

# JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH  
COVER SHEET PG 1

The JC/OH Instruction Guide explains how to complete this form.		1 ACCOUNT # (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI MR ARNOLDO NICKNAME LAST SUFFIX CANTU JR	<div style="border: 1px solid black; padding: 5px;"> <p style="text-align: center; margin: 0;"><b>OFFICE USE ONLY</b></p> <p>Date Received <i>Stelmach</i></p> <p>Date Hand-delivered or Postmarked</p> <p>Receipt # <i>Stelmach</i> Amount</p> <p>Date Processed <i>Stelmach</i></p> <p>Date Imaged <i>Stelmach</i></p> </div>	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> change of address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 211 WEST PARK PHARR TX 78571		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (956) 318-2460		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI MR DAVID R NICKNAME LAST SUFFIX GORENA		
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 420 W. UNIVERSITY DR. Edinburg Tx 78539		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (956) 381-5605		
9 REPORT TYPE	<input checked="" 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 type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year    THROUGH    Month Day Year 6 / 30 / 10    THROUGH    1 / 15 / 11		
11 ELECTION	ELECTION DATE Month Day Year 03 / 02 /	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any) #5 Judge; Hid. Co. Court AT LAW	13 OFFICE SOUGHT (if known)	
14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS <input type="checkbox"/> additional pages	<p style="font-size: small; margin: 0;">DIRECT CAMPAIGN EXPENDITURES ARE CAMPAIGN EXPENDITURES MADE BY OTHERS WITHOUT THE CANDIDATE'S PRIOR CONSENT OR APPROVAL. CANDIDATES ARE REQUIRED TO DISCLOSE THIS INFORMATION ONLY IF THEY RECEIVE NOTIFICATION OF THE DIRECT CAMPAIGN EXPENDITURE.</p> <p>Name</p> <hr/> <p>Address / PO Box; Apt. / Suite #; City; State; Zip Code</p>		

**GOTO PAGE 2**

# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH  
COVER SHEET PG 2

15 C/OH NAME \_\_\_\_\_ 16 ACCOUNT # (Ethics Commission Filers) \_\_\_\_\_

17 NOTICE FROM POLITICAL COMMITTEE(S)

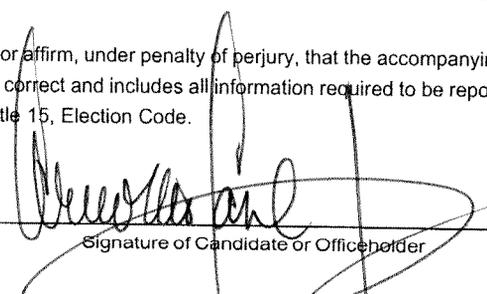
THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO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

<input type="checkbox"/> additional pages	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

18 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 5400 <sup>00</sup>
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 370.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 50.136 <sup>90</sup>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

19 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.



\_\_\_\_\_  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Arnoldo Cantu Jr., this the 18 day of JAN, 20 11, to certify which, witness my hand and seal of office.

Joanna B. Guerra  
Signature of officer administering oath

JOANNA G. GUERRA  
Print name of officer administering oath

Notary  
Title of officer administering oath

**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		3 ACCOUNT # (Ethics Commission Filers)	
4 Date July 13 2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>DANIEL HERNANDEZ</b> 6 Contributor address; City; State; Zip Code <b>5811 N. 3<sup>RD</sup> LANE MCALLEN, TX 78504</b>	7 Amount of contribution (\$) <b>500</b> <small>(If travel outside of Texas, complete Schedule T)</small>	8 In-kind contribution description (if applicable)
9 Contributor's principal occupation <b>ATTY</b>		10 Contributor's job title	
11 Contributor's employer/law firm <b>SAME AS ABOVE</b>		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date July 19 <sup>th</sup> 2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>MARCO A. CANTU</b> Contributor address; City; State; Zip Code <b>801 W NOLANA STE 320 MCALLEN TX 78504</b>	Amount of contribution (\$) <b>1000</b> <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Contributor's principal occupation <b>ATTY</b>		Contributor's job title	
Contributor's employer/law firm <b>S/A/A</b>		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date June 29 2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Ricardo Godinez</b> Contributor address; City; State; Zip Code <b>2415 N. 10<sup>th</sup> St. MCALLEN, TX 78501</b>	Amount of contribution (\$) <b>1000</b> <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Contributor's principal occupation <b>ATTY</b>		Contributor's job title	
Contributor's employer/law firm <b>SAME AS ABOVE</b>		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>			

# 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		3 ACCOUNT # (Ethics Commission Filers)	
4 Date Aug 23 2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillip Harris 6 Contributor address; City; State; Zip Code 420 S. Missouri Ave WESLACO TX 78596	7 Amount of contribution (\$) 300	8 In-kind contribution description (if applicable)
9 Contributor's principal occupation ATTY		10 Contributor's job title	
11 Contributor's employer/law firm SAME AS ABOVE		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date JUNE 14 2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Office of Richard Garza Contributor address; City; State; Zip Code 4610 S. CLOSER BLVD EDINBURG TX 78539	Amount of contribution (\$) 500	In-kind contribution description (if applicable)
Contributor's principal occupation ATTY		Contributor's job title	
Contributor's employer/law firm S/A/A		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date JUNE 14 2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Office of Richard Garza Contributor address; City; State; Zip Code 127 N. ALAMO RD ALAMO TX 78516	Amount of contribution (\$) 500	In-kind contribution description (if applicable)
Contributor's principal occupation ATTY		Contributor's job title	
Contributor's employer/law firm S/A/A		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.

**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 3 ACCOUNT # (Ethics Commission Filers)

4 Date JUNE 24 2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>RENE CASTELLANOS JR.</b> 6 Contributor address; City; State; Zip Code 2913 LA PUERTA AVE Edinburg Tx 78541	7 Amount of contribution (\$)  1000	8 In-kind contribution description (if applicable)
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(If travel outside of Texas, complete Schedule T)

9 Contributor's principal occupation **ATTY** 10 Contributor's job title

11 Contributor's employer/law firm **LAW OFFICE OF RENE CASTELLANOS** 12 Law firm of contributor's spouse (if any)

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

Date July 16 2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>ROSELIO GARZA</b> Contributor address; City; State; Zip Code P.O. Box 720074 McAllen, TX 78504	Amount of contribution (\$)  300	In-kind contribution description (if applicable)
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(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation **ATTY** Contributor's job title

Contributor's employer/law firm **SAME AS ABOVE** Law firm of contributor's spouse (if any)

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

Date July 20 2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>MARCO A. DELUNA</b> Contributor address; City; State; Zip Code 5256 N. MAYBERRY ST. MISSION TX 78573	Amount of contribution (\$)  300	In-kind contribution description (if applicable)
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(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation **ATTY** Contributor's job title

Contributor's employer/law firm **S/A/A** 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.

# 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            |
| Event Expense       | Polling Expense               | Travel Out Of District           | Candidate/Officeholder/Political Committee |
| 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	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 12/20/10	5 Payee name AMM
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6 Amount (\$) 370	7 Payee address; City; State; Zip Code 1101 E. 495 STE. G SAN JUAN TX 78589
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) HAPPY Holidays ADVERTISING: from Co.Ct. Judges	(b) Description (If travel outside of Texas, complete Schedule T)
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Arnoldo Cantu Jr.	Office sought	Office held CO Judge Ct. #5
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Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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