

# JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

|   |  |   |  |
|---|--|---|--|
| <b>The JC/OH Instruction Guide explains how to complete this form.</b>                              |  | <b>1</b> Filer ID<br>(Ethics Commission Filers)<br>00000010 | <b>2</b> Total pages filed:<br><br>5   |
| <b>3</b> CANDIDATE / OFFICEHOLDER NAME  | MS / MRS / MR  | FIRST<br>Maria  | MI   |
|   | NICKNAME   | LAST<br>Ramirez   | SUFFIX   |
| <b>OFFICE USE ONLY</b>  |  |   |  |
| Date Received<br><b>ELECTRONICALLY FILED</b><br>07/17/2024  |  |   |  |
| <b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS<br><br><input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY;   |   | ZIP CODE   |
|   | Date Hand-delivered or Date Postmarked   |   |  |
|   | Receipt #  | Amount  |  |
|   | Date Processed   |   |  |
| Date Imaged   |  |   |  |
| <b>5</b> CAMPAIGN TREASURER NAME  | MS / MRS / MR  | FIRST<br>Maria  | MI   |
|   | NICKNAME   | LAST<br>Ramirez   | SUFFIX   |
| <b>6</b> CAMPAIGN TREASURER ADDRESS<br><br>(Residence or Business)                                  | STREET ADDRESS (NO PO BOX PLEASE);   |   | APT / SUITE #; CITY; STATE; ZIP CODE   |
|   | AREA CODE PHONE NUMBER EXTENSION   |   |  |
| <b>7</b> CAMPAIGN TREASURER PHONE   |  |   |  |
| <b>8</b> REPORT TYPE  | <input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) |   |  |
|   | <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)   |   |  |
| <b>9</b> PERIOD COVERED   | Month Day Year<br>01/01/2024   |   | THROUGH Month Day Year<br>06/30/2024   |
| <b>10</b> ELECTION  | ELECTION DATE<br>Month Day Year<br>12/12/2020  |   | ELECTION TYPE<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> Other<br><input type="checkbox"/> General <input type="checkbox"/> Special |
|   | <b>11</b> OFFICE<br>OFFICE HELD (if any)<br>Municipal Court of Appeals, Judge District El Paso El Paso   |   | <b>12</b> OFFICE SOUGHT (if known)<br>Municipal Court of Appeals, Judge District El Paso   |

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# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH  
COVER SHEET PG 2

2 of 5

**13** C / OH NAME Ramirez, Maria **14** Filer ID (Ethics Commission Filers)  
00000010

**15** 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.

Additional Pages

|   |                                      |
|---|--------------------------------------|
| COMMITTEE TYPE<br><input type="checkbox"/> GENERAL<br><br><input type="checkbox"/> SPECIFIC | COMMITTEE NAME                       |
|   | COMMITTEE ADDRESS                    |
|   | COMMITTEE CAMPAIGN TREASURER NAME    |
|   | COMMITTEE CAMPAIGN TREASURER ADDRESS |

|                               |  |    |      |
|-------------------------------|--|----|------|
| <b>16</b> CONTRIBUTION TOTALS | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) | \$ | 0.00 |
|                               | 2. <b>TOTAL POLITICAL CONTRIBUTIONS</b><br>(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)                                       | \$ | 0.00 |
| EXPENDITURE TOTALS            | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES   | \$ | 0.00 |
|                               | 4. <b>TOTAL POLITICAL EXPENDITURES</b>   | \$ | 0.00 |
| CONTRIBUTION BALANCE          | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD   | \$ | 0.00 |
| OUTSTANDING LOAN TOTALS       | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD  | \$ | 0.00 |

**17** 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.

Maria Ramirez  
 \_\_\_\_\_  
 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

\_\_\_\_\_  
 Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath

# SUBTOTALS - JC/OH

|  |   |                                |                            |
|--|---|--------------------------------|----------------------------|
| <b>18 FILER NAME</b><br>Ramirez, Maria |   | <b>19 Filer ID</b><br>00000010 | (Ethics Commission Filers) |
| <b>20 SCHEDULE SUBTOTALS</b>           |   |                                | <b>SUBTOTAL AMOUNT</b>     |
|  | <b>NAME OF SCHEDULE</b>   |                                |                            |
| 1.                                     | <input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)             | \$                             | 0.00                       |
| 2.                                     | <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS             | \$                             | 0.00                       |
| 3.                                     | <input checked="" type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)                         | \$                             | 0.00                       |
| 4.                                     | <input checked="" type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)   | \$                             | 0.00                       |
| 5.                                     | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS        | \$                             | 0.00                       |
| 6.                                     | <input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS                                | \$                             | 0.00                       |
| 7.                                     | <input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS       | \$                             | 0.00                       |
| 8.                                     | <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD                           | \$                             | 0.00                       |
| 9.                                     | <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS                  | \$                             | 0.00                       |
| 10.                                    | <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH             | \$                             |                            |
| 11.                                    | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS                | \$                             |                            |
| 12.                                    | <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$                             |                            |

# PLEGGED CONTRIBUTIONS (JUDICIAL)

## SCHEDULE B(J)

|  |   |   |  |
|--|---|---|--|
| <b>The Instruction Guide explains how to complete this form.</b> |   | <b>1</b> Total pages Schedule B(J):<br>Sch: 1/1 Rpt: 4/5                        |  |
| <b>2</b> FILER NAME<br>Ramirez, Maria                            |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00000010                        |  |
| <b>4</b> TOTAL OF UNITEMIZED PLEDGES                             |   | \$ 0.00   |  |
| <b>5</b> Date  | <b>6</b> Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) | <b>8</b> Amount of pledge (\$)  | <b>9</b> In-kind description (If applicable) |
|  | <b>7</b> Pledgor Address; City; State; Zip Code                                       |   |  |
|  |   | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |  |
| <b>10</b> Pledgor's principal occupation                         |   | <b>11</b> Pledgor's job title   |  |
| <b>12</b> Pledgor's employer/law firm                            |   | <b>13</b> Law firm of pledgor's spouse (if any)                                 |  |
| <b>14</b> If pledgor is a child, law firm of parent(s) (if any)  |   |   |  |

# LOANS (JUDICIAL)

# SCHEDULE E(J)

|  |  |   |
|--|--|---|
| <b>The Instruction Guide explains how to complete this form.</b>           |  | <b>1</b> Total pages Schedule E(J):<br>Sch: 1/1 Rpt: 5/5  |
| <b>2</b> FILER NAME<br>Ramirez, Maria                                      |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00000010  |
| <b>4</b> TOTAL OF UNITEMIZED LOANS   |  | <b>\$</b> 0.00  |
| <b>5</b> Date of loan  | <b>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) | <b>9</b> Loan Amount (\$)   |
| <b>6</b> Is lender a financial institution?                                | <b>8</b> Lender address; City; State; Zip Code                                 | <b>10</b> Interest Rate   |
|  |  | <b>11</b> Maturity Date   |
| <b>12</b> Lender's Principal Occupation                                    |  | <b>13</b> Lender's Job Title  |
| <b>14</b> Lender's Employer/Law Firm                                       |  | <b>15</b> Law Firm of lender's spouse (if any)  |
| <b>16</b> If lender is child, law firm of parent(s) (if any)               |  |   |
| <b>17</b> Description of Collateral<br><input type="checkbox"/> None       |  | <b>18</b> Check if personal funds were deposited into political account<br>(See Instructions)<br><input type="checkbox"/> |
| <b>19</b> GUARANTOR INFORMATION<br><input type="checkbox"/> not applicable | <b>20</b> Name of guarantor  | <b>22</b> Amount Guaranteed (\$)  |
|  | <b>21</b> Guarantor address; City; State; Zip Code                             |   |
| <b>23</b> Guarantor's Principal Occupation                                 |  | <b>24</b> Guarantor's Job Title   |
| <b>25</b> Guarantor's Employer/Law Firm                                    |  | <b>26</b> Law Firm of guarantor's spouse (if any)   |
| <b>27</b> If guarantor is child, law firm of parent(s) (if any)            |  |   |
|  |  |   |