CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

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

1 ACCOUNT # (Ethics Commission Filers)

2 Total pages filed:

OFFICE USE ONLY

Date Received: 12:53 p.m. JAN 09 2014

Date Hand-delivered or Postmarked

Receipt #

Amount

Date Processed

Date Imaged

RECD

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR | FIRST: Rodolfo "Rudy" | MI | NICKNAME | LAST: Gonzalez | SUFFIX

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

☐ change of address

ADDRESS / PO BOX: 100 N. Closner | APT / SUITE #: | CITY: Edinburg | STATE: Tx | ZIP CODE: 78539

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE: (956) | PHONE NUMBER: 318-2375 | EXTENSION

6 CAMPAIGN TREASURER NAME

MS / MRS / MR | FIRST: Jose | MI: Luis | NICKNAME | LAST: Calderon | SUFFIX

7 CAMPAIGN TREASURER ADDRESS (residence or business)

STREET ADDRESS (NO PO BOX PLEASE): 703 East Freida | APT / SUITE #: | CITY: Pharr | STATE: Tx | ZIP CODE: 78577

8 CAMPAIGN TREASURER PHONE

AREA CODE: (956) | PHONE NUMBER: 787-1843 | EXTENSION

9 REPORT TYPE

- [x] 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: 07/01/20 THROUGH Month Day Year: 12/31/2013

11 ELECTION

ELECTION DATE Month Day Year: 03/04/2014

ELECTION TYPE
- [x] Primary
- [ ] Runoff
- [ ] General
- [ ] Special

12 OFFICE

OFFICE HELD (if any): Hidalgo County Court At Law No 1.

13 OFFICE SOUGHT (if known): Hidalgo County Court At Law No. 1

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME: Rodolfo "Rudy" Gonzalez

15 ACCOUNT # (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

☐ GENERAL

☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

None

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	$ None
	2. **TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 23,896.49
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF $100 OR LESS, UNLESS ITEMIZED	$ None
	4. **TOTAL POLITICAL EXPENDITURES**	$ 14,640.01
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 139,369.73
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ None

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.

MARIA ANTONIA GARCIA
Notary Public, State of Texas
My Commission Expires
February 06, 2016

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said RODOLFO "RUDY" GONZALEZ this the 27th day of December, 20 13, to certify which, witness my hand and seal of office.

Maria A. Garcia	MARIA A. GARCIA	NOTARY PUBLIC
Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME: Rodolfo "Rudy" Gonzalez

3 ACCOUNT # (Ethics Commission Filers):

4 Date	5 Full name of contributor (☐ out-of-state PAC (ID#:_____)) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/04/13	Rafael De la Garza 4943 S. Jackson Ste. 106 Edinburg, Tx 78539	500.00 Check (If travel outside of Texas, complete Schedule T)	

9 Principal occupation / Job title (See Instructions): Attorney

10 Employer (See Instructions):

Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
7/1/13	Arturo Martinez 414 S. Cage BLVD Pharr, Tx 78577	500.00 Check (If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions): Attorney

Employer (See Instructions):

Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
7/3/13	Cynthia Contreras 10113 N. 10th St Suite L McAllen, TX 78504	500.00 Check (If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions): Attorney

Employer (See Instructions):

Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
7/2/13	Marcos Barrera 10113 N. 10th St Suite A McAllen, TX 78504	500.00 Check (If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions): Attorney

Employer (See Instructions):

Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/12/13	Border Health Pac 612 W. Nolana McAllen, TX 78504	5,000.00 Check (If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions): Health PAC

Employer (See Instructions):

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME: Rodolfo "Rudy" Gonzalez

3 ACCOUNT # (Ethics Commission Filers):

4 Date	5 Full name of contributor (☐ out-of-state PAC (ID#:_____)) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
8/23/13	Renee Rodriguez 2724 W. Canton RD Edinburg, TX 78539	500.00 Check (If travel outside of Texas, complete Schedule T)	

9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
Attorney	

Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
8/13/13	Mike Lopez 2007 East Griffin Parkway Mission, TX 78572	500.00 Check (If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Attorney	

Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
8/13/13	Patricia Love 2720 W. Canton, Suite B Edinburg, TX 78539	500.00 Check (If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
8/16/13	Agustin Hernandez 213 W. Exy 83 Suite A Pharr, TX 78577	1,000.00 Check (If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Attorney	

Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
8/1/13	Rex Wilde P.O. Box 3330 McAllen, TX 78502	500.00 Check (If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Self Employed - Plumbing Service	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/02/13	Marco Alberto Cantu 801 W. Nolana Suite 320 McAllen, Tx 78504	1,000.00 Check (If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions): Attorney		10 Employer (See Instructions):	
11/13/13	Gregory E. Turley P.O. 312 Thunderbird McAllen, TX 78504	250.00 Check (If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions): Attorney		Employer (See Instructions):	
11/13/13	Armando Adame 809 A Savanah Ave #548 McAllen, Texas 78503	200.00 Check (If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions): Self Employed Insurance		Employer (See Instructions):	
11/13/13	Cynthia Cantu P.O. Box 2719 Edinburg, TX 78540	300.00 Check (If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions): Attorney		Employer (See Instructions):	
11/13/13	Chris Wicker 100 NW Greenbriar Sq McAllen, TX 78503	250.00 Check (If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions): Self Employed		Employer (See Instructions): Pizza Hut	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME: Rodolfo "Rudy" Gonzalez

3 ACCOUNT # (Ethics Commission Filers):

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
11/13/13	Veronica Gonzalez P.O. Box 1416 McAllen TX 78505	300.00 Check (If travel outside of Texas, complete Schedule T)	

9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
Attorney	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
11/13/13	Michael D. Tuttle P.O. Box 4450 Edinburg, TX 78540	500.00 Check (If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Attorney	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
11/13/13	Paul R. Wilson 6900 Pecking St McAllen, TX 78504	1,000.00 (If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Attorney	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
11/13/13	J. Michael Moore 4900 N. 10th ST Suite E-3 McAllen, TX 78504	750.00 Check (If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Attorney	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
11/13/13	Manuel Guerra 320 W. Pecan BLVD McAllen, TX 78501	750.00 Check (If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Attorney	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME: Rodolfo "Rudy" Gonzalez

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
11/12/13	Robert J. Salinas 2101 Wood Ave Donna, Tx 78537	500.00 Check (If travel outside of Texas, complete Schedule T)	

9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
Attorney	

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
11/13/13	Paul Medina Mesquite Plaza 3101 N. Jackson Rd McAllen, Tx 78501	2,500.00 Check (If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/29/3	Roerig, Oliveira & Fisher LLP 855 W. Price Road Suite 9 Brownsville, Texas 78520	1,000.00 Check (If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
11/13/2013	Joe Chapa 6521 N. 10th Ste A McAllen, Tx 78504	(If travel outside of Texas, complete Schedule T)	$946.49 Political Function Paid directly to McAllen Country Club

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Attorney	Zaguirre & Chapa

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	

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 foradditional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME: Rodolfo "Rudy" Gonzalez

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Full name of contributor (☐ out-of-state PAC (ID#:_____)) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
7/15/13	Ramon Garcia / Transportes Canales 116 E. Coma Ave. Ste 196 Hidalgo Tx	1,500.00 Check (If travel outside of Texas, complete Schedule T)	

9 Principal occupation / Job title (See Instructions): Self Employed Transportes Canales

10 Employer (See Instructions):

Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
7/11/13	Rey M. Merino 1012 Martin Ave. Ste B McAllen, Tx 78504-3215	1,500 Check (If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions): Attorney

Employer (See Instructions):

Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
7/11/13	Hector Bustos P.O. Box 2228 Edinburg, Tx 78540	250.00 Check (If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions): Attorney

Employer (See Instructions):

Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
7/19/13	Jone, Galligan, Key & Lozano LLP P.O. Drawer 1247 Weslaco, Tx 78502	1,000.00 Check (If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions): Attorneys

Employer (See Instructions):

Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
8/12/13	Robert Fernandez 215 W. Stubbs St Edinburg, Tx 78539-4358	1,500.00 Check (If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions): Attorney

Employer (See Instructions):

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME: Rodolfo "Rudy" Gonzalez

3 ACCOUNT # (Ethics Commission Filers):

4 Date	5 Full name of contributor (☐ out-of-state PAC (ID#:)) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
8/12/13	Joel Trevino 1401 W. Polk Pharr, TX 78577	500.00 Check (If travel outside of Texas, complete Schedule T)	

9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
Attorney	

Date	Full name of contributor (☐ out-of-state PAC (ID#:)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
6/24/13	R.P. Bob Sanchez 1507 Marigold McAllen, TX 78501	100.00 Check (If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Attorney	

Date	Full name of contributor (☐ out-of-state PAC (ID#:)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
8/13/13	Mark M. Talbot P.O. Box 684 McAllen, TX 78502	200.00 Check (If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Attorney	

Date	Full name of contributor (☐ out-of-state PAC (ID#:)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/11/13	Ellis, Koeneke + Ramirez LLP 1101 Chicago Ave. McAllen, TX 78501	500.00 Check (If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Attorneys	

Date	Full name of contributor (☐ out-of-state PAC (ID#:)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/06/13	Julian Gomez 7824 N. 5th McAllen, TX 78504	500.00 Check (If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Attorney	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J):

2 FILER NAME: Rodolfo "Rudy" Gonzalez

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Full name of contributor (☐ out-of-state PAC (ID#: ____)) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description(if applicable)
11/05/2013	Thomas S. Polzin 801 Pecan BWD McAllen, Tx 78577	100.00 Check (If travel outside of Texas, complete Schedule T)	

9 Contributor's principal occupation: Self Employed

10 Contributor's job title: Polzin Insurance

11 Contributor's employer/law firm:

12 Law firm of contributor's spouse (if any):

13 If contributor is a child, law firm of parent(s) (if any):

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description(if applicable)
11/14/2013	Robert or Rhonda Garza P.O. Box 577 Mercedes, Tx 78570	250.00 Check (If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation: Self Employed

Contributor's job title: McFee Insurance

Contributor's employer/law firm:

Law firm of contributor's spouse (if any):

If contributor is a child, law firm of parent(s) (if any):

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description(if applicable)
11/13/2013	Pepe Cavazos De Baca 1300 N. 10th Suite 310 McAllen, Tx 78501	250.00 (If travel outside of Texas, complete Schedule T)	Political Pictures in Magazine Social Life

Contributor's principal occupation:

Contributor's job title:

Contributor's employer/law firm:

Law firm of contributor's spouse (if any):

If contributor is a child, law firm of parent(s) (if any):

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

IN-KIND CONTRIBUTION OR POLITICAL EXPENDITURE FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

The Instruction Guide explains how to complete this form.

1 Total pages Schedule T:

2 FILER NAME Rodolfo "Rudy" Gonzalez

3 ACCOUNT # (Ethics Commission Filers)

4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee
Joe Chapa Attorney

5 Contribution / Expenditure reported on:

- [x] Schedule A
- [ ] Schedule B
- [ ] Schedule C
- [ ] Schedule D
- [x] Schedule F
- [ ] Schedule G
- [ ] Schedule H
- [ ] Schedule N
- [ ] COH-UC
- [ ] COH-T
- [ ] PAC-C
- [ ] PAC-E

6 Dates of travel

7 Name of person(s) traveling

8 Departure city or name of departure location

9 Destination city or name of destination location

10 Means of transportation

11 Purpose of travel (including name of conference, seminar, or other event)

Name of Contributor / Corporation or Labor Organization / Pledgor / Payee
Pepe Chavez De Baca

Contribution / Expenditure reported on:

- [x] Schedule A
- [ ] Schedule B
- [ ] Schedule C
- [ ] Schedule D
- [x] Schedule F
- [ ] Schedule G
- [ ] Schedule H
- [ ] Schedule N
- [ ] COH-UC
- [ ] COH-T
- [ ] PAC-C
- [ ] PAC-E

Dates of travel

Name of person(s) traveling

Departure city or name of departure location

Destination city or name of destination location

Means of transportation

Purpose of travel (including name of conference, seminar, or other event)

Name of Contributor / Corporation or Labor Organization / Pledgor / Payee

Contribution / Expenditure reported on:

- [ ] Schedule A
- [ ] Schedule B
- [ ] Schedule C
- [ ] Schedule D
- [ ] Schedule F
- [ ] Schedule G
- [ ] Schedule H
- [ ] Schedule N
- [ ] COH-UC
- [ ] COH-T
- [ ] PAC-C
- [ ] PAC-E

Dates of travel

Name of person(s) traveling

Departure city or name of departure location

Destination city or name of destination location

Means of transportation

Purpose of travel (including name of conference, seminar, or other event)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME: Rodolfo "Rudy" Gonzalez

3 ACCOUNT # (Ethics Commission Filers):

4 Date: 10/23/13

5 Payee name: MYRON

6 Amount ($): 1,992.63

7 Payee address; City; State; Zip Code: P.O. Box 660888 Dallas, Tx 75266-0888

8 PURPOSE OF EXPENDITURE — (a) Category (See categories listed at the top of this schedule): Calendars / Advertising — (b) Description (If travel outside of Texas, complete Schedule T):

9 Complete ONLY if direct expenditure to benefit C/OH — Candidate / Officeholder name: — Office sought: — Office held:

Date: 10/26/13

Payee name: Advocacy Alliance Center of Texas (AACT)

Amount ($): 2,500.00

Payee address; City; State; Zip Code: 612 Nolana Suite 430 McAllen, Tx 78504

PURPOSE OF EXPENDITURE — Category (See categories listed at the top of this schedule): 501c(3) Get Out the Vote — Description (If travel outside of Texas, complete Schedule T):

Complete ONLY if direct expenditure to benefit C/OH — Candidate / Officeholder name: — Office sought: — Office held:

Date: 7/17/13

Payee name: P.S. SA. North High Football

Amount ($): 500.00

Payee address; City; State; Zip Code: 805 W. Ridge Rd, San Juan Tx

PURPOSE OF EXPENDITURE — Category (See categories listed at the top of this schedule): Advertising for Campaign — Description (If travel outside of Texas, complete Schedule T):

Complete ONLY if direct expenditure to benefit C/OH — Candidate / Officeholder name: — Office sought: — Office held:

Date: 9/25/13

Payee name: La Union Del Pueblo Entero (LUPE)

Amount ($): 900.00

Payee address; City; State; Zip Code: P.O. Box 188 San Juan, Tx 78589

PURPOSE OF EXPENDITURE — Category (See categories listed at the top of this schedule): Advertising for Campaign — Description (If travel outside of Texas, complete Schedule T):

Complete ONLY if direct expenditure to benefit C/OH — Candidate / Officeholder name: — Office sought: — Office held:

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	OTHER (enter a category not listed above)
Fees	Printing Expense	Office Overhead/Rental Expense	

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME: Rodolfo "Rudy" Gonzalez

3 ACCOUNT # (Ethics Commission Filers):

4 Date: 12/09/2013

5 Payee name: Democratic Party

6 Amount ($): 250.00

7 Payee address; City; State; Zip Code: 3307 N. McCall Suite B, McAllen Tex 78504

8 PURPOSE OF EXPENDITURE

(a) Category (See categories listed at the top of this schedule): Political Function Catering

(b) Description (If travel outside of Texas, complete Schedule T):

9 Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name:

Office sought:

Office held:

Date: 12/10/2013

Payee name: McAllen First Assembly of God

Amount ($): 70.00

Payee address; City; State; Zip Code: 2401 N. McCall Rd, McAllen, Tx 78501

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): 501C(3) Educational Fund

Description (If travel outside of Texas, complete Schedule T):

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name:

Office sought:

Office held:

Date: 8/27/13

Payee name: Renaissance Cancer Foundation

Amount ($): 1,000.00

Payee address; City; State; Zip Code: 2817 Michael Angelo Drive, Edinburg, Tx 78539

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): 501C(3) Advertising

Description (If travel outside of Texas, complete Schedule T):

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name:

Office sought:

Office held:

Date: 9/21/13

Payee name: Hidalgo County Bar Foundation

Amount ($): 1,000.00

Payee address; City; State; Zip Code: 314 S. Closner, Edinburg, Tx 78539

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Political Advertising

Description (If travel outside of Texas, complete Schedule T):

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name:

Office sought:

Office held:

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	OTHER (enter a category not listed above)
Fees	Printing Expense	Office Overhead/Rental Expense	

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME: Eddie "Rudy" Gonzalez

3 ACCOUNT # (Ethics Commission Filers)

4 Date: 10/19/2013

5 Payee name: Sergio Munoz Golf Tournament

6 Amount ($): 1,500.00

7 Payee address; City; State; Zip Code: 1110 S. Closner, Edinburg, Tx 78539

8 PURPOSE OF EXPENDITURE

(a) Category (See categories listed at the top of this schedule): Political Advertising

(b) Description (If travel outside of Texas, complete Schedule T):

9 Complete ONLY if direct expenditure to benefit C/OH — Candidate / Officeholder name: | Office sought: | Office held:

Date: 11/13/2013

Payee name: Joe Chapa

Amount ($): 946.49

Payee address; City; State; Zip Code: 6521 N. 10th Ste A, McAllen, Tx 78504

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): In Kind Contribution for Political Function

Description (If travel outside of Texas, complete Schedule T):

Complete ONLY if direct expenditure to benefit C/OH — Candidate / Officeholder name: | Office sought: | Office held:

Date: 11/15/2013

Payee name: Twin Sycamore Golf Tournament

Amount ($): 500.00

Payee address; City; State; Zip Code: 300 E. Pecan, McAllen, Tx 78501

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Political Advertising

Description (If travel outside of Texas, complete Schedule T):

Complete ONLY if direct expenditure to benefit C/OH — Candidate / Officeholder name: | Office sought: | Office held:

Date: 11/15

Payee name: United States Postal Service

Amount ($): 184.00

Payee address; City; State; Zip Code: 501 N. McCall Rd, Edinburg, Tx 78539

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Stamps for Mailing Calendars/Christmas Greetings

Description (If travel outside of Texas, complete Schedule T): Political

Complete ONLY if direct expenditure to benefit C/OH — Candidate / Officeholder name: | Office sought: | Office held:

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	OTHER (enter a category not listed above)
Fees	Printing Expense	Office Overhead/Rental Expense	

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME: Rodolfo "Rudy" Gonzalez

3 ACCOUNT # (Ethics Commission Filers)

4 Date: 11/12/2013

5 Payee name: Hidalgo County Democratic Party

6 Amount ($): 1,500.00

7 Payee address; City; State; Zip Code: 3307 N. McCall Suite B McAllen, Tx 78501

8 PURPOSE OF EXPENDITURE

(a) Category (See categories listed at the top of this schedule): Filing Fees for Re-Election

(b) Description (If travel outside of Texas, complete Schedule T):

9 Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name | Office sought | Office held

Date: 2/13/2013

Payee name: Carrazco Catering

Amount ($): 2,273.38

Payee address; City; State; Zip Code: 903 W. Business 83 Alamo Tx 78516

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Political Function Expense

Description (If travel outside of Texas, complete Schedule T):

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name | Office sought | Office held

Date: 2/13/2013

Payee name: Cynthia Cabes, J.P.C.

Amount ($): 295.00

Payee address; City; State; Zip Code: 4310 N. Doolittle Rd. Edinburg, Tx 78541

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Political Function Expense

Description (If travel outside of Texas, complete Schedule T):

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name | Office sought | Office held

Date: 12/23/2013

Payee name: Jose Luis Fuentes

Amount ($): 175.00

Payee address; City; State; Zip Code: 1116 E. Cano Edinburg Texas 78539

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Delivering Political Calendars to Housing Authority Members

Description (If travel outside of Texas, complete Schedule T):

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name | Office sought | Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED