 S. Wayne St., #603	Amount of Each Disbursement this Period 150.00
	City Arlington State VA Zip Code 22204-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement -see below airline ticket fee Candidate Name	002 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		-SEE BELOW AIRLINE TICKET FEE

B.	Full Name (Last, First, Middle Initial) American Airlines	Transaction ID: 90128.E7154 Date of Disbursement 12 / 23 / 2008
	Mailing Address PO Box 619612 MD 2400	Amount of Each Disbursement this Period 150.00
	City Fort Worth State TX Zip Code 76155-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement -airline ticket fee Candidate Name	002 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] MEMO: -AIRLINE TICKET FEE

C.	Full Name (Last, First, Middle Initial) Gabrielle Mellado-Guevara	Transaction ID: 90128.E7152 Date of Disbursement 12 / 23 / 2008
	Mailing Address 1016 S. Wayne St., #603	Amount of Each Disbursement this Period 128.90
	City Arlington State VA Zip Code 22204-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement -see below campaign meal Candidate Name	003 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		-SEE BELOW CAMPAIGN MEAL

SUBTOTAL of Disbursements This Page (optional)	▶	278.90
TOTAL 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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Reyes Committee, Inc.

<p>A. Full Name (Last, First, Middle Initial) National Democratic Club</p> <p>Mailing Address 30 Ivy Street, S.E.</p> <p>City Washington State DC Zip Code 20003-</p> <p>Purpose of Disbursement -membership dues</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90128.E7090</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="25.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>-MEMBERSHIP DUES</p>
<p>B. Full Name (Last, First, Middle Initial) Silvestre Reyes</p> <p>Mailing Address 732 Azalea</p> <p>City El Paso State TX Zip Code 79922-</p> <p>Purpose of Disbursement -campaign meals < \$20 each</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90128.E7099</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="80.22"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>-CAMPAIGN MEALS < \$20 EACH</p>
<p>C. Full Name (Last, First, Middle Initial) Silvestre Reyes</p> <p>Mailing Address 732 Azalea</p> <p>City El Paso State TX Zip Code 79922-</p> <p>Purpose of Disbursement -parking fees taxi cab</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90128.E7161</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="35.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>-PARKING FEES TAXI CAB</p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="140.22"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
The Reyes Committee, Inc.

A.

Full Name (Last, First, Middle Initial)
Silvestre Reyes

Mailing Address 732 Azalea

City El Paso State TX Zip Code 79922-

Purpose of Disbursement
-cellphone booster

Candidate Name

002
Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 90128.E7162
Date of Disbursement

12 / 19 / 2008

Amount of Each Disbursement this Period

49.95

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

-CELLPHONE BOOSTER

B.

Full Name (Last, First, Middle Initial)
Silvestre Reyes

Mailing Address 732 Azalea

City El Paso State TX Zip Code 79922-

Purpose of Disbursement
-see below campaign event food

Candidate Name

003
Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 90128.E7176
Date of Disbursement

12 / 19 / 2008

Amount of Each Disbursement this Period

252.53

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

-SEE BELOW CAMPAIGN EVENT FOOD

C.

Full Name (Last, First, Middle Initial)
Adventure Zone

Mailing Address 251 E. Redd Road

City El Paso State TX Zip Code 79932-

Purpose of Disbursement
-campaign event food

Candidate Name

003
Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 90128.E7232
Date of Disbursement

12 / 19 / 2008

Amount of Each Disbursement this Period

252.53

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
MEMO: -CAMPAIGN EVENT FOOD

SUBTOTAL of Disbursements This Page (optional) ▶

302.48

TOTAL 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)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
The Reyes Committee, Inc.

A.	Full Name (Last, First, Middle Initial) Silvestre Reyes	Transaction ID: 90128.E7168 Date of Disbursement 12 / 19 / 2008
	Mailing Address 732 Azalea	Amount of Each Disbursement this Period 29.99
	City El Paso State TX Zip Code 79922-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement -see below vehicle cleaned Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		-SEE BELOW VEHICLE CLEANED

B.	Full Name (Last, First, Middle Initial) Silvestre Reyes	Transaction ID: 90128.E7197 Date of Disbursement 12 / 19 / 2008
	Mailing Address 732 Azalea	Amount of Each Disbursement this Period 29.44
	City El Paso State TX Zip Code 79922-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement -see below newspaper Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		-SEE BELOW NEWSPAPER

C.	Full Name (Last, First, Middle Initial) New York Times	Transaction ID: 90128.E7252 Date of Disbursement 12 / 19 / 2008
	Mailing Address 229 West 43rd Street	Amount of Each Disbursement this Period 29.44
	City New York State NY Zip Code 10036-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement -newspaper subscription Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] MEMO: -NEWSPAPER SUBSCRIPTION

SUBTOTAL of Disbursements This Page (optional)	59.43
TOTAL 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)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
The Reyes Committee, Inc.

A.	Full Name (Last, First, Middle Initial) Silvestre Reyes <hr/> Mailing Address 732 Azalea <hr/> City El Paso State TX Zip Code 79922- <hr/> Purpose of Disbursement -see below campaign event food Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90128.E7175 Date of Disbursement 12 / 19 / 2008 <hr/> Amount of Each Disbursement this Period 72.28 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 -SEE BELOW CAMPAIGN EVENT FOOD
B.	Full Name (Last, First, Middle Initial) Safeway Stores <hr/> Mailing Address 415 14th Street SE <hr/> City Washington State DC Zip Code 20003- <hr/> Purpose of Disbursement -campaign event food Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90128.E7231 Date of Disbursement 12 / 19 / 2008 <hr/> Amount of Each Disbursement this Period 72.28 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: -CAMPAIGN EVENT FOOD
C.	Full Name (Last, First, Middle Initial) Silvestre Reyes <hr/> Mailing Address 732 Azalea <hr/> City El Paso State TX Zip Code 79922- <hr/> Purpose of Disbursement -see below campaign meal Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90128.E7173 Date of Disbursement 12 / 19 / 2008 <hr/> Amount of Each Disbursement this Period 25.74 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 -SEE BELOW CAMPAIGN MEAL

SUBTOTAL of Disbursements This Page (optional) ▶	98.02
TOTAL 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)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	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)
The Reyes Committee, Inc.

A.

Full Name (Last, First, Middle Initial)
Silvestre Reyes

Mailing Address 732 Azalea

City State Zip Code
El Paso TX 79922-

Purpose of Disbursement
-see below office furniture

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 90128.E7163
Date of Disbursement

12 / 19 / 2008

Amount of Each Disbursement this Period

266.08

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

-SEE BELOW OFFICE FURNITURE

B.

Full Name (Last, First, Middle Initial)
Sams Club

Mailing Address 7970 N. Mesa

City State Zip Code
El Paso TX 79932-

Purpose of Disbursement
-office furniture

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 90128.E7210
Date of Disbursement

12 / 19 / 2008

Amount of Each Disbursement this Period

266.08

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
MEMO: -OFFICE FURNITURE

C.

Full Name (Last, First, Middle Initial)
Silvestre Reyes

Mailing Address 732 Azalea

City State Zip Code
El Paso TX 79922-

Purpose of Disbursement
-see below extension cords time

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 90128.E7169
Date of Disbursement

12 / 19 / 2008

Amount of Each Disbursement this Period

108.99

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

-SEE BELOW EXTENSION CORDS TIME

SUBTOTAL of Disbursements This Page (optional) ▶

375.07

TOTAL 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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Reyes Committee, Inc.

A.	Full Name (Last, First, Middle Initial) The Home Depot	Transaction ID: 90128.E7225 Date of Disbursement 12 / 19 / 2008
	Mailing Address 7545 N. Mesa Street	Amount of Each Disbursement this Period 108.99
	City El Paso State TX Zip Code 79912-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement -extension cords timers Candidate Name	[MEMO ITEM] MEMO: -EXTENSION CORDS TIMERS
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type: 001

B.	Full Name (Last, First, Middle Initial) Silvestre Reyes	Transaction ID: 90128.E7172 Date of Disbursement 12 / 19 / 2008
	Mailing Address 732 Azalea	Amount of Each Disbursement this Period 105.00
	City El Paso State TX Zip Code 79922-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement -see below campaign gifts Candidate Name	-SEE BELOW CAMPAIGN GIFTS
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type: 003

C.	Full Name (Last, First, Middle Initial) Silvestre Reyes	Transaction ID: 90128.E7167 Date of Disbursement 12 / 19 / 2008
	Mailing Address 732 Azalea	Amount of Each Disbursement this Period 223.46
	City El Paso State TX Zip Code 79922-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement -see below office supplies Candidate Name	-SEE BELOW OFFICE SUPPLIES
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type: 001

SUBTOTAL of Disbursements This Page (optional)	328.46
TOTAL 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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Reyes Committee, Inc.

A.	Full Name (Last, First, Middle Initial) Costco Wholesale	Transaction ID: 90128.E7223 Date of Disbursement 12 / 19 / 2008
	Mailing Address 1200 South Fern Street	Amount of Each Disbursement this Period 223.46
	City Arlington State VA Zip Code 22202-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement -office supplies Candidate Name	[MEMO ITEM] MEMO: -OFFICE SUPPLIES
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	Category/Type: 001	

B.	Full Name (Last, First, Middle Initial) Silvestre Reyes	Transaction ID: 90128.E7165 Date of Disbursement 12 / 19 / 2008
	Mailing Address 732 Azalea	Amount of Each Disbursement this Period 24.00
	City El Paso State TX Zip Code 79922-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement -see below campaign gifts Candidate Name	-SEE BELOW CAMPAIGN GIFTS
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	Category/Type: 003	

C.	Full Name (Last, First, Middle Initial) Silvestre Reyes	Transaction ID: 90128.E7171 Date of Disbursement 12 / 19 / 2008
	Mailing Address 732 Azalea	Amount of Each Disbursement this Period 409.19
	City El Paso State TX Zip Code 79922-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement -see below television Candidate Name	-SEE BELOW TELEVISION
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	Category/Type: 001	

SUBTOTAL of Disbursements This Page (optional)	433.19
TOTAL 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)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
The Reyes Committee, Inc.

A.	Full Name (Last, First, Middle Initial) Sams Club			Transaction ID: 90128.E7227	
	Mailing Address 7970 N. Mesa			Date of Disbursement 12 / 19 / 2008	
City El Paso State TX Zip Code 79932-			Amount of Each Disbursement this Period 409.19		
Purpose of Disbursement -television			001 Category/Type		
Candidate Name			Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
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:			[MEMO ITEM] MEMO: -TELEVISION		

B.	Full Name (Last, First, Middle Initial) Silvestre Reyes			Transaction ID: 90128.E7170	
	Mailing Address 732 Azalea			Date of Disbursement 12 / 19 / 2008	
City El Paso State TX Zip Code 79922-			Amount of Each Disbursement this Period 44.16		
Purpose of Disbursement -see below office supplies			001 Category/Type		
Candidate Name			Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
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:			-SEE BELOW OFFICE SUPPLIES		

C.	Full Name (Last, First, Middle Initial) Walmart			Transaction ID: 90128.E7226	
	Mailing Address 7555 N. Mesa			Date of Disbursement 12 / 19 / 2008	
City El Paso State TX Zip Code 79912-			Amount of Each Disbursement this Period 44.16		
Purpose of Disbursement -office supplies			001 Category/Type		
Candidate Name			Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
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:			[MEMO ITEM] MEMO: -OFFICE SUPPLIES		

SUBTOTAL of Disbursements This Page (optional)			44.16		
TOTAL 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)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
The Reyes Committee, Inc.

A.

Full Name (Last, First, Middle Initial)
Silvestre Reyes

Mailing Address 732 Azalea

City El Paso State TX Zip Code 79922-

Purpose of Disbursement
-see below campaign meal

Candidate Name

003
Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: 90128.E7196
Date of Disbursement

12 / 19 / 2008

Amount of Each Disbursement this Period

124.10

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

-SEE BELOW CAMPAIGN MEAL

B.

Full Name (Last, First, Middle Initial)
Dominguez Restaurant

Mailing Address 1201 N. Airway C5

City El Paso State TX Zip Code 79922-

Purpose of Disbursement
-campaign meal

Candidate Name

003
Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: 90128.E7251
Date of Disbursement

12 / 19 / 2008

Amount of Each Disbursement this Period

124.10

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
MEMO: -CAMPAIGN MEAL

C.

Full Name (Last, First, Middle Initial)
Silvestre Reyes

Mailing Address 732 Azalea

City El Paso State TX Zip Code 79922-

Purpose of Disbursement
-see below holiday decorations

Candidate Name

003
Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: 90128.E7164
Date of Disbursement

12 / 19 / 2008

Amount of Each Disbursement this Period

324.04

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

-SEE BELOW HOLIDAY DECORATIONS

SUBTOTAL of Disbursements This Page (optional) ▶

448.14

TOTAL 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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Reyes Committee, Inc.

A. Full Name (Last, First, Middle Initial) Hobby Lobby Creative Center Mailing Address 7930 N. Mesa Street City El Paso State TX Zip Code 79932- Purpose of Disbursement -holiday decorations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90128.E7220 Date of Disbursement 12 / 19 / 2008 Amount of Each Disbursement this Period 324.04 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: -HOLIDAY DECORATIONS
	Category/Type 003	

B. Full Name (Last, First, Middle Initial) Silvestre Reyes Mailing Address 732 Azalea City El Paso State TX Zip Code 79922- Purpose of Disbursement -see below campaign meal Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90128.E7177 Date of Disbursement 12 / 19 / 2008 Amount of Each Disbursement this Period 37.23 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 -SEE BELOW CAMPAIGN MEAL
	Category/Type 003	

C. Full Name (Last, First, Middle Initial) Silvestre Reyes Mailing Address 732 Azalea City El Paso State TX Zip Code 79922- Purpose of Disbursement -see below gasoline Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90128.E7198 Date of Disbursement 12 / 19 / 2008 Amount of Each Disbursement this Period 77.80 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 -SEE BELOW GASOLINE
	Category/Type 001	

SUBTOTAL of Disbursements This Page (optional) ▶	115.03
TOTAL 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)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
The Reyes Committee, Inc.

A.	Full Name (Last, First, Middle Initial) Sams Club	Transaction ID: 90128.E7253 Date of Disbursement 12 / 19 / 2008
	Mailing Address 7970 N. Mesa	Amount of Each Disbursement this Period 77.80
	City El Paso State TX Zip Code 79932-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement -gasoline Candidate Name	[MEMO ITEM] MEMO: -GASOLINE
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type: 001

B.	Full Name (Last, First, Middle Initial) Silvestre Reyes	Transaction ID: 90128.E7178 Date of Disbursement 12 / 19 / 2008
	Mailing Address 732 Azalea	Amount of Each Disbursement this Period 132.91
	City El Paso State TX Zip Code 79922-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement -see below campaign meal Candidate Name	-SEE BELOW CAMPAIGN MEAL
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type: 003

C.	Full Name (Last, First, Middle Initial) Cattle Baron	Transaction ID: 90128.E7234 Date of Disbursement 12 / 19 / 2008
	Mailing Address 1700 Airway Blvd	Amount of Each Disbursement this Period 132.91
	City El Paso State TX Zip Code 79925-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement -campaign meal Candidate Name	[MEMO ITEM] MEMO: -CAMPAIGN MEAL
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type: 003

SUBTOTAL of Disbursements This Page (optional)	132.91
TOTAL 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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Reyes Committee, Inc.

A.	Full Name (Last, First, Middle Initial) Silvestre Reyes	Transaction ID: 90128.E7174 Date of Disbursement 12 / 19 / 2008
	Mailing Address 732 Azalea	Amount of Each Disbursement this Period 157.98
	City El Paso State TX Zip Code 79922-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement -see below office telephone Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		-SEE BELOW OFFICE TELEPHONE

B.	Full Name (Last, First, Middle Initial) Costco Wholesale	Transaction ID: 90128.E7230 Date of Disbursement 12 / 19 / 2008
	Mailing Address 1200 South Fern Street	Amount of Each Disbursement this Period 157.98
	City Arlington State VA Zip Code 22202-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement -office telephone Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] MEMO: -OFFICE TELEPHONE

C.	Full Name (Last, First, Middle Initial) Silvestre Reyes	Transaction ID: 90128.E7190 Date of Disbursement 12 / 19 / 2008
	Mailing Address 732 Azalea	Amount of Each Disbursement this Period 50.00
	City El Paso State TX Zip Code 79922-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement -see below toll road express ser Candidate Name	002 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		-SEE BELOW TOLL ROAD EXPRESS SER

SUBTOTAL of Disbursements This Page (optional)	▶	207.98
TOTAL 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)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
The Reyes Committee, Inc.

A.	Full Name (Last, First, Middle Initial) Silvestre Reyes <hr/> Mailing Address 732 Azalea <hr/> City El Paso State TX Zip Code 79922- <hr/> Purpose of Disbursement -see below airline tickets Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	002 Category/ Type	Transaction ID: 90128.E7195 Date of Disbursement 12 / 19 / 2008 <hr/> Amount of Each Disbursement this Period 1085.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 -SEE BELOW AIRLINE TICKETS
B.	Full Name (Last, First, Middle Initial) Southwest Airlines <hr/> Mailing Address PO Box 36647-1CR <hr/> City Dallas State TX Zip Code 75232-1647 <hr/> Purpose of Disbursement -airlines tickets Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	002 Category/ Type	Transaction ID: 90128.E7250 Date of Disbursement 12 / 19 / 2008 <hr/> Amount of Each Disbursement this Period 1085.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: -AIRLINES TICKETS
C.	Full Name (Last, First, Middle Initial) Silvestre Reyes <hr/> Mailing Address 732 Azalea <hr/> City El Paso State TX Zip Code 79922- <hr/> Purpose of Disbursement -see below football game tickets Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	001 Category/ Type	Transaction ID: 90128.E7199 Date of Disbursement 12 / 19 / 2008 <hr/> Amount of Each Disbursement this Period 614.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 -SEE BELOW FOOTBALL GAME TICKETS

SUBTOTAL of Disbursements This Page (optional) ▶

1699.50

TOTAL 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)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
The Reyes Committee, Inc.

A.	Full Name (Last, First, Middle Initial) Dallas Cowboys Mailing Address 2401 E. Airport Freeway City Irving State TX Zip Code 75062- Purpose of Disbursement -football game tickets Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90128.E7254 Date of Disbursement 12 / 19 / 2008 Amount of Each Disbursement this Period 614.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: -FOOTBALL GAME TICKETS	001 Category/ Type
B.	Full Name (Last, First, Middle Initial) Silvestre Reyes Mailing Address 732 Azalea City El Paso State TX Zip Code 79922- Purpose of Disbursement -see below newspaper Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90128.E7192 Date of Disbursement 12 / 19 / 2008 Amount of Each Disbursement this Period 11.62 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 -SEE BELOW NEWSPAPER	001 Category/ Type
C.	Full Name (Last, First, Middle Initial) Silvestre Reyes Mailing Address 732 Azalea City El Paso State TX Zip Code 79922- Purpose of Disbursement -see below storage cabinet shel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90128.E7191 Date of Disbursement 12 / 19 / 2008 Amount of Each Disbursement this Period 729.02 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 -SEE BELOW STORAGE CABINET SHEL	001 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

740.64

TOTAL 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)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
The Reyes Committee, Inc.

A.	Full Name (Last, First, Middle Initial) Ikea Stores Mailing Address 10100 Baltimore Ave City College Park State MD Zip Code 20740- Purpose of Disbursement -storage cabinet shelves Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	001 Category/ Type	Transaction ID: 90128.E7246 Date of Disbursement 12 / 19 / 2008 Amount of Each Disbursement this Period 729.02 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: -STORAGE CABINET SH-ELVES
B.	Full Name (Last, First, Middle Initial) Silvestre Reyes Mailing Address 732 Azalea City El Paso State TX Zip Code 79922- Purpose of Disbursement -see below campaign meal Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	003 Category/ Type	Transaction ID: 90128.E7194 Date of Disbursement 12 / 19 / 2008 Amount of Each Disbursement this Period 35.88 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 -SEE BELOW CAMPAIGN MEAL
C.	Full Name (Last, First, Middle Initial) Silvestre Reyes Mailing Address 732 Azalea City El Paso State TX Zip Code 79922- Purpose of Disbursement -see below EP Office telephone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	001 Category/ Type	Transaction ID: 90128.E7207 Date of Disbursement 12 / 19 / 2008 Amount of Each Disbursement this Period 864.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 -SEE BELOW EP OFFICE TELEPHONE

SUBTOTAL of Disbursements This Page (optional) ▶

899.88

TOTAL 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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Reyes Committee, Inc.

A.	Full Name (Last, First, Middle Initial) Southwestern Bell	Transaction ID: 90128.E7262 Date of Disbursement 12 / 19 / 2008
	Mailing Address P.O. Box 4845	Amount of Each Disbursement this Period 864.00
	City HOUSTON State TX Zip Code 77097-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement -EP office telephone fax servc Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: -EP OFFICE TELEPHONE FAX SERVIC
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Silvestre Reyes	Transaction ID: 90128.E7200 Date of Disbursement 12 / 19 / 2008
	Mailing Address 732 Azalea	Amount of Each Disbursement this Period 191.99
	City El Paso State TX Zip Code 79922-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement -see below holiday staff meeting Candidate Name	003 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	-SEE BELOW HOLIDAY STAFF MEETING
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Sams Club	Transaction ID: 90128.E7255 Date of Disbursement 12 / 19 / 2008
	Mailing Address 7970 N. Mesa	Amount of Each Disbursement this Period 191.99
	City El Paso State TX Zip Code 79932-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement -staff holiday party Candidate Name	003 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: -STAFF HOLIDAY PARTY
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	▶	191.99
TOTAL 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)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
The Reyes Committee, Inc.

A.

Full Name (Last, First, Middle Initial)
Silvestre Reyes

Mailing Address 732 Azalea

City El Paso State TX Zip Code 79922-

Purpose of Disbursement
-see below campaign meal

Candidate Name

003
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 90128.E7179
Date of Disbursement

12 / 19 / 2008

Amount of Each Disbursement this Period

40.88

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

-SEE BELOW CAMPAIGN MEAL

B.

Full Name (Last, First, Middle Initial)
Silvestre Reyes

Mailing Address 732 Azalea

City El Paso State TX Zip Code 79922-

Purpose of Disbursement
-see below DC Office AOL service

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 90128.E7205
Date of Disbursement

12 / 19 / 2008

Amount of Each Disbursement this Period

300.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

-SEE BELOW DC OFFICE AOL SERVICE

C.

Full Name (Last, First, Middle Initial)
AOL Services

Mailing Address www.aol.com

City El Paso State TX Zip Code 79901-

Purpose of Disbursement
-DC office AOL service

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 90128.E7260
Date of Disbursement

12 / 19 / 2008

Amount of Each Disbursement this Period

300.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
MEMO: -DC OFFICE AOL SERVICE

SUBTOTAL of Disbursements This Page (optional) ▶

340.88

TOTAL 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)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
The Reyes Committee, Inc.

A.	Full Name (Last, First, Middle Initial) Silvestre Reyes	Transaction ID: 90128.E7208 Date of Disbursement 12 / 19 / 2008
	Mailing Address 732 Azalea	Amount of Each Disbursement this Period 420.00
	City El Paso State TX Zip Code 79922-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement -see below EP Office electric Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		-SEE BELOW EP OFFICE ELECTRIC

B.	Full Name (Last, First, Middle Initial) El Paso Electric Co	Transaction ID: 90128.E7263 Date of Disbursement 12 / 19 / 2008
	Mailing Address 123 Pioneer Plaza	Amount of Each Disbursement this Period 420.00
	City El Paso State TX Zip Code 79901-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement -EP office electric service Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] MEMO: -EP OFFICE ELECTRIC SERVICE

C.	Full Name (Last, First, Middle Initial) Silvestre Reyes	Transaction ID: 90128.E7193 Date of Disbursement 12 / 19 / 2008
	Mailing Address 732 Azalea	Amount of Each Disbursement this Period 32.36
	City El Paso State TX Zip Code 79922-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement -see below campaign meal Candidate Name	003 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		-SEE BELOW CAMPAIGN MEAL

SUBTOTAL of Disbursements This Page (optional)	452.36
TOTAL 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)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
The Reyes Committee, Inc.

A.	Full Name (Last, First, Middle Initial) Silvestre Reyes	Transaction ID: 90128.E7186
	Mailing Address 732 Azalea	Date of Disbursement 12 / 19 / 2008
	City El Paso State TX Zip Code 79922-	Amount of Each Disbursement this Period 136.00
	Purpose of Disbursement -see below campaign gifts Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type: 003
		-SEE BELOW CAMPAIGN GIFTS

B.	Full Name (Last, First, Middle Initial) US Capitol Store	Transaction ID: 90128.E7241
	Mailing Address Capitol Building First Floor	Date of Disbursement 12 / 19 / 2008
	City Washington State DC Zip Code 20510-0001	Amount of Each Disbursement this Period 136.00
	Purpose of Disbursement -campaign gifts Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type: 003
		[MEMO ITEM] MEMO: -CAMPAIGN GIFTS

C.	Full Name (Last, First, Middle Initial) Silvestre Reyes	Transaction ID: 90128.E7204
	Mailing Address 732 Azalea	Date of Disbursement 12 / 19 / 2008
	City El Paso State TX Zip Code 79922-	Amount of Each Disbursement this Period 420.00
	Purpose of Disbursement -see below DC Office electric se Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type: 001
		-SEE BELOW DC OFFICE ELECTRIC SE

SUBTOTAL of Disbursements This Page (optional)	556.00
TOTAL 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)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
The Reyes Committee, Inc.

A.	Full Name (Last, First, Middle Initial) Potomac Electric	Transaction ID: 90128.E7259 Date of Disbursement 12 / 19 / 2008
	Mailing Address 701 Ninth St, NW	Amount of Each Disbursement this Period 420.00
	City Washington State DC Zip Code 20068-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement -DC office electric service Candidate Name	[MEMO ITEM] MEMO: -DC OFFICE ELECTRIC SERVICE
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type: 001

B.	Full Name (Last, First, Middle Initial) Silvestre Reyes	Transaction ID: 90128.E7184 Date of Disbursement 12 / 19 / 2008
	Mailing Address 732 Azalea	Amount of Each Disbursement this Period 490.22
	City El Paso State TX Zip Code 79922-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement -see below campaign gifts Candidate Name	-SEE BELOW CAMPAIGN GIFTS
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type: 003

C.	Full Name (Last, First, Middle Initial) US House of Representatives	Transaction ID: 90128.E7240 Date of Disbursement 12 / 19 / 2008
	Mailing Address B-217 Longworth Building	Amount of Each Disbursement this Period 490.22
	City Washington State DC Zip Code 20515-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement -campaign gifts Candidate Name	[MEMO ITEM] MEMO: -CAMPAIGN GIFTS
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type: 003

SUBTOTAL of Disbursements This Page (optional) ▶

490.22

TOTAL 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)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
The Reyes Committee, Inc.

A.	Full Name (Last, First, Middle Initial) Silvestre Reyes <hr/> Mailing Address 732 Azalea <hr/> City El Paso State TX Zip Code 79922- <hr/> Purpose of Disbursement -see below EP Office cable servi Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90128.E7206 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 9 / 2 0 0 8	Amount of Each Disbursement this Period 468.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 -SEE BELOW EP OFFICE CABLE SERVI
B.	Full Name (Last, First, Middle Initial) Time Warner - EP <hr/> Mailing Address 7010 Airport Dr. <hr/> City El Paso State TX Zip Code 79906- <hr/> Purpose of Disbursement -EP office cable service Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90128.E7261 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 9 / 2 0 0 8	Amount of Each Disbursement this Period 468.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: -EP OFFICE CABLE SERVICE
C.	Full Name (Last, First, Middle Initial) Silvestre Reyes <hr/> Mailing Address 732 Azalea <hr/> City El Paso State TX Zip Code 79922- <hr/> Purpose of Disbursement -see below DC Office cable servi Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90128.E7202 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 9 / 2 0 0 8	Amount of Each Disbursement this Period 480.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 -SEE BELOW DC OFFICE CABLE SERVI

SUBTOTAL of Disbursements This Page (optional)	948.00
TOTAL 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)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
The Reyes Committee, Inc.

A.	Full Name (Last, First, Middle Initial) Dish Network	Transaction ID: 90128.E7257 Date of Disbursement 12 / 19 / 2008
	Mailing Address PO Box 9033	Amount of Each Disbursement this Period 480.00
	City Littleton State CO Zip Code 80160-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement -DC office cable service Candidate Name	[MEMO ITEM] MEMO: -DC OFFICE CABLE SERVICE
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

B.	Full Name (Last, First, Middle Initial) Silvestre Reyes	Transaction ID: 90128.E7203 Date of Disbursement 12 / 19 / 2008
	Mailing Address 732 Azalea	Amount of Each Disbursement this Period 1308.00
	City El Paso State TX Zip Code 79922-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement -see below DC Office telephone Candidate Name	-SEE BELOW DC OFFICE TELEPHONE
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

C.	Full Name (Last, First, Middle Initial) Southwestern Bell	Transaction ID: 90128.E7258 Date of Disbursement 12 / 19 / 2008
	Mailing Address P.O. Box 4845	Amount of Each Disbursement this Period 1308.00
	City HOUSTON State TX Zip Code 77097-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement -DC office telephone fax servic Candidate Name	[MEMO ITEM] MEMO: -DC OFFICE TELEPHONE FAX SERVIC
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶

1308.00

TOTAL 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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Reyes Committee, Inc.

<p>A. Full Name (Last, First, Middle Initial) Silvestre Reyes</p> <p>Mailing Address 732 Azalea</p> <p>City El Paso State TX Zip Code 79922-</p> <p>Purpose of Disbursement -see below campaign meal</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90128.E7181</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="41.78"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>-SEE BELOW CAMPAIGN MEAL</p>
<p>B. Full Name (Last, First, Middle Initial) Silvestre Reyes</p> <p>Mailing Address 732 Azalea</p> <p>City El Paso State TX Zip Code 79922-</p> <p>Purpose of Disbursement -see below campaign display</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90128.E7187</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="149.38"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>-SEE BELOW CAMPAIGN DISPL-AY</p>
<p>C. Full Name (Last, First, Middle Initial) Silvestre Reyes</p> <p>Mailing Address 732 Azalea</p> <p>City El Paso State TX Zip Code 79922-</p> <p>Purpose of Disbursement -see below campaign gifts</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90128.E7201</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="236.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>-SEE BELOW CAMPAIGN GIFTS</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="427.16"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
The Reyes Committee, Inc.

A.	Full Name (Last, First, Middle Initial) Bureau of Engraving <hr/> Mailing Address 14th Street SW & CST SW <hr/> City Washington State DC Zip Code 20024- <hr/> Purpose of Disbursement -campaign gifts Candidate Name 003 Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90128.E7256 Date of Disbursement <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y 1 2 / 1 9 / 2 0 0 8 </div> <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">236.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: -CAMPAIGN GIFTS
B.	Full Name (Last, First, Middle Initial) Silvestre Reyes <hr/> Mailing Address 732 Azalea <hr/> City El Paso State TX Zip Code 79922- <hr/> Purpose of Disbursement -see below campaign meal Candidate Name 003 Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90128.E7182 Date of Disbursement <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y 1 2 / 1 9 / 2 0 0 8 </div> <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">30.94</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 -SEE BELOW CAMPAIGN MEAL
C.	Full Name (Last, First, Middle Initial) Silvestre Reyes <hr/> Mailing Address 732 Azalea <hr/> City El Paso State TX Zip Code 79922- <hr/> Purpose of Disbursement -see below apartment rental Candidate Name 002 Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90128.E7183 Date of Disbursement <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y 1 2 / 1 9 / 2 0 0 8 </div> <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">829.90</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 -SEE BELOW APARTMENT RENT-AL

SUBTOTAL of Disbursements This Page (optional) ▶	<div style="border: 1px solid black; padding: 5px; display: inline-block;">860.84</div>
TOTAL This Period (last page this line number only) ▶	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>

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	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
The Reyes Committee, Inc.

A. Full Name (Last, First, Middle Initial) RentPayment Mailing Address 505 Sansome, 8th Floor City San Francisco State CA Zip Code 94111- Purpose of Disbursement -Inauguration apartment Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90128.E7239 Date of Disbursement 12 / 19 / 2008
	Amount of Each Disbursement this Period 829.90
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	[MEMO ITEM] MEMO: -INAUGURATION APARTMENT

B. Full Name (Last, First, Middle Initial) Silvestre Reyes Mailing Address 732 Azalea City El Paso State TX Zip Code 79922- Purpose of Disbursement -see below office shelves cabin Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90128.E7166 Date of Disbursement 12 / 19 / 2008
	Amount of Each Disbursement this Period 95.41
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	-SEE BELOW OFFICE SHELVES CABIN

C. Full Name (Last, First, Middle Initial) Lowes Mailing Address 430 E. Redd Road City El Paso State TX Zip Code 79912- Purpose of Disbursement -office shelves storage bins Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90128.E7222 Date of Disbursement 12 / 19 / 2008
	Amount of Each Disbursement this Period 95.41
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	[MEMO ITEM] MEMO: -OFFICE SHELVES STORAGE BINS

SUBTOTAL of Disbursements This Page (optional) ▶	95.41
TOTAL 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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Reyes Committee, Inc.

A.	Full Name (Last, First, Middle Initial) Silvestre Reyes	Transaction ID: 90128.E7189
	Mailing Address 732 Azalea	Date of Disbursement MM / DD / YYYY 12 / 19 / 2008
	City El Paso State TX Zip Code 79922-	Amount of Each Disbursement this Period 61.26
	Purpose of Disbursement -see below vehicle oil change	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		-SEE BELOW VEHICLE OIL CHANGE

B.	Full Name (Last, First, Middle Initial) Silvestre Reyes	Transaction ID: 90128.E7180
	Mailing Address 732 Azalea	Date of Disbursement MM / DD / YYYY 12 / 19 / 2008
	City El Paso State TX Zip Code 79922-	Amount of Each Disbursement this Period 52.30
	Purpose of Disbursement -see below campaign meal	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	003 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		-SEE BELOW CAMPAIGN MEAL

C.	Full Name (Last, First, Middle Initial) Silvestre Reyes	Transaction ID: 90128.E7188
	Mailing Address 732 Azalea	Date of Disbursement MM / DD / YYYY 12 / 19 / 2008
	City El Paso State TX Zip Code 79922-	Amount of Each Disbursement this Period 1117.50
	Purpose of Disbursement -see below airline tickets	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	002 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		-SEE BELOW AIRLINE TICKETS

SUBTOTAL of Disbursements This Page (optional)	▶	1231.06
TOTAL 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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Reyes Committee, Inc.

<p>A. Full Name (Last, First, Middle Initial) American Airlines</p> <p>Mailing Address PO Box 619612 MD 2400</p> <p>City Fort Worth State TX Zip Code 76155-</p> <p>Purpose of Disbursement -airline tickets</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90128.E7243</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1117.50"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] MEMO: -AIRLINE TICKETS</p>
<p>B. Full Name (Last, First, Middle Initial) Stanton Street Technology Group</p> <p>Mailing Address 500 West Overland, Suite 200</p> <p>City El Paso State TX Zip Code 79901-</p> <p>Purpose of Disbursement -Website Host</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90128.E7080</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="178.61"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>-WEBSITE HOST</p>
<p>C. Full Name (Last, First, Middle Initial) Stanton Street Technology Group</p> <p>Mailing Address 500 West Overland, Suite 200</p> <p>City El Paso State TX Zip Code 79901-</p> <p>Purpose of Disbursement -Website Hosting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90128.E7088</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="178.61"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>-WEBSITE HOSTING</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="357.22"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Reyes Committee, Inc.

<p>A. Full Name (Last, First, Middle Initial) Sun Bowl Association</p> <p>Mailing Address 4150 Pinnacle St. Suite 100</p> <p>City El Paso State TX Zip Code 79902-1019</p> <p>Purpose of Disbursement -tickets</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 81203.E6977</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: right;">505.00</td> </tr> </table> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>-TICKETS</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	0	2	/	2	0	0	8	505.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	2	/	0	2	/	2	0	0	8													
505.00																						
<p>B. Full Name (Last, First, Middle Initial) Univision Radio Broadcast TX LP</p> <p>Mailing Address 2211 East Missouri South #300</p> <p>City El Paso State TX Zip Code 79903-</p> <p>Purpose of Disbursement -radio advertising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90128.E7082</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>0</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: right;">730.00</td> </tr> </table> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>-RADIO ADVERTISING</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	0	5	/	2	0	0	8	730.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	2	/	0	5	/	2	0	0	8													
730.00																						
<p>C. Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address PO Box 660108</p> <p>City Dallas State TX Zip Code 75266-0108</p> <p>Purpose of Disbursement -telephone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 81203.E6912</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>2</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: right;">163.25</td> </tr> </table> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>-TELEPHONE</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	2	6	/	2	0	0	8	163.25
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	2	6	/	2	0	0	8													
163.25																						

SUBTOTAL of Disbursements This Page (optional) ▶

1398.25

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

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**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	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
The Reyes Committee, Inc.

A.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: 90128.E7081 Date of Disbursement
	Mailing Address PO Box 660108	<input type="text" value="12"/> / <input type="text" value="05"/> / <input type="text" value="2008"/>
	City Dallas State TX Zip Code 75266-0108	Amount of Each Disbursement this Period
	Purpose of Disbursement -telephone	<input type="text" value="509.01"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	-TELEPHONE
	State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type <input type="text" value="001"/>

B.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: 90128.E7093 Date of Disbursement
	Mailing Address PO Box 660108	<input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2008"/>
	City Dallas State TX Zip Code 75266-0108	Amount of Each Disbursement this Period
	Purpose of Disbursement -telephone	<input type="text" value="163.25"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	-TELEPHONE
	State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type <input type="text" value="001"/>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="672.26"/>
TOTAL This Period (last page this line number only)	<input type="text" value="35191.42"/>

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 type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Reyes Committee, Inc.

<p>A. Full Name (Last, First, Middle Initial) Carmouche For Congress</p> <p>Mailing Address 912 Kings Highway</p> <p>City Shreveport State LA Zip Code 71104-</p> <p>Purpose of Disbursement -LA congr district 4</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 81203.E7004</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1000.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) The John Cook Campaign</p> <p>Mailing Address 3224 Mesa Verde</p> <p>City El Paso State TX Zip Code 79904-</p> <p>Purpose of Disbursement -local mayoral candidate</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 90128.E7091</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="300.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Commit</p> <p>Mailing Address 430 South Capitol Street</p> <p>City Washington State DC Zip Code 20003-</p> <p>Purpose of Disbursement -unlimited transfer to natl part</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 90128.E7158</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="17500.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="18800.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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 57 / 57

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Reyes Committee, Inc.

A.

Full Name (Last, First, Middle Initial)
Delaneys Italian Restuarant

Mailing Address 1545 N. Lee Trevino Dr.

City State Zip Code
El Paso TX 79936-

Purpose of Disbursement
sponsor EPWD Event

Candidate Name

012
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 81204.E7079
Date of Disbursement

1 2 / 0 4 / 2 0 0 8

Amount of Each Disbursement this Period

500.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Vietnam Veterans Chapter 574

Mailing Address P.O. Box 26904

City State Zip Code
El Paso TX 79926-

Purpose of Disbursement
-donation

Candidate Name

012
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 90128.E7096
Date of Disbursement

1 2 / 1 8 / 2 0 0 8

Amount of Each Disbursement this Period

236.16

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

736.16

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

19536.16