

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**FORM C/OH
COVER SHEET PG 1**

The C/OH Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers)

2 Total pages filed:

5

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR

Ms

FIRST

Mariselle

MI

NICKNAME

LAST

Quijano

SUFFIX

OFFICE USE ONLY

Date Received

PASADENA ISD

APR - 3 2017

ACCOUNTABILITY &
COMPLIANCE

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

5021 Fairmont Parkway, Pasadena, TX 77505

☐ Change of Address

5 CANDIDATE/
OFFICEHOLDER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(713)

944-0003

Date Hand-delivered or Date Postmarked

6 CAMPAIGN
TREASURER
NAME

MS / MRS / MR

Ms

FIRST

Nelly

MI

NICKNAME

LAST

Quijano

SUFFIX

Receipt #

Amount \$

Date Processed

Date Imaged

7 CAMPAIGN
TREASURER
ADDRESS

(Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE);

APT / SUITE #;

CITY;

STATE;

ZIP CODE

5021 Fairmont Parkway, Pasadena, TX 77505

8 CAMPAIGN
TREASURER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(713)

944-0003

9 REPORT TYPE

☐ January 15

☒ 30th day before election

☐ Runoff

☐ 15th day after campaign
treasurer appointment
(Officeholder Only)

☐ July 15

☐ 8th day before election

☐ Exceeded \$500 limit

☐ Final Report (Attach C/OH - FR)

10 PERIOD
COVERED

Month

Day

Year

January 13, 2017

Month

Day

Year

April 3, 2017

THROUGH

11 ELECTION

ELECTION DATE

Month

Day

Year

May

6,

2017

ELECTION TYPE

☐ Primary

☐ Runoff

☐ Other
Description

☒ General

☐ Special

12 OFFICE

OFFICE HELD (if any)

Pasadena ISD School Board Trustee -
Position 2

13 OFFICE SOUGHT (if known)

Re-Election to Pasadena ISD School Board
Trustee - Position 2

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CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME

Mariselle Quijano

15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM
POLITICAL
COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE

COMMITTEE NAME

☐ GENERAL

COMMITTEE ADDRESS

☐ SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ Additional Pages

17 CONTRIBUTION
TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ 0

2. TOTAL POLITICAL CONTRIBUTIONS
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 3,850.00

EXPENDITURE
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS,
UNLESS ITEMIZED

\$ 0

4. TOTAL POLITICAL EXPENDITURES

\$ 0

CONTRIBUTION
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY
OF REPORTING PERIOD

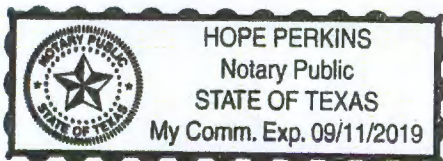
\$ 5,786.94

OUTSTANDING
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$

18 AFFIDAVIT



I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Mariselle Quijano
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Mariselle Quijano, this the 3rd
day of April, 2017, to certify which, witness my hand and seal of office.

Hope Perkins
Signature of officer administering oath

Hope Perkins
Printed name of officer administering oath

Notary
Title of officer administering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19 FILER NAME

Mariselle Quijano

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE

SUBTOTAL
AMOUNT

1.	<input type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 3,850.00
2.	<input type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/>	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/>	SCHEDULE E: LOANS	\$
5.	<input type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
6.	<input type="checkbox"/>	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/>	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/>	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/>	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/>	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/>	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/>	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:**2****2** FILER NAME

Mariselle Quijano

3 Filer ID (Ethics Commission Filers)**4** Date
03/07/17**5** Full name of contributor
Hamilton Living Trust –
Blair Hamilton Trustee☐ out-of-state PAC (ID#: _____)**6** Contributor address;
3410 ChambersCtCity; State; Zip Code
Missouri City, TX 77459**7** Amount of contribution (\$)
\$ 250.00**8** Principal occupation / Job title (See Instructions)
Living Trust Trustee**9** Employer (See Instructions)
Hamilton Living TrustDate
03/10/17Full name of contributor
John Phelps☐ out-of-state PAC (ID#: _____)Contributor address;
4207 FairmontCity; State; Zip Code
Pasadena, TX 77504Amount of contribution (\$)
\$ 500.00Principal occupation / Job title (See Instructions)
Self-EmployedEmployer (See Instructions)
State Farm InsuranceDate
03/10/17Full name of contributor
Steve Phelps☐ out-of-state PAC (ID#: _____)Contributor address;
5118 TurnberryCity; State; Zip Code
Pasadena, TX 77505Amount of contribution (\$)
\$ 500.00Principal occupation / Job title (See Instructions)
Self-EmployedEmployer (See Instructions)
InvestmentsDate
03/10/17Full name of contributor
Alicia & Kenneth
Phelps☐ out-of-state PAC (ID#: _____)Contributor address;
4207 Fairmont PkwyCity; State; Zip Code
Pasadena, TX 77504Amount of contribution (\$)
\$ 500.00Principal occupation / Job title (See Instructions)
Self-EmployedEmployer (See Instructions)
State Farm Insurance**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:**2****2** FILER NAME

Mariselle Quijano

3 Filer ID (Ethics Commission Filers)**4** Date
02/28/17**5** Full name of contributor
William R. Barmore☐ out-of-state PAC (ID#: _____)**7** Amount of contribution (\$)
\$1,000.00**6** Contributor address;
P.O. 34824City; State; Zip Code
Houston, TX 77234**8** Principal occupation / Job title (See Instructions)
Self-Employed**9** Employer (See Instructions)
Gallagher BarmoreDate
02/28/17Full name of contributor
John Michael Barmore☐ out-of-state PAC (ID#: _____)Amount of contribution (\$)
\$1,000.00

Contributor address;

City; State; Zip Code
809 Murphy Lane Friendswood, TX 77546Principal occupation / Job title (See Instructions)
Self-EmployedEmployer (See Instructions)
Gallagher BarmoreDate
3/11/17Full name of contributor
Marshall H. Kendrick☐ out-of-state PAC (ID#: _____)Amount of contribution (\$)
\$ 100.00

Contributor address;

City; State; Zip Code
4406 Shaun Drive Pasadena, TX 77504Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.