

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM **JC/OH**
COVER SHEET PG 2

13 C/OH NAME Maldonado, Enrique Omar (Mr.)

14 ACCOUNT # (Ethics Commission filers)
00000001

15 NOTICE FROM POLITICAL COMMITTEE(S)

.. This box is for notice of political expenditures 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

additional pages

COMMITTEE CAMPAIGN TREASURER ADDRESS

16 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	0.00
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2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	71,525.00
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EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	0.00
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4. TOTAL POLITICAL EXPENDITURES	\$	22,759.81
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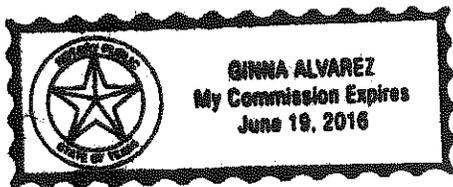
CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	387,934.26
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OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00
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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.

[Signature]

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Enrique Omar Maldonado, this the 12th day of July, 20 13, to certify which, witness my hand and seal of office.

[Signature]
Signature of officer administering oath

Gina Alvarez
Print name of officer administering oath

Notary Public
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 PAGE # Schedule: 2/35 Report: 4/53	
2 FILER NAME Maldonado, Enrique Omar (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 06/18/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) ATLAS, HALL & RODRIGUEZ, LLP 6 Contributor address; City; State; Zip Code P.O. DRAWER 3725 MCALLEN, TX 78502-3725	7 Amount of contribution (\$) \$1,500.00	8 In-kind contribution description (if applicable)
9 Contributor's principal occupation ATTORNEY		10 Contributor's job title ATTORNEY	
11 Contributor's employer / law firm ATLAS, HALL & RODRIGUEZ, LLP		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 06/19/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) BARNETT, KENNETH (Mr.) Contributor address; City; State; Zip Code 16203 BRISTOL POINTE DR. DELRAY BEACH, FL 33446	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Contributor's principal occupation INDIVIDUAL		Contributor's job title INDIVIDUAL	
Contributor's employer / law firm INDIVIDUAL		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 06/19/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) BARRERA, SANCHEZ & ASSOCIATES, P.C. Contributor address; City; State; Zip Code 10113 N. 10TH, SUITE A MCALLEN, TX 78504	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Contributor's principal occupation ATTORNEY		Contributor's job title ATTORNEY	
Contributor's employer / law firm BARRERA, SANCHEZ & ASSOCIATES, P.C.		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/35 Report: 5/53	
2 FILER NAME Maldonado, Enrique Omar (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 06/29/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) BLACK, BRANDON (Mr.) 6 Contributor address; City; State; Zip Code 7409 ROYAL GLEN TRAIL MCKINNEY, TX 75070	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
9 Contributor's principal occupation INDIVIDUAL		10 Contributor's job title INDIVIDUAL	
11 Contributor's employer / law firm INDIVIDUAL		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 06/14/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) BURKETT, JASON (Mr.) Contributor address; City; State; Zip Code 4336 N. MCCOLL RD. MCALLEN, TX 78504	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor's principal occupation DENTIST		Contributor's job title DENTIST	
Contributor's employer / law firm BURKETT DENTISTRY		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 06/18/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) BUSTOS, HECTOR (Mr.) Contributor address; City; State; Zip Code P.O. BOX 2228 EDINBURG, TX 78540	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor's principal occupation SOLO PRACTITIONER		Contributor's job title ATTORNEY	
Contributor's employer / law firm HECTOR BUSTOS ATTORNEY AT LAW		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/35 Report: 6/53	
2 FILER NAME Maldonado, Enrique Omar (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 06/14/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) CARLOS E. ORTEGON P.C. 6 Contributor address; City; State; Zip Code 6521 N. 10TH ST., STE F MCALLEN, TX 78504	7 Amount of contribution (\$) \$2,000.00	8 In-kind contribution description (if applicable)
9 Contributor's principal occupation SOLO PRACTITIONER		10 Contributor's job title ATTORNEY	
11 Contributor's employer / law firm CARLOS E. ORTEGON, P.C.		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 06/20/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) CASTANEDA, MARISSA (Mrs.) Contributor address; City; State; Zip Code 5021 ELK LANE EDINBURG, TX 78539	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Contributor's principal occupation CHIEF OPERATING OFFICER		Contributor's job title CHIEF OPERATING OFFICE	
Contributor's employer / law firm DOCTORS HOSPITAL AT RENAISSANCE		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 06/22/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) CASTANEDA, OSCAR (Mr.) Contributor address; City; State; Zip Code 5021 ELK LANE EDINBURG, TX 78539	Amount of contribution (\$) \$210.00	In-kind contribution description (if applicable)
Contributor's principal occupation BUSINESS MAN		Contributor's job title OWNER	
Contributor's employer / law firm CAST SHEET METAL		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/35 Report: 7/53	
2 FILER NAME Maldonado, Enrique Omar (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 06/19/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) CAVAZOS, CHRISTOPHER (Mr.) 6 Contributor address; City; State; Zip Code 2102 FOREST LN. WESLACO, TX 78596-9419	7 Amount of contribution (\$) \$1,000.00	8 In-kind contribution description (if applicable)
9 Contributor's principal occupation SOLO PRACTITIONER		10 Contributor's job title ATTORNEY	
11 Contributor's employer / law firm LAW OFFICE OF CHRISTOPHER CAVAZOS		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 06/20/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) CEDILLO, EDNA (Ms.) Contributor address; City; State; Zip Code 909 SOUTH 10TH AVE. EDINBURG, TX 78501	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Contributor's principal occupation SOLO PRACTITIONER		Contributor's job title ATTORNEY	
Contributor's employer / law firm LAW OFFICE OF EDNA CEDILLO		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 06/20/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) CHAPA, JOE Jr. (Mr.) Contributor address; City; State; Zip Code 6517 N. 10TH ST. MCALLEN, TX 78504	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor's principal occupation ATTORNEY		Contributor's job title ATTORNEY	
Contributor's employer / law firm YZAGUIRRE & CHAPA, P.C.		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/35 Report: 8/53	
2 FILER NAME Maldonado, Enrique Omar (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 06/22/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) CHARLES SHEARS / TEJANO MART 6 Contributor address; City; State; Zip Code 220 S. 'K' CENTER STREET MCALLEN, TX 78501	7 Amount of contribution (\$) \$175.00	8 In-kind contribution description (if applicable) GIFT CERTIFICATE (DOOR PRIZE)
9 Contributor's principal occupation TEJANO MART		10 Contributor's job title TEJANO MART	
11 Contributor's employer / law firm TEJANO MART		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 06/19/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) DAVENPORT, DEWITT (Mr.) Contributor address; City; State; Zip Code 5013 OAKMONT CIRCLE HARLINGEN, TX 78552	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Contributor's principal occupation BUSINESS MAN		Contributor's job title OWNER	
Contributor's employer / law firm SELF EMPLOYED		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 06/20/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) DAVID E. CAZARES PC Contributor address; City; State; Zip Code 1632 N. 10TH ST., STE B MCALLEN, TX 78501	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor's principal occupation ATTORNEY		Contributor's job title ATTORNEY	
Contributor's employer / law firm DAVID E. CAZARES PC		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/35 Report: 9/53	
2 FILER NAME Maldonado, Enrique Omar (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 06/19/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) DAVILA, MARIO (Mr.) 6 Contributor address; City; State; Zip Code P.O. BOX 3726 MCALLEN, TX 78502-3726	7 Amount of contribution (\$) \$1,000.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Contributor's principal occupation ATTORNEY		10 Contributor's job title ATTORNEY	
11 Contributor's employer / law firm LAW OFFICE OF MARIO DAVILA		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 06/20/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) DE LUNA, MARCO (Mr.) Contributor address; City; State; Zip Code 5804 N. 23RD ST. MCALLEN, TX 78504	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Contributor's principal occupation ATTORNEY		Contributor's job title ATTORNEY	
Contributor's employer / law firm LAW OFFICE OF MARCO DE LUNA		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 06/22/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) DOCTORS HOSPITAL AT RENAISSANCE Contributor address; City; State; Zip Code 5501 S. MCCOLL RD EDINBURG, TX 78539	Amount of contribution (\$) \$400.00	In-kind contribution description (if applicable) DOOR PRIZES (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Contributor's principal occupation HOSPITAL		Contributor's job title HOSPITAL	
Contributor's employer / law firm DOCTORS HOSPITAL AT RENAISSANCE		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 8/35 Report: 10/53	
2 FILER NAME Maldonado, Enrique Omar (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 06/22/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) EDDIE AGUILAR / AGUILAR'S MEAT MARKET 6 Contributor address; City; State; Zip Code 1306 E. UNIVERSITY DR. EDINBURG, TX 78539	7 Amount of contribution (\$) \$300.00	8 In-kind contribution description (if applicable)
9 Contributor's principal occupation BUSINESS MAN		10 Contributor's job title OWNER	
11 Contributor's employer / law firm AGUILAR'S MEAT MARKET		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 06/07/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) ELLIS, KOENEKE, RAMIREZ & BISHOP, LLP Contributor address; City; State; Zip Code 1101 CHICAGO AVE. MCALLEN, TX 78501	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor's principal occupation ATTORNEY		Contributor's job title ATTORNEY	
Contributor's employer / law firm ELLIS, KOENEKE, RAMIREZ & BISHOP, LLP		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 06/20/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) FLORES, RENE (Mr.) Contributor address; City; State; Zip Code 403 N. CONWAY AVE. MISSION, TX 78572	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Contributor's principal occupation SOLO PRACTITIONER		Contributor's job title ATTORNEY	
Contributor's employer / law firm LAW OFFICE OF RENE FLORES		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 9/35 Report: 11/53	
2 FILER NAME Maldonado, Enrique Omar (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 06/19/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) GARCIA, OSCAR (Mr.) 6 Contributor address; City; State; Zip Code 1717 PALAZZO DR. MISSION, TX 78572	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
9 Contributor's principal occupation BUSINESS MAN		10 Contributor's job title OWNER	
11 Contributor's employer / law firm SELF EMPLOYED		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 06/21/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) GARCIA & KARAM LLP Contributor address; City; State; Zip Code 820 SOUTH MAIN MCALLEN, TX 78501	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Contributor's principal occupation ATTORNEY		Contributor's job title ATTORNEY	
Contributor's employer / law firm GARCIA & KARAM LLP		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 06/26/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) GARZA, AQUILES JAIME (Mr.) Contributor address; City; State; Zip Code 1800 ANGELINA MARIE AVE. PHARR, TX 78577	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Contributor's principal occupation BUSINESS MAN		Contributor's job title OWNER	
Contributor's employer / law firm SELF EMPLOYED		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 10/35 Report: 12/53	
2 FILER NAME Maldonado, Enrique Omar (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 06/20/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) GARZA, JUAN JOSE (Mr.) 6 Contributor address; City; State; Zip Code 1101 E. PECAN BLVD., STE 83 MCALLEN, TX 78501	7 Amount of contribution (\$) \$1,000.00	8 In-kind contribution description (if applicable)
9 Contributor's principal occupation BUSINESS MAN		10 Contributor's job title OWNER	
11 Contributor's employer / law firm SELF EMPLOYED		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 06/07/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) GARZA, PABLO III (Mr.) Contributor address; City; State; Zip Code 4700 XANTHISMA AVE. MCALLEN, TX 78504	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor's principal occupation SOLO PRACTITIONER		Contributor's job title ATTORNEY	
Contributor's employer / law firm LAW OFFICE OF PABLO GARZA III		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 06/10/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) GAULT, NYE & QUINTANA, LLP Contributor address; City; State; Zip Code 7001 NORTH 10TH STREET, SUITE 200 MCALLEN, TX 78504	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor's principal occupation ATTORNEY		Contributor's job title ATTORNEY	
Contributor's employer / law firm GAULT, NYE & QUINTANA, L.L.P.		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 11/35 Report: 13/53	
2 FILER NAME Maldonado, Enrique Omar (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 06/22/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) GERARDO MTANOUS / DOS POTRILLOS RESTAURANT 6 Contributor address; City; State; Zip Code 1000 E. US HWY 83 PHARR, TX 78577	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable) FOOD (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Contributor's principal occupation RESTAURANT		10 Contributor's job title OWNER	
11 Contributor's employer / law firm DOS POTRILLOS RESTAURANT		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 05/30/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) GONZALES, RICHARD (Mr.) Contributor address; City; State; Zip Code 1111 E. 4TH ST. FORT WORTH, TX 76102	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor's principal occupation SOLO PRACTITIONER		Contributor's job title ATTORNEY	
Contributor's employer / law firm LAW OFFICE OF RICHARD GARZA		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 06/19/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) GONZALEZ PALACIOS LLP Contributor address; City; State; Zip Code 1317 E. QUEBEC AVENUE MCALLEN, TX 78503	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Contributor's principal occupation ATTORNEY		Contributor's job title ATTORNEY	
Contributor's employer / law firm GONZALEZ PALACIOS LLP		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 12/35 Report: 14/53	
2 FILER NAME Maldonado, Enrique Omar (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 06/16/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) GUERRA, ALEJANDRO (Mr.)	7 Amount of contribution (\$) \$1,000.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 4009 N. 23RD ST., STE B MCALLEN, TX 78504		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Contributor's principal occupation ATTORNEY		10 Contributor's job title ATTORNEY	
11 Contributor's employer / law firm ALEJANDRO GUERRA ATTORNEY AT LAW		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 06/22/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) GUERRERO, RICARDO Jr. (Mr.)	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1222 BLUE ROCK RD. MISSION, TX 78574		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Contributor's principal occupation INDIVIDUAL		Contributor's job title INDIVIDUAL	
Contributor's employer / law firm INDIVIDUAL		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 06/19/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) HARVEY, KARL (Mr.)	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 11727 HARRISBURG DR. FRISCO, TX 75035		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Contributor's principal occupation INDIVIDUAL		Contributor's job title INDIVIDUAL	
Contributor's employer / law firm INDIVIDUAL		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 13/35 Report: 15/53	
2 FILER NAME Maldonado, Enrique Omar (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 06/22/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) HERNANDEZ, DANIEL (Mr.)	7 Amount of contribution (\$) \$875.00	8 In-kind contribution description (if applicable) DOOR PRIZE
6 Contributor address; City; State; Zip Code 5811 N. 3RD LANE MCALLEN, TX 78504		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Contributor's principal occupation ATTORNEY		10 Contributor's job title ATTORNEY	
11 Contributor's employer / law firm HERNANDEZ 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 06/13/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) HERNANDEZ LAW FIRM, LLP	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 222 E. VANBUREN ST., STE 700 HARLINGEN, TX 78550		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Contributor's principal occupation ATTORNEY		Contributor's job title ATTORNEY	
Contributor's employer / law firm HERNANDEZ LAW FIRM, LLP		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 06/04/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) HIGDON, DAVID (Mr.)	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4739 S. JACKSON RD. EDINBURG, TX 78539		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Contributor's principal occupation ATTORNEY		Contributor's job title ATTORNEY	
Contributor's employer / law firm LAW OFFICE OF DAVID HIGDON		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 16/35 Report: 18/53	
2 FILER NAME Maldonado, Enrique Omar (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 06/17/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) JONES, GALLIGAN, KEY & LOZANO, LLP 6 Contributor address; City; State; Zip Code P.O. DRAWER 1247 WESLACO, TX 78599-1247	7 Amount of contribution (\$) \$1,000.00	8 In-kind contribution description (if applicable)
9 Contributor's principal occupation ATTORNEY		10 Contributor's job title ATTORNEY	
11 Contributor's employer / law firm JONES, GALLIGAN, KEY & LOZANO, LLP		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 06/17/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) KITTLEMAN, THOMAS & GONZALES, PLLC Contributor address; City; State; Zip Code P.O. BOX 1416 MCALLEN, TX 78505	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Contributor's principal occupation ATTORNEY		Contributor's job title ATTORNEY	
Contributor's employer / law firm KITTLEMAN, THOMAS & GONZALES, PLLC		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 06/28/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) KRONER, BURT (Mr.) Contributor address; City; State; Zip Code 17730 SCARSDALE WAY BOCA RATON, FL 33496	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor's principal occupation INDIVIDUAL		Contributor's job title INDIVIDUAL	
Contributor's employer / law firm INDIVIDUAL		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 17/35 Report: 19/53	
2 FILER NAME Maldonado, Enrique Omar (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 06/21/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) LAW OFFICE OF ALBERTO DIAZ 6 Contributor address; City; State; Zip Code 4409 N. MCCOLL RD. MCALLEN, TX 78504-2464	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
9 Contributor's principal occupation ATTORNEY		10 Contributor's job title ATTORNEY	
11 Contributor's employer / law firm LAW OFFICE OF ALBERTO DIAZ		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 05/28/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) LAW OFFICE OF ALFRED T. DENHAM Contributor address; City; State; Zip Code 3700 N. 10TH ST., STE 100 MCALLEN, TX 78501	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor's principal occupation ATTORNEY		Contributor's job title ATTORNEY	
Contributor's employer / law firm LAW OFFICE OF ALFRED T. DENHAM		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 06/19/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) LAW OFFICE OF ARMANDO M. GUERRA Contributor address; City; State; Zip Code 113 N. 9TH AVE. EDINBURG, TX 78541	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Contributor's principal occupation ATTORNEY		Contributor's job title ATTORNEY	
Contributor's employer / law firm LAW OFFICE OF ARMANDO M. GUERRA		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 18/35 Report: 20/53	
2 FILER NAME Maldonado, Enrique Omar (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 06/10/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) LAW OFFICE OF BOBBY GARCIA, P.C. 6 Contributor address; City; State; Zip Code 5301 S. MCCOLL ROAD EDINBURG, TX 78539	7 Amount of contribution (\$) \$2,500.00	8 In-kind contribution description (if applicable)
9 Contributor's principal occupation ATTORNEY		10 Contributor's job title ATTORNEY	
11 Contributor's employer / law firm LAW OFFICE OF BOBBY GARCIA, P.C.		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 06/21/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) LAW OFFICE OF CARLOS R. GALVAN Contributor address; City; State; Zip Code 3525 W. FREDDY GONZALEZ, SUITE C EDINBURG, TX 78539-8544	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor's principal occupation ATTORNEY		Contributor's job title ATTORNEY	
Contributor's employer / law firm LAW OFFICE OF CARLOS R. GALVAN		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 06/21/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) LAW OFFICE OF DALE KASOFSKY, PC Contributor address; City; State; Zip Code 801 W. NOLANA AVE., STE 321 MCALLEN, TX 78504	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Contributor's principal occupation ATTORNEY		Contributor's job title ATTORNEY	
Contributor's employer / law firm LAW OFFICE OF DALE KASOFSKY, PC		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 19/35 Report: 21/53	
2 FILER NAME Maldonado, Enrique Omar (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 06/20/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) LAW OFFICE OF DANIEL SANTOS, PC 6 Contributor address; City; State; Zip Code 4409 N. MCCOLL RD. MCALLEN, TX 78504	7 Amount of contribution (\$) \$1,000.00	8 In-kind contribution description (if applicable)
9 Contributor's principal occupation ATTORNEY		10 Contributor's job title ATTORNEY	
11 Contributor's employer / law firm LAW OFFICE OF DANIEL SANTOS, PC		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 06/26/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) LAW OFFICE OF FRANCISCO J. RODRIGUEZ Contributor address; City; State; Zip Code 1111 W. NOLANA AVE. MCALLEN, TX 78504	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Contributor's principal occupation ATTORNEY		Contributor's job title ATTORNEY	
Contributor's employer / law firm LAW OFFICE OF FRANCISCO J RODRIGUEZ		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 06/19/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) LAW OFFICE OF JOSE G GONZALEZ Contributor address; City; State; Zip Code 101 N. 10TH AVE. EDINBURG, TX 78541-3317	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Contributor's principal occupation ATTORNEY		Contributor's job title ATTORNEY	
Contributor's employer / law firm LAW OFFICE OF JOSE G. GONZALEZ		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 20/35 Report: 22/53	
2 FILER NAME Maldonado, Enrique Omar (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 06/13/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) LAW OFFICE OF MICHAEL M. GUERRA 6 Contributor address; City; State; Zip Code P. O. BOX 5371 MCALLEN, TX 78502	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
9 Contributor's principal occupation ATTORNEY		10 Contributor's job title ATTORNEY	
11 Contributor's employer / law firm LAW OFFICE OF MICHAEL M .GUERRA		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 06/21/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) LAW OFFICE OF MONICA M. GALVAN Contributor address; City; State; Zip Code 3525 W. FREDDY GONZALEZ DR., SUITE C EDINBURG, TX 78539	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor's principal occupation ATTORNEY		Contributor's job title ATTORNEY	
Contributor's employer / law firm LAW OFFICE OF MONICA M. GALVAN		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 06/18/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) LAW OFFICE OF SANTOS MALDONADO, JR Contributor address; City; State; Zip Code 209 E. UNIVERSITY DRIVE EDINBURG, TX 78539	Amount of contribution (\$) \$2,500.00	In-kind contribution description (if applicable)
Contributor's principal occupation ATTORNEY		Contributor's job title ATTORNEY	
Contributor's employer / law firm LAW OFFICE OF SANTOS MALDONADO JR		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 21/35 Report: 23/53	
2 FILER NAME Maldonado, Enrique Omar (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 06/27/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) LAW OFFICES OF GARCIA QUINTANILLA & PALACIOS 6 Contributor address; City; State; Zip Code 5526 N. 10TH MCALLEN, TX 78504	7 Amount of contribution (\$) \$1,500.00	8 In-kind contribution description (if applicable)
9 Contributor's principal occupation ATTORNEY		10 Contributor's job title ATTORNEY	
11 Contributor's employer / law firm LAW OFFICES OF GARCIA QUINTANILLA & PALACIOS		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 06/12/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) LAW OFFICES OF MICHAEL E. FLANAGAN Contributor address; City; State; Zip Code 809 CHICAGO AVENUE MCALLEN, TX 78501	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Contributor's principal occupation ATTORNEY		Contributor's job title ATTORNEY	
Contributor's employer / law firm LAW OFFICE OF MICHAEL E. FLANAGAN		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 06/19/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) LAW OFFICES OF WILLIE MCALLEN & ASSOCIATES PC Contributor address; City; State; Zip Code 2102 W. UNIVERSITY DRIVE EDINBURG, TX 78539	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor's principal occupation ATTORNEY		Contributor's job title ATTORNEY	
Contributor's employer / law firm LAW OFFICES OF WILLIE MCALLEN & ASSOCIATES PC		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 22/35 Report: 24/53	
2 FILER NAME Maldonado, Enrique Omar (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 06/22/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) LEE MALDONADO / GOOD TIMES TOBACCO & ACCESSORIES 6 Contributor address; City; State; Zip Code 1621 W. UNIVERSITY DR. EDINBURG, TX 78539	7 Amount of contribution (\$) \$600.00	8 In-kind contribution description (if applicable) GIVEAWAYS, DOOR PRIZES
9 Contributor's principal occupation BUSINESS MAN		10 Contributor's job title OWNER	
11 Contributor's employer / law firm GOOD TIMES TOBACCO & ACCESSORIES		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 06/22/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) LEOPOLDO ESPINOZA / WEEKEND GARAGE NEWSPAPER Contributor address; City; State; Zip Code 813 N. MAIN ST., SUITE 160 MCALLEN, TX 78501	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable) ADVERTISING
Contributor's principal occupation BUSINESS MAN		Contributor's job title OWNER	
Contributor's employer / law firm WEEKEND GARAGE		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 06/20/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) LINEBARGER GOGGAN BLAIR & SAMPSON, LLP Contributor address; City; State; Zip Code P. O. BOX 17428 AUSTIN, TX 78760	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Contributor's principal occupation ATTORNEY		Contributor's job title ATTORNEY	
Contributor's employer / law firm LINEBARGER GOGGAN BLAIR & SAMPSON, LLP		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 23/35 Report: 25/53	
2 FILER NAME Maldonado, Enrique Omar (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 06/22/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) LONGORIA, OSCAR LEE Jr. (Mr.) 6 Contributor address; City; State; Zip Code P.O. BOX 4224 MISSION, TX 78573	7 Amount of contribution (\$) \$1,000.00	8 In-kind contribution description (if applicable)
9 Contributor's principal occupation SOLO PRACTITIONER		10 Contributor's job title ATTORNEY	
11 Contributor's employer / law firm LAW OFFICE OF OSCAR LEE LONGORIA JR.		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 06/10/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) LOPEZ, NEREIDA (Mrs.) Contributor address; City; State; Zip Code 5607 N. MOOREFIELD RD. MISSION, TX 78574-4887	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor's principal occupation ATTORNEY		Contributor's job title ATTORNEY	
Contributor's employer / law firm WILLIAMSON LOPEZ LAW FIRM		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 06/19/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) LOPEZ, TEODULO (TED) (Mr.) Contributor address; City; State; Zip Code 13926 N. 38TH LN. EDINBURG, TX 78541-4419	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor's principal occupation SOLO PRACTITIONER		Contributor's job title ATTORNEY	
Contributor's employer / law firm LAW OFFICE OF TEODULO (TED) LOPEZ		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 24/35 Report: 26/53	
2 FILER NAME Maldonado, Enrique Omar (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 05/21/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) MACIAS LAW FIRM 6 Contributor address; City; State; Zip Code 4715 SOUTH JACKSON EDINBURG, TX 78539	7 Amount of contribution (\$) \$1,000.00	8 In-kind contribution description (if applicable)
9 Contributor's principal occupation ATTORNEY		10 Contributor's job title ATTORNEY	
11 Contributor's employer / law firm MACIAS 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 06/20/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) MARROQUIN, ARMANDO (Mr.) Contributor address; City; State; Zip Code 10125 N. 10TH ST., STE G MCALLEN, TX 78504	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Contributor's principal occupation SOLO PRACTITIONER		Contributor's job title ATTORNEY	
Contributor's employer / law firm LAW OFFICE OF ARMANDO MARROQUIN		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 06/19/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) MARTINEZ, ARNULFO (Mr.) Contributor address; City; State; Zip Code 606 S. MCCOLL RD. EDINBURG, TX 78539	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor's principal occupation ATTORNEY		Contributor's job title ATTORNEY	
Contributor's employer / law firm LAW OFFICE OF ARNULFO MARTINEZ		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 25/35 Report: 27/53	
2 FILER NAME Maldonado, Enrique Omar (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 06/27/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) MEYEROWITZ, DAVID (Mr.) 6 Contributor address; City; State; Zip Code 3 HEDGEWOOD ROAD TORONTO, ONTARIO, CANADA M2L1L4 TORONTO,	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Contributor's principal occupation CEO		10 Contributor's job title CEO	
11 Contributor's employer / law firm STRATEGIC CAPITAL		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 06/20/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) MEZA, ROBERTO (Mr.) Contributor address; City; State; Zip Code 113 S. 10TH AVE. EDINBURG, TX 78539	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Contributor's principal occupation SOLO PRACTITIONER		Contributor's job title ATTORNEY	
Contributor's employer / law firm LAW OFFICE OF ROBERTO MEZA		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 06/27/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) MICHAEL D. TUTTLE, PLLC Contributor address; City; State; Zip Code P.O. BOX 4450 EDINBURG, TX 78540	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Contributor's principal occupation SOLO PRACTITIONER		Contributor's job title ATTORNEY	
Contributor's employer / law firm LAW OFFICE OF MICHAEL D. TUTTLE PLLC		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 26/35 Report: 28/53	
2 FILER NAME Maldonado, Enrique Omar (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 06/27/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) MORALES, JAIME (Mr.) 6 Contributor address; City; State; Zip Code 5526 N. 10TH MCALLEN, TX 78504	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
9 Contributor's principal occupation SOLO PRACTITIONER		10 Contributor's job title ATTORNEY	
11 Contributor's employer / law firm LAW OFFICE OF JAIME M MORALES		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 06/22/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) MORENO, ESTELLA (Mrs.) Contributor address; City; State; Zip Code 6765 E. TEXAS ROAD EDINBURG, TX 78542	Amount of contribution (\$) \$20.00	In-kind contribution description (if applicable)
Contributor's principal occupation INDIVIDUAL		Contributor's job title INDIVIDUAL	
Contributor's employer / law firm INDIVIDUAL		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 06/27/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) NESBITT, VASSAR & MCCOWN, L.L.P. Contributor address; City; State; Zip Code 15851 DALLAS PARKWAY SUITE 800 DALLAS, TX 75001-6022	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor's principal occupation ATTORNEY		Contributor's job title ATTORNEY	
Contributor's employer / law firm NESBITT, VASSAR & MCCOWN, L.L.P.		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 27/35 Report: 29/53	
2 FILER NAME Maldonado, Enrique Omar (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 06/24/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) NITSCH, PATRICK Jr. (Mr.) 6 Contributor address; City; State; Zip Code 3501 PLAZAS DEL LAGO EDINBURG, TX 78539	7 Amount of contribution (\$) \$300.00	8 In-kind contribution description (if applicable)
9 Contributor's principal occupation ATTORNEY		10 Contributor's job title ATTORNEY	
11 Contributor's employer / law firm LAW OFFICE OF PATRICK A. NITSCH		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 06/27/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) PERALEZ FRANZ LLP Contributor address; City; State; Zip Code 1416 DOVE AVE. MCALLEN, TX 78504	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Contributor's principal occupation ATTORNEY		Contributor's job title ATTORNEY	
Contributor's employer / law firm PERALEZ FRANZ LLP		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 06/20/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) PEREZ, NOE (Mr.) Contributor address; City; State; Zip Code 302 E. MAHL EDINBURG, TX 78539	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Contributor's principal occupation ATTORNEY		Contributor's job title ATTORNEY	
Contributor's employer / law firm LAW OFFICE OF NOE PEREZ		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The **INSTRUCTION GUIDE** explains how to complete this form.

1 PAGE #

Schedule: 28/35 Report: 30/53

2 FILER NAME Maldonado, Enrique Omar (Mr.)

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

06/17/2013

5 Full name of contributor out-of-state PAC (ID# _____)
RAMIREZ, LUIS (Mr.)

6 Contributor address; City; State; Zip Code
7417 N. 10TH STREET
MCALLEN, TX 78504

7 Amount of contribution (\$)

\$200.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Contributor's principal occupation
ATTORNEY

10 Contributor's job title
ATTORNEY

11 Contributor's employer / law firm
LUIS R. RAMIREZ ATTORNEY AT LAW

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

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

Date

06/20/2013

Full name of contributor out-of-state PAC (ID# _____)
REYES, DANIEL (Mr.)

Contributor address; City; State; Zip Code
701 KERRY LANE
MCALLEN, TX 78501

Amount of contribution (\$)

\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation
SOLO PRACTITIONER

Contributor's job title
ATTORNEY

Contributor's employer / law firm
LAW OFFICE OF DANIEL REYES

Law firm of contributor's spouse (if any)

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

Date

06/22/2013

Full name of contributor out-of-state PAC (ID# _____)
REYES, SAMUEL (Mr.)

Contributor address; City; State; Zip Code
P.O. BOX 4267
EDINBURG, TX 78540

Amount of contribution (\$)

\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation
SOLO PRACTITIONER

Contributor's job title
ATTORNEY

Contributor's employer / law firm
LAW OFFICE OF SAMUEL REYES

Law firm of contributor's spouse (if any)

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 29/35 Report: 31/53	
2 FILER NAME Maldonado, Enrique Omar (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 06/13/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) REYNALDO L. DIAZ, JR., P.C. 6 Contributor address; City; State; Zip Code 1615 BROADWAY SAN ANTONIO, TX 78215	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable) <input type="checkbox"/> (If travel outside of Texas, complete Schedule T)
9 Contributor's principal occupation ATTORNEY		10 Contributor's job title ATTORNEY	
11 Contributor's employer / law firm REYNALDO L. DIAZ, JR., P.C.		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 06/22/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) RICK GUERRA / TONY ROMA'S Contributor address; City; State; Zip Code 4400 N. 10TH STREET MCALLEN, TX 78504	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) GIFT CERTIFICATES (DOOR PRIZE) <input type="checkbox"/> (If travel outside of Texas, complete Schedule T)
Contributor's principal occupation BUSINESS		Contributor's job title TONY ROMA'S	
Contributor's employer / law firm TONY ROMA'S		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 06/27/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) ROSEN, DEBORAH (Mrs.) Contributor address; City; State; Zip Code 1313 CHATSWORTH CT E COLLEYVILLE, TX 76034	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable) <input type="checkbox"/> (If travel outside of Texas, complete Schedule T)
Contributor's principal occupation INDIVIDUAL		Contributor's job title INDIVIDUAL	
Contributor's employer / law firm INDIVIDUAL		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 30/35 Report: 32/53	
2 FILER NAME Maldonado, Enrique Omar (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 06/22/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) RUBEN SALINAS / KLIPPAD 6 Contributor address; City; State; Zip Code 4109 TORONTO AVE. MCALLEN, TX 78503	7 Amount of contribution (\$) \$480.00	8 In-kind contribution description (if applicable) DOOR PRIZES (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Contributor's principal occupation BUSINESS MAN		10 Contributor's job title OWNER	
11 Contributor's employer / law firm SELF EMPLOYED		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 06/21/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) SAVYSKY, ANDREW (Mr.) Contributor address; City; State; Zip Code 757 SE 17TH ST. BOX 399 FORT LAUDERDALE, FL 33316	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor's principal occupation INDIVIDUAL		Contributor's job title INDIVIDUAL	
Contributor's employer / law firm INDIVIDUAL		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 06/19/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) SEPULVEDA, JAVIER (Mr.) Contributor address; City; State; Zip Code 1902 BALD CYPRESS WESLACO, TX 78596	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor's principal occupation BUSINESS MAN		Contributor's job title OWNER	
Contributor's employer / law firm SELF EMPLOYED		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 32/35 Report: 34/53	
2 FILER NAME Maldonado, Enrique Omar (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 05/29/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) SOLIS & SMITH, P.C. 6 Contributor address; City; State; Zip Code 12703 SPECTRUM DR. 100 SAN ANTONIO, TX 78249	7 Amount of contribution (\$) \$2,500.00	8 In-kind contribution description (if applicable)
9 Contributor's principal occupation ATTORNEY		10 Contributor's job title ATTORNEY	
11 Contributor's employer / law firm SOLIS & SMITH P.C.		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 06/26/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) SOUTH TEXAS VOTERS Contributor address; City; State; Zip Code 4715 S. JACKSON EDINBURG, TX 78539	Amount of contribution (\$) \$2,500.00	In-kind contribution description (if applicable)
Contributor's principal occupation POLITICAL ACTION COMMITTEE		Contributor's job title POLITICAL ACTION COMMITTEE	
Contributor's employer / law firm SOUTH TEXAS VOTER, P.A.C.		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 06/27/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) THE HARKRIDER LAW FIRM, P.C. Contributor address; City; State; Zip Code P. O. BOX 3849 EDINBURG, TX 78540	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor's principal occupation ATTORNEY		Contributor's job title ATTORNEY	
Contributor's employer / law firm THE HARKRIDER LAW FIRM, P.C.		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 33/35 Report: 35/53	
2 FILER NAME Maldonado, Enrique Omar (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 06/05/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) THE LAW OFFICE JUAN R. ZAMORA 6 Contributor address; City; State; Zip Code 1410 DOVE AVE. MCALLEN, TX 78504	7 Amount of contribution (\$) \$1,000.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Contributor's principal occupation ATTORNEY		10 Contributor's job title ATTORNEY	
11 Contributor's employer / law firm LAW OFFICE OF JUAN R. ZAMORA		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 06/19/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) THOMPSON, ROBERT (Mr.) Contributor address; City; State; Zip Code 325 RIDGEBRIAR DR. RICHARDSON, TX 75080-1920	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Contributor's principal occupation INDIVIDUAL		Contributor's job title INDIVIDUAL	
Contributor's employer / law firm INDIVIDUAL		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 06/20/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) TIJERINA LAW FIRM PC Contributor address; City; State; Zip Code 3825 NORTH 10TH STREET, SUITE E MCALLEN, TX 78501	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Contributor's principal occupation SOLO PRACTITIONER		Contributor's job title ATTORNEY	
Contributor's employer / law firm TIJERINA LAW FIRM PC		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 34/35 Report: 36/53	
2 FILER NAME Maldonado, Enrique Omar (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 06/22/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) VICTOR ALMAGUER / MAMBO'S SEAFOOD RESTAURANT 6 Contributor address; City; State; Zip Code 4817 EXPWY 83, SUITE 100 MCALLEN, TX 78503	7 Amount of contribution (\$) \$750.00	8 In-kind contribution description (if applicable) DOOR PRIZES
9 Contributor's principal occupation RESTAURANT		10 Contributor's job title OWNER	
11 Contributor's employer / law firm MAMBO'S SEAFOOD RESTAURANT		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 06/21/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) VIDAURRI, LYDE, RODRIGUEZ & HAYNES, LLP Contributor address; City; State; Zip Code 202 N. 10TH AVE. EDINBURG, TX 78541	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor's principal occupation ATTORNEY		Contributor's job title ATTORNEY	
Contributor's employer / law firm VIDAURRI, LYDE, RODRIGUEZ & HAYNES, LLP		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 06/12/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) WALKER & TWENHAFEL, L.L.P. Contributor address; City; State; Zip Code P.O. DRAWER 3766 MCALLEN, TX 78502-3766	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor's principal occupation ATTORNEY		Contributor's job title ATTORNEY	
Contributor's employer / law firm WALKER & TWENHAFEL LLP		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 35/35 Report: 37/53	
2 FILER NAME Maldonado, Enrique Omar (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 06/18/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) WILLIAM R. GARZA & ASSOCIATES, PLLC 6 Contributor address; City; State; Zip Code 3700 N. 10TH ST., STE 102 MCALLEN, TX 78501	7 Amount of contribution (\$) \$1,000.00	8 In-kind contribution description (if applicable)
9 Contributor's principal occupation SOLO PRACTITIONER		10 Contributor's job title ATTORNEY	
11 Contributor's employer / law firm WILLIAM R. GARZA & ASSOCIATES, PLLC		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 06/07/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) YZAGUIRRE & VELA PLLC Contributor address; City; State; Zip Code 6521 N. 10TH STREET, SUITE C MCALLEN, TX 78504	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor's principal occupation ATTORNEY		Contributor's job title ATTORNEY	
Contributor's employer / law firm YZAGUIRRE & VELA PLLC		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

PLEGGED CONTRIBUTIONS (JUDICIAL)

SCHEDULE B (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/5 Report: 39/53	
2 FILER NAME Maldonado, Enrique Omar (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 TOTAL OF UNITEMIZED PLEDGES: ⇄ ⇄ ⇄ ⇄ ⇄ ⇄			\$
5 Date 06/21/2013	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) ESPERICUETA, OMAR (Mr.) 7 Pledgor address; City; State; Zip Code 2308 EXPRESSWAY 83, SUITE A PENITAS, TX 78576	8 Amount of pledge (\$) \$2,500.00	9 In-kind description (if applicable)
10 Pledgor's principal occupation INDIVIDUAL		11 Pledgor's job title PHARMACIST	
12 Pledgor's employer / law firm INDIVIDUAL		13 Law firm of pledgor's spouse (if any)	
14 If pledgor is a child, law firm of parent(s) (if any)			
Date 06/21/2013	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) FLORES, DAVID (Mr.) Pledgor address; City; State; Zip Code 118 E. CANO ST. EDINBURG, TX 78539	Amount of pledge (\$) \$1,000.00	In-kind description (if applicable)
Pledgor's principal occupation ATTORNEY		Pledgor's job title ATTORNEY	
Pledgor's employer / law firm FLORES & TORRES		Law firm of pledgor's spouse (if any)	
If pledgor is a child, law firm of parent(s) (if any)			
Date 06/21/2013	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) GARCIA, JOEL (Mr.) Pledgor address; City; State; Zip Code 111 TEXAS 499 LOOP HARLINGEN, TX 78550	Amount of pledge (\$) \$1,000.00	In-kind description (if applicable)
Pledgor's principal occupation GENERAL MANAGER		Pledgor's job title GENERAL MANAGER	
Pledgor's employer / law firm CARDENAS METROPLEX		Law firm of pledgor's spouse (if any)	
If pledgor is a child, law firm of parent(s) (if any)			

PLEGGED CONTRIBUTIONS (JUDICIAL)**SCHEDULE B (J)**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/5 Report: 40/53	
2 FILER NAME Maldonado, Enrique Omar (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 TOTAL OF UNITEMIZED PLEDGES: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨			\$
5 Date 06/21/2013	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) JASSO, HOMER Jr. (Mr.) 7 Pledgor address; City; State; Zip Code 415 W. UNIVERSITY DR. EDINBURG, TX 78541	8 Amount of pledge (\$) \$1,000.00	9 In-kind description (if applicable)
10 Pledgor's principal occupation BUSINESS MAN		11 Pledgor's job title OWNER	
12 Pledgor's employer / law firm SUPERIOR OIL EXPRESS		13 Law firm of pledgor's spouse (if any)	
14 If pledgor is a child, law firm of parent(s) (if any)			
Date 06/30/2013	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) MOTT & MOTT PLLC Pledgor address; City; State; Zip Code P. O. BOX 979 MCKINNEY, TX 75070	Amount of pledge (\$) \$2,000.00	In-kind description (if applicable)
Pledgor's principal occupation ATTORNEY		Pledgor's job title ATTORNEY	
Pledgor's employer / law firm MOTT & MOTT PLLC		Law firm of pledgor's spouse (if any)	
If pledgor is a child, law firm of parent(s) (if any)			
Date 06/21/2013	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) OLIVAREZ, FELA (Mrs.) Pledgor address; City; State; Zip Code 216 E. EXPWY 83 PHARR, TX 78577	Amount of pledge (\$) \$500.00	In-kind description (if applicable)
Pledgor's principal occupation ATTORNEY		Pledgor's job title ATTORNEY	
Pledgor's employer / law firm LAW OFFICE OF FELA OLIVAREZ		Law firm of pledgor's spouse (if any)	
If pledgor is a child, law firm of parent(s) (if any)			

PLEGGED CONTRIBUTIONS (JUDICIAL)

SCHEDULE B (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/5 Report: 41/53	
2 FILER NAME Maldonado, Enrique Omar (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 TOTAL OF UNITEMIZED PLEDGES: ⇄ ⇄ ⇄ ⇄ ⇄ ⇄			\$
5 Date 06/21/2013	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) PRUNEDA, MICHAEL (Mr.) 7 Pledgor address; City; State; Zip Code 514 S. VETERANS BLVD PHARR, TX 78577	8 Amount of pledge (\$) \$2,500.00	9 In-kind description (if applicable)
10 Pledgor's principal occupation ATTORNEY		11 Pledgor's job title ATTORNEY	
12 Pledgor's employer / law firm PRUNEDA LAW FIRM		13 Law firm of pledgor's spouse (if any)	
14 If pledgor is a child, law firm of parent(s) (if any)			
Date 06/21/2013	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) RAMIREZ, DENNIS (Mr.) Pledgor address; City; State; Zip Code 111 N. 17TH ST., SUITE D DONNA, TX 78537	Amount of pledge (\$) \$500.00	In-kind description (if applicable)
Pledgor's principal occupation ATTORNEY		Pledgor's job title ATTORNEY	
Pledgor's employer / law firm LAW OFFICE OF DENNIS RAMIREZ		Law firm of pledgor's spouse (if any)	
If pledgor is a child, law firm of parent(s) (if any)			
Date 06/21/2013	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) RODRIGUEZ, JOHN (Mr.) Pledgor address; City; State; Zip Code 220 S. JACKSON RD. EDINBURG, TX 78539	Amount of pledge (\$) \$500.00	In-kind description (if applicable)
Pledgor's principal occupation ATTORNEY		Pledgor's job title ATTORNEY	
Pledgor's employer / law firm RODRIGUEZ & RODRIGUEZ		Law firm of pledgor's spouse (if any)	
If pledgor is a child, law firm of parent(s) (if any)			

LOANS (JUDICIAL)

SCHEDULE E (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/1 Report: 43/53
2 FILER NAME Maldonado, Enrique Omar (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001
4 TOTAL OF UNITEMIZED LOANS: ⇄⇄⇄⇄⇄⇄		\$
5 Date of loan 06/25/2013	7 Name of lender LONE STAR NATIONAL BANK <input type="checkbox"/> out-of-state PAC(ID# _____)	9 Loan Amount (\$) \$322,540.00
6 Is lender a financial Institution? Yes	8 Lender address; City; State; Zip Code 600 EAST NOLANA MCALLEN, TX 78501	10 Interest rate 0.65
		11 Maturity date 12/21/2013
12 Lender's Principal Occupation ATTORNEY		13 Lender's Job Title ATTORNEY
14 Lender's Employer/Law Firm LAW OFFICE OF E. OMAR MALDONADO, P.C.		15 Law Firm of lender's spouse (if any)
16 If lender is child, law firm of parent(s) (if any)		
17 Description of Collateral <input type="checkbox"/> none CDS (0004) (0005) (0006) WITH LONE STAR NATIONAL BANK		18 Check if personal funds were deposited into political account <input checked="" type="checkbox"/>
19 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	20 Name of guarantor 21 Guarantor address; City; State; Zip Code	22 Amount Guaranteed (\$)
23 Guarantor's Principal Occupation		24 Guarantor's Job Title
25 Guarantor's Employer/Law Firm		26 Law Firm of guarantor's spouse (if any)
27 If guarantor is child, law firm of parent(s) (if any)		

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 1/9 Report: 44/53		2 FILER NAME Maldonado, Enrique Omar (Mr.)		3 ACCOUNT # (TEC filers) 00000001	
4 Date 06/21/2013	5 Payee name ACADEMY SPORTS & OUTDOORS				
6 Amount (\$) \$104.23	7 Payee address City; State; Zip Code 651 E. TRENTON RD. EDINBURG, TX 78539				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gifts/Awards/Memorials Expense		(b) Description (if travel outside of Texas, complete Schedule T) <input type="checkbox"/> DOOR PRIZES FOR GOLF TOURNAMENT ON 06-22-2013		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 06/22/2013	Payee name ACADEMY SPORTS & OUTDOORS				
Amount (\$) \$123.31	Payee address City; State; Zip Code 651 E. TRENTON RD. EDINBURG, TX 78539				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gifts/Awards/Memorials Expense		Description (if travel outside of Texas, complete Schedule T) <input type="checkbox"/> DOOR PRIZES AND SERVING UTENSILS FOR GOLF TOURNAMENT ON 06-22-2013		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 06/21/2013	Payee name AGUILAR'S MEAT MARKET				
Amount (\$) \$341.66	Payee address City; State; Zip Code 1306 E. UNIVERSITY DR. EDINBURG, TX 78539				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description (if travel outside of Texas, complete Schedule T) <input type="checkbox"/> MEAT FOR GOLF TOURNAMENT ON 06-22-2013		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 06/21/2013	Payee name BUTTERCRUST/PHARR, TEXAS FLOWERS FOODS				
Amount (\$) \$62.29	Payee address City; State; Zip Code 117 E. FERGUSON PHARR, TX 78577				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		Description (if travel outside of Texas, complete Schedule T) <input type="checkbox"/> BREAD(BURGER BUNS) FOR GOLF TOURNAMENT ON 06-22-2013		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 2/9 Report: 45/53	2 FILER NAME Maldonado, Enrique Omar (Mr.)	3 ACCOUNT # (TEC filers) 00000001
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4 Date 04/10/2013	5 Payee name CARRERA, MIKE (Mr.)
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6 Amount (\$) \$3,500.00	7 Payee address City; State; Zip Code 3406 WEST ALBERTA EDINBURG, TX 78540
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> POLITICAL CONSULTANT
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 06/12/2013	Payee name COPY ZONE
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Amount (\$) \$60.73	Payee address City; State; Zip Code 4131 N. 10TH STREET MCALLEN, TX 78504
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> CAMPAIGN BUSINESS CARDS
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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 06/18/2013	Payee name COPY ZONE
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Amount (\$) \$103.89	Payee address City; State; Zip Code 4131 N. 10TH STREET MCALLEN, TX 78504
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> TIN CUP CARD INSERTS FOR GOODIE BAGS GIVEN AT GOLF TOURNAMENT ON 06-22-2013
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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 06/20/2013	Payee name COSTCO WHOLESALE
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Amount (\$) \$638.46	Payee address City; State; Zip Code 1501 WEST KELLY AVE. PHARR, TX 78577
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> PLATES, FOIL PAPER, SNACKS, DOOR PRIZES FOR GOLF TOURNAMENT ON 06-22-2013
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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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel in District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 3/9 Report: 46/53		2 FILER NAME Maldonado, Enrique Omar (Mr.)		3 ACCOUNT # (TEC filers) 00000001	
4 Date 06/21/2013	5 Payee name COSTCO WHOLESale				
6 Amount (\$) \$51.44	7 Payee address City; State; Zip Code 1501 WEST KELLY AVE. PHARR, TX 78577				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> SNACKS FOR GOLF TOURNAMENT ON 06-22-2013		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 06/21/2013	Payee name COSTCO WHOLESale				
Amount (\$) \$600.37	Payee address City; State; Zip Code 1501 WEST KELLY AVE. PHARR, TX 78577				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> SOFT DRINKS FOR GOLF TOURNAMENT ON 06-22-2013		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 06/22/2013	Payee name DE ALBA BAKERY EDINBURG				
Amount (\$) \$46.91	Payee address City; State; Zip Code 2121 N. CLOSNER BLVD. EDINBURG, TX 78541				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> TORTILLAS FOR GOLF TOURNAMENT ON 06-22-2013		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 06/22/2013	Payee name DE ALBA BAKERY EDINBURG				
Amount (\$) \$9.95	Payee address City; State; Zip Code 2121 N. CLOSNER BLVD. EDINBURG, TX 78541				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> TORTILLAS FOR GOLF TOURNAMENT ON 06-22-2013		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 4/9 Report: 47/53	2 FILER NAME Maldonado, Enrique Omar (Mr.)	3 ACCOUNT # (TEC filers) 00000001
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4 Date 06/22/2013	5 Payee name DOLLAR GENERAL STORE
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6 Amount (\$) \$13.96	7 Payee address City; State; Zip Code 1801 E. MONTE CRISTO RD. EDINBURG, TX 78542
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> ICE FOR GOLF TOURNAMENT ON 06-22-2013
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 06/22/2013	Payee name DOLLAR GENERAL STORE
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Amount (\$) \$36.81	Payee address City; State; Zip Code 1801 E. MONTE CRISTO RD. EDINBURG, TX 78542
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> SOFT DRINKS FOR GOLF TOURNAMENT ON 06-22-2013
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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 06/04/2013	Payee name E. OMAR MALDONADO FOR JUDGE CAMPAIGN
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Amount (\$) \$1,946.45	Payee address City; State; Zip Code 4308 N. MCCOLL RD. MCALLEN, TX 78504
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> TRANSFER OF FUNDS FROM WELLS FARGO CAMPAIGN ACCOUNT TO NEW CAMPAIGN ACCOUNT AT LSNB
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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 06/22/2013	Payee name FLYING J
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Amount (\$) \$26.95	Payee address City; State; Zip Code 1305 EAST MONTE CRISTO EDINBURG, TX 78539
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> ICE FOR GOLF TOURNAMENT ON 06-22-2013
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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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 5/9 Report: 48/53	2 FILER NAME Maldonado, Enrique Omar (Mr.)	3 ACCOUNT # (TEC filers) 00000001
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4 Date 05/15/2013	5 Payee name GIRL SCOUT TROOP 35
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6 Amount (\$) \$200.00	7 Payee address City; State; Zip Code 1109 W. NOLANA AVE., #202 MCALLEN, TX 78504
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> POPCORN FOR GOODIE BAGS FOR GOLF TOURNAMENT
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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 06/12/2013	Payee name JASON'S DELI
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Amount (\$) \$88.77	Payee address City; State; Zip Code 4100 N. 2ND ST. MCALLEN, TX 78504
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> LUNCH-GOLF TOURNAMENT COMMITTEE MEMBER MEETING ON 06-12-2013
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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 06/13/2013	Payee name LEO'S DRIVE INN
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Amount (\$) \$50.00	Payee address City; State; Zip Code 1800 W. GRIFFIN PARKWAY MISSION, TX 78574
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> GAS FOR ALICIA-DELIVERING INVITES FOR GOLF TOURNAMENT ON 06-22-2013
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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 06/21/2013	Payee name M5 DESIGNS
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Amount (\$) \$1,299.00	Payee address City; State; Zip Code 1405 S. PALM COURT DR. HARLINGEN, TX 78552
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> YARD SIGNS FOR GOLF TOURNAMENT ON 06-22-2013
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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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 6/9 Report: 49/53	2 FILER NAME Maldonado, Enrique Omar (Mr.)	3 ACCOUNT # (TEC filers) 00000001
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4 Date 06/22/2013	5 Payee name MONTE CRISTO GOLF COURSE
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6 Amount (\$) \$10,863.00	7 Payee address City; State; Zip Code 3101 N. KENYON RD. EDINBURG, TX 78542
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> GOLF TOURNAMENT ON 6-22-2013
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 06/22/2013	Payee name MUNDO GROCERY
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Amount (\$) \$52.50	Payee address City; State; Zip Code 2510 E. MONTE CRISTO RD. EDINBURG, TX 78539
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> ICE FOR GOLF TOURNAMENT ON 06-22-2013
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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 06/12/2013	Payee name OFFICE DEPOT
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Amount (\$) \$22.71	Payee address City; State; Zip Code 5115 N. 10TH STREET MCALLEN, TX 78504
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> ENVELOPES FOR INVITES TO GOLF TOURNAMENT ON 06-22-2013
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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 06/14/2013	Payee name OFFICE DEPOT
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Amount (\$) \$40.57	Payee address City; State; Zip Code 5115 N. 10TH STREET MCALLEN, TX 78504
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> ENVELOPES FOR INVITES TO GOLF TOURNAMENT (06-22-2013) AND LABELS
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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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 7/9 Report: 50/53	2 FILER NAME Maldonado, Enrique Omar (Mr.)	3 ACCOUNT # (TEC filers) 00000001
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4 Date 06/18/2013	5 Payee name OFFICE DEPOT
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6 Amount (\$) \$145.52	7 Payee address City; State; Zip Code 5115 N. 10TH STREET MCALLEN, TX 78504
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> INK&ENVELOPES FOR PRINTER TO PRINT LETTER WITH INVITE TO GOLF TOURNAMENT ON 06-22-2013
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 06/21/2013	Payee name PIZZA HUT
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Amount (\$) \$24.09	Payee address City; State; Zip Code 739 W. DOVE MCALLEN, TX 78504
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> LUNCH FOR CAMPAIGN WORKERS
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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 05/15/2013	Payee name PRINTWORKS
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Amount (\$) \$246.53	Payee address City; State; Zip Code 1414 PECAN BLVD. MCALLEN, TX 78501
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> GOLF TOURNAMENT BROCHURES
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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 06/11/2013	Payee name PRINTWORKS
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Amount (\$) \$222.50	Payee address City; State; Zip Code 1414 PECAN BLVD. MCALLEN, TX 78501
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> GOLF TOURNAMENT BROCHURES FOR GOLF TOURNAMENT ON 6-22-2013
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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			
Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense	Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense	Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)
The INSTRUCTION GUIDE explains how to complete this form.			

1 PAGE # Schedule: 8/9 Report: 51/53	2 FILER NAME Maldonado, Enrique Omar (Mr.)	3 ACCOUNT # (TEC filers) 00000001
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4 Date 06/12/2013	5 Payee name ROMERO, DESIDERIO (Mr.)
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6 Amount (\$) \$300.00	7 Payee address City; State; Zip Code 612 NOLANA, SUITE 415 MCALLEN, TX 78504
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (if travel outside of Texas, complete Schedule T) <input type="checkbox"/> CAMPAIGN WORK
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 06/13/2013	Payee name S.G.S. WORLD
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Amount (\$) \$60.02	Payee address City; State; Zip Code 2115 W. BUSINESS 83 MCALLEN, TX 78501
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description (if travel outside of Texas, complete Schedule T) <input type="checkbox"/> DRAWSTRING BAGS FOR GOLF TOURNAMENT ON 06-22-2013
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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 06/13/2013	Payee name S.G.S. WORLD
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Amount (\$) \$95.00	Payee address City; State; Zip Code 100 S. 15TH ST. MCALLEN, TX 78501
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description (if travel outside of Texas, complete Schedule T) <input type="checkbox"/> DRAWSTRING BAGS FOR GOLF TOURNAMENT ON 06-22-2013
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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 06/14/2013	Payee name SEPULVEDA, ALICIA (Mrs.)
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Amount (\$) \$526.39	Payee address City; State; Zip Code P. O. BOX 5000-184 MISSION, TX 78572
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (if travel outside of Texas, complete Schedule T) <input type="checkbox"/> CAMPAIGN WORK
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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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 9/9 Report: 52/53	2 FILER NAME Maldonado, Enrique Omar (Mr.)	3 ACCOUNT # (TEC filers) 00000001
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4 Date 06/25/2013	5 Payee name SOCIALIFE MAGAZINE
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6 Amount (\$) \$250.00	7 Payee address City; State; Zip Code 1300 N. 10TH ST., SUITE 310 MCALLEN, TX 78501
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> SOCIALIFE ADVERTISING OF GOLF TOURNAMENT
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 05/21/2013	Payee name UNITED STATES POSTAL SERVICE
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Amount (\$) \$605.80	Payee address City; State; Zip Code 620 E. PECAN BLVD. MCALLEN, TX 78501
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> BULKRATE STAMPS (APPLICATION FEE)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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OUTSTANDING LOANS

SCHEDULE L

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/1 Report: 53/53
2 FILER NAME Maldonado, Enrique Omar (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001
LENDER INFORMATION	4 Name of lender LONE STAR NATIONAL BANK <hr/> 5 Lender address; City; State; Zip Code 600 EAST NOLANA MCALLEN, TX 78501	
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	6 Name of guarantor <hr/> 7 Guarantor address; City; State; Zip Code	
LENDER INFORMATION	Name of lender LONE STAR NATIONAL BANK <hr/> Lender address; City; State; Zip Code 600 EAST NOLANA MCALLEN, TX 78501	
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor <hr/> Guarantor address; City; State; Zip Code	