

**JUDICIAL CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

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

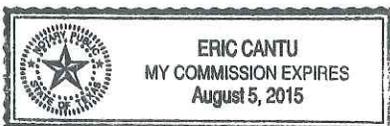
14 C/OH NAME Marla Cuellar	15 ACCOUNT # (Ethics Commission Filers)
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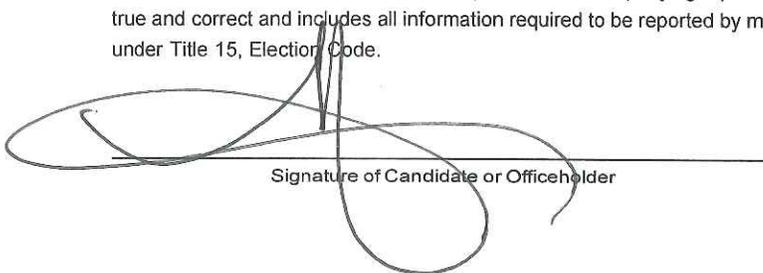
16 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> additional pages	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.		
	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME	
		COMMITTEE ADDRESS	
		COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 2750.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 102350.13
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 150399.87

18 AFFIDAVIT

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





Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Marla Cuellar, this the 15th day of January, 20 14, to certify which, witness my hand and seal of office.



Signature of officer administering oath

Eric Cantu

Print name of officer administering oath

Notary

Title of officer administering oath

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): 1/2	
2 FILER NAME Marla Cuellar		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 09/20/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Office of Ruben Ramirez	7 Amount of contribution (\$) 1500.00	8 In-kind contribution description(if applicable)
6 Contributor address; City; State; Zip Code 520 Pecan Blvd McAllen, TX 78501		(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 Law Office of Ruben Ramirez		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			

Date 10/15/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cowen & Garza LLP	Amount of contribution (\$) 500.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code 820 East Hackberry Suite 101 McAllen, TX 78501		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Attorney		Contributor's job title Attorney	
Contributor's employer/law firm		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

Date 10/15/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benjamin A. Salinas	Amount of contribution (\$) 250.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code 1518 N. Misty Lane Weslaco, TX 78596		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Individual		Contributor's job title Individual	
Contributor's employer/law firm		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): 2/2	
2 FILER NAME <p style="text-align: center;">Marla Cuellar</p>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <p style="text-align: center;">10/24/2013</p>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <p style="text-align: center;">Celina Garcia Vasquez</p>	7 Amount of contribution (\$) <p style="text-align: center;">500.00</p>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <p style="text-align: center;">2306 Wind Crest Lane Palmhurst, TX 78573</p>		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation <p style="text-align: center;">Optometrist</p>		10 Contributor's job title <p style="text-align: center;">Optometrist</p>	
11 Contributor's employer/law firm <p style="text-align: center;">Family Vision Care</p>		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code		
Contributor's principal occupation		Contributor's job title	
Contributor's employer/law firm		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code		
Contributor's principal occupation		Contributor's job title	
Contributor's employer/law firm		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

LOANS (JUDICIAL)

SCHEDULE E (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E(J): 1/1
2 FILER NAME Marla Cuellar		3 ACCOUNT # (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS: ⇒ ⇒ ⇒ ⇒ ⇒ ⇒		\$
5 Date of loan 09/03/2013	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Lone Star National Bank	9 Loan Amount (\$) 250000.00
6 Is lender a financial institution? <input checked="" type="radio"/> Y <input type="radio"/> N	8 Lender address; City; State; Zip Code 206 W. Ferguson Pharr, TX 78577	10 Interest rate 3.100 %
		11 Maturity date 04/15/2014
12 Lender's Principal Occupation		13 Lender's Job Title
14 Lender's Employer/Law Firm		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 CD #45205555		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)		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 1/32		2 FILER NAME Marla Cuellar		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 10-10-13		5 Payee name Abel Gonzalez			
6 Amount (\$) 255.00		7 Payee address; City; State; Zip Code 403 Acapulco Lane San Juan, Tx 78589			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Solicitation/fundraising		(b) Description (If travel outside of Texas, complete Schedule T) Kickoff decorations	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10-24-13		Payee name Abel Gonzalez			
Amount (\$) 425.00		Payee address; City; State; Zip Code 403 Acapulco Lane San Juan, Tx 78589			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Solicitation/fundraising		Description (If travel outside of Texas, complete Schedule T) Kick off decorations	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 9-27-13		Payee name Academy			
Amount (\$) 43.17		Payee address; City; State; Zip Code 391 E. Expy 83 McAllen, Tx 78501			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) advertising		Description (If travel outside of Texas, complete Schedule T) shirts	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 9-16-13		Payee name Academy			
Amount (\$) 64.92		Payee address; City; State; Zip Code 651 E. Trenton Road Edinburg, Tx 78539			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) advertising		Description (If travel outside of Texas, complete Schedule T) skeet shoot shirts	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 2/32		2 FILER NAME Marla Cuellar		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 9-27-13		5 Payee name Academy			
6 Amount (\$) 21.61		7 Payee address; City; State; Zip Code 711 E. Expwy 83 McAllen, TX 78540			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) advertising		(b) Description (If travel outside of Texas, complete Schedule T) shirts	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 9-27-13		Payee name Academy			
Amount (\$) 21.61		Payee address; City; State; Zip Code 711 E. Expwy 83 McAllen, TX 78540			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T)	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 12-13-13		Payee name Adrian Gonzalez			
Amount (\$) 500.00		Payee address; City; State; Zip Code 2400 Largo St Weslaco, TX 78596			
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) contract	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 12-30-13		Payee name Adrian Gonzalez			
Amount (\$) 1500.00		Payee address; City; State; Zip Code 2400 Largo St. Weslaco, TX 78596			
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) block walk	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages, Schedule F: 3/32		2 FILER NAME Marla Cuellar		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 12-17-13		5 Payee name Alicia Navarro			
6 Amount (\$) 900.00		7 Payee address; City; State; Zip Code			
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) Contract	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 12-05-13		Payee name American Cancer Society -RGV			
Amount (\$) 50.00		Payee address; City; State; Zip Code 5413 S. McCoil McAllen, TX 78501			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Contribution/donation		Description (If travel outside of Texas, complete Schedule T) donation	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 12-17-13		Payee name Amistad Wholesale			
Amount (\$) 148.79		Payee address; City; State; Zip Code 1416 Fresno St. McAllen, Texas 78501			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) advertising		Description (If travel outside of Texas, complete Schedule T) Parade expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 12-1-13		Payee name ANAK			
Amount (\$) 75.00		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Contribution/Donation		Description (If travel outside of Texas, complete Schedule T) donation	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 4/32	2 FILER NAME Marla Cuellar	3 ACCOUNT # (Ethics Commission Filers)
4 Date 9-4-13	5 Payee name Angel Casillas	
6 Amount (\$) 400.00	7 Payee address; City; State; Zip Code 2122 E Main St. Edcouch, TX 78538	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/wages/contract	(b) Description (If travel outside of Texas, complete Schedule T) contract
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought Office held
Date 9-25-13	Payee name Angels of Love	
Amount (\$) 350.00	Payee address; City; State; Zip Code 4020 N. 22d St. McAllen, TX 78504	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contribution/donation	Description (If travel outside of Texas, complete Schedule T) donation
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought Office held
Date 10-2-13	Payee name Aviso Media Group	
Amount (\$) 338.85	Payee address; City; State; Zip Code 2118 N 48th Lane McAllen, TX 78501	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) advertising	Description (If travel outside of Texas, complete Schedule T) graphics
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought Office held
Date 10-24-13	Payee name Aviso Media Group	
Amount (\$) 540.00	Payee address; City; State; Zip Code 2118 N. 48th Lane McAllen, TX 78501	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) advertising	Description (If travel outside of Texas, complete Schedule T) banners
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought Office held

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 5/32	2 FILER NAME Marla Cuellar	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 10-24-13	5 Payee name Aviso Media Group
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6 Amount (\$) 2,783.36	7 Payee address; City; State; Zip Code 2118 N. 48th Lane McAllen, TX 78501
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) advertising	(b) Description (If travel outside of Texas, complete Schedule T) yard signs / bumper stickers
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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 11-1-13	Payee name Aviso Media Group
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Amount (\$) 900.00	Payee address; City; State; Zip Code 2118 N. 48th Lane McAllen, TX 78501
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) advertising	Description (If travel outside of Texas, complete Schedule T) advertising graphics
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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 12-12-13	Payee name Aviso Media Group
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Amount (\$) 625.08	Payee address; City; State; Zip Code 2118 N. 48th Lane McAllen, TX 78501
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12-31-13	Payee name Aviso Media Group
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Amount (\$) 7953.66	Payee address; City; State; Zip Code 2118 N. 48th Lane McAllen, TX 78501
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) advertising	Description (If travel outside of Texas, complete Schedule T) billboards / literature
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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 FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 6/32	2 FILER NAME Marla Cuellar	3 ACCOUNT # (Ethics Commission Filers)
4 Date 9-10-13	5 Payee name Aviso Media Group	
6 Amount (\$) 3,250.00	7 Payee address; City; State; Zip Code 2118 N. 48th Lane McAllen, TX 78501	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) advertising	(b) Description (If travel outside of Texas, complete Schedule T) signs
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date 9-20-13	Payee name Aviso Media Group	
Amount (\$) 551.19	Payee address; City; State; Zip Code 2118 N. 48th Lane McAllen, TX 78501	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising	Description (If travel outside of Texas, complete Schedule T) Campaign cards
	Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date 9-25-13	Payee name Aviso Media Group	
Amount (\$) 1030.00	Payee address; City; State; Zip Code 2118 N. 48th Lane McAllen, TX 78501	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising	Description (If travel outside of Texas, complete Schedule T) Zumbathon shirts
	Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date 10-14-13	Payee name Aviso Media Group	
Amount (\$) 743.75	Payee address; City; State; Zip Code 2118 N. 48th Lane McAllen, TX 78501	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising	Description (If travel outside of Texas, complete Schedule T) t-shirt
	Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 7/32	2 FILER NAME Marla Cuellar	3 ACCOUNT # (Ethics Commission Filers)
4 Date 10-14-13	5 Payee name Aviso Media Group	
6 Amount (\$) 149.40	7 Payee address; City; State; Zip Code 2118 N. 48th Lane McAllen, TX 78501	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) advertising	(b) Description (If travel outside of Texas, complete Schedule T) shirt balance
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 9-10-13	Payee name Blanca Cruz	
Amount (\$) 1500.00	Payee address; City; State; Zip Code P.O. Box 301 Edcouch, Texas 78538	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salary/wages/contract labor	Description (If travel outside of Texas, complete Schedule T) contract
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 9-18-13	Payee name Blanca Cruz	
Amount (\$) 2500.00	Payee address; City; State; Zip Code P.O. Box 301 Edcouch, Texas 78538	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salary/wages/contract labor	Description (If travel outside of Texas, complete Schedule T) contract
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12-30-13	Payee name Cafe Jardin	
Amount (\$) 16.28	Payee address; City; State; Zip Code 1416 E. Pike Blvd Washco, Texas 78596	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) solicitation/fundraising	Description (If travel outside of Texas, complete Schedule T) lunch w/Adrian Gonzalez
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 8/32	2 FILER NAME Marla Cuellar	3 ACCOUNT # (Ethics Commission Filers)
4 Date 10-11-13	5 Payee name City Flower Shop	
6 Amount (\$) 1060.85	7 Payee address; City; State; Zip Code 100 S. Conway Mission, TX 78572	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Solicitation Fundraising	(b) Description (If travel outside of Texas, complete Schedule T) Kickoff -flowers
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date 9-26-13	Payee name Club at Cimarron	
Amount (\$) 500.00	Payee address; City; State; Zip Code 1200 Shary Road Mission, Texas 78572	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Solicitation/Fundraising	Description (If travel outside of Texas, complete Schedule T) Kick off deposit
	Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date 10-10-13	Payee name Club at Cimarron	
Amount (\$) 2,449.75	Payee address; City; State; Zip Code 1200 Shary Rd Mission, Texas 78572	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Solicitation/fundraising	Description (If travel outside of Texas, complete Schedule T) Kick off event food/location
	Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date 9-14-13	Payee name Copy Zone	
Amount (\$) 53.85	Payee address; City; State; Zip Code 4131 N. 10th St. McAllen, Texas 78504	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising	Description (If travel outside of Texas, complete Schedule T) Zumba ticket printing
	Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 9/32	2 FILER NAME Marta Cuellar	3 ACCOUNT # (Ethics Commission Filers)
4 Date 11-9-13	5 Payee name Copy Zone	
6 Amount (\$) 312.19	7 Payee address; City; State; Zip Code 4131 N. 10th St McAllen, Texas 78504	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) advertising	(b) Description (If travel outside of Texas, complete Schedule T) push cards
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11-25-13	Payee name Corner store	
Amount (\$) 60.80	Payee address; City; State; Zip Code 2406 Expwy 83 Mission, TX 78572	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Travel	Description (If travel outside of Texas, complete Schedule T) Gas
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11-5-13	Payee name Dairy Queen	
Amount (\$) 872.50	Payee address; City; State; Zip Code 1930 W Palma Vista Palmview, TX 78572	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) solicitation	Description (If travel outside of Texas, complete Schedule T) meet candidate event
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 9-30-13	Payee name Dairy Queen	
Amount (\$) 100.00	Payee address; City; State; Zip Code 800 US Hwy 83 Business McAllen, TX 78501	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contribution/donation	Description (If travel outside of Texas, complete Schedule T) donation
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages, Schedule F: 10/32	2 FILER NAME Marla Cuellar	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 9-4-13	5 Payee name Daniel Garcia
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6 Amount (\$) 400.00	7 Payee address; City; State; Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/wages/contract	(b) Description (If travel outside of Texas, complete Schedule T) contract
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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 9-4-13	Payee name Daniel Lira
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Amount (\$) 500.00	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/wages/contract	Description (If travel outside of Texas, complete Schedule T) contract
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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 12-15-13	Payee name Danny's Mexican Restaurant
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Amount (\$) 5494	Payee address; City; State; Zip Code 2408 Griffin Pkwy Mission, Texas 78572
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Solicitation/fundraising	Description (If travel outside of Texas, complete Schedule T) sketch shoot meeting
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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 10-18-13	Payee name Derick Palomin
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Amount (\$) 300.00	Payee address; City; State; Zip Code P.O. Box 596 La Villa, Texas 78562
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/wages/contract	Description (If travel outside of Texas, complete Schedule T) contract
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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 FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 12/32		2 FILER NAME Marla Cuellar		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 9-27-13		5 Payee name Donna Quarterback Club			
6 Amount (\$) 192.95		7 Payee address; City; State; Zip Code 1/4 Mile Eastwood Ave. Donna, TX 78537			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) advertising		(b) Description (If travel outside of Texas, complete Schedule T) football ad	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 11-15-13		Payee name Efrin Barajas			
Amount (\$) 2,300.00		Payee address; City; State; Zip Code 3439 Norma Ave. McAllen, TX 78501			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Salaries/wages/contract		Description (If travel outside of Texas, complete Schedule T) contract	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 9-16-13		Payee name Elite Productions			
Amount (\$) 350.00		Payee address; City; State; Zip Code 1200 S 17 1/2 St McAllen, Texas 78501			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) advertising		Description (If travel outside of Texas, complete Schedule T) Campaign ad - Ms. Edinburg	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 12-30-13		Payee name Esmer Garcia			
Amount (\$) 750.00		Payee address; City; State; Zip Code 701 N. Nevada Westaco, TX 78596			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Salaries/wages/contract		Description (If travel outside of Texas, complete Schedule T) contract	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages, Schedule F: 13/32		2 FILER NAME Marla Cuellar		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 12-30-13		5 Payee name Evelyn Macias			
6 Amount (\$) 500.00		7 Payee address; City; State; Zip Code 925 W. Lincoln Westaco, TX 78596			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Salaries/Wages/contract		(b) Description (If travel outside of Texas, complete Schedule T) Contract	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 12-30-13		Payee name Federal Express			
Amount (\$) 103.92		Payee address; City; State; Zip Code 2812 N. 10th St McAllen, TX 78501			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) laminating	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 9-16-13		Payee name Forever Memories			
Amount (\$) 225.00		Payee address; City; State; Zip Code 1216 N. Shary Road Mission, TX 78572			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) advertising		Description (If travel outside of Texas, complete Schedule T) Sharyland High School Ad	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10-5-13		Payee name Frances Salinas			
Amount (\$) 200.00		Payee address; City; State; Zip Code 101 W 6th La Joya, Texas 78560			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Contribution/Donation		Description (If travel outside of Texas, complete Schedule T) Helping hands donation	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 14/32	2 FILER NAME Marla Cuellar	3 ACCOUNT # (Ethics Commission Filers)
4 Date 9-13-13	5 Payee name Francisco Morales	
6 Amount (\$) 600.00	7 Payee address; City; State; Zip Code 108 E Coma Ave Hidalgo, TX 78557	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) advertising	(b) Description (If travel outside of Texas, complete Schedule T) embroidery
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12-13-13	Payee name Gerardo Medina	
Amount (\$) 1,847.42	Payee address; City; State; Zip Code 2118 N 48th Lane McAllen, TX 78501	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) advertising	Description (If travel outside of Texas, complete Schedule T) t-shirts / designs
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11-19-13	Payee name Graciela Sanchez	
Amount (\$) 450.00	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salary / wages / contract labor	Description (If travel outside of Texas, complete Schedule T) contract
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12-16-13	Payee name HEB	
Amount (\$) 61.28	Payee address; City; State; Zip Code 810 N Conway Mission, Texas 78572	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Travel	Description (If travel outside of Texas, complete Schedule T) Gas
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 15/32		2 FILER NAME Marla Cuellar		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 11-26-13		5 Payee name HEB			
6 Amount (\$) 319.20		7 Payee address; City; State; Zip Code 901 W Expwy 83 San Juan, TX 78589			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) contribution/donation		(b) Description (If travel outside of Texas, complete Schedule T) thanksgiving meals	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 11-19-13		Payee name Hidalgo Democratic Party			
Amount (\$) 1500.00		Payee address; City; State; Zip Code PO Box 4585 McAllen, Texas 78502			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) fees		Description (If travel outside of Texas, complete Schedule T) filing fees	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 12-12-13		Payee name Hidalgo County Texas Young Democrats			
Amount (\$) 50.00		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) contribution/donation		Description (If travel outside of Texas, complete Schedule T) donation	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 12-19-13		Payee name Hidalgo County Elections Dept.			
Amount (\$) 77.70		Payee address; City; State; Zip Code 101 S. 10th Avenue Edinburg, TX 78539			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) fees		Description (If travel outside of Texas, complete Schedule T) precinct record request	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 16/32		2 FILER NAME Marla Cuellar		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 10-24-13		5 Payee name Holiday Wine & Liquor			
6 Amount (\$) 562.91		7 Payee address; City; State; Zip Code 307 E. Business 83 Weslaco, Tx 78596			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Solicitation/Fundraising		(b) Description (If travel outside of Texas, complete Schedule T) event beverages	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 12-11-13		Payee name Hispanic Women's Network of Texas RGV			
Amount (\$) 40.00		Payee address; City; State; Zip Code 307 S. Broadway McAllen, Texas 78501			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) contribution/donation		Description (If travel outside of Texas, complete Schedule T) women's luncheon	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 11-8-13		Payee name Holy Spirit Catholic Church			
Amount (\$) 80.00		Payee address; City; State; Zip Code 2201 Martin Ave. McAllen, Texas 78501			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) contribution/donation		Description (If travel outside of Texas, complete Schedule T) donation	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date		Payee name Home Depot			
Amount (\$) 181.77		Payee address; City; State; Zip Code 120 S Shary Rd Mission, Tx 78572			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) advertising expense		Description (If travel outside of Texas, complete Schedule T) paint for signs	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 17/32	2 FILER NAME Marla Cuellar	3 ACCOUNT # (Ethics Commission Filers)
4 Date 10-5-13	5 Payee name Homero Jasso	
6 Amount (\$) 750.00	7 Payee address; City; State; Zip Code Edinburg, Texas 78539	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contribution/donation	(b) Description (If travel outside of Texas, complete Schedule T) Campaign Contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input checked="" type="checkbox"/> Office held
Date 10-18-13	Payee name Impact Signs	
Amount (\$) 7,527.50	Payee address; City; State; Zip Code 1214 N. 8th McAllen, Texas 78501	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) advertising	Description (If travel outside of Texas, complete Schedule T) Signs deposit
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11-1-13	Payee name Imprezos Pro Uniforms	
Amount (\$) 367.50	Payee address; City; State; Zip Code 108 E. Coma Ave Hidalgo, Tx 78557	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) solicitation/fundraising	Description (If travel outside of Texas, complete Schedule T) campaign bags
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11-6-13	Payee name Eabel Martinez	
Amount (\$) 1500.00	Payee address; City; State; Zip Code Elsa, Texas 78543	
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) contract
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 18/32	2 FILER NAME Marla Cuellar	3 ACCOUNT # (Ethics Commission Filers)
4 Date 10-25-13	5 Payee name Jaime Farias	
6 Amount (\$) 6,020.00	7 Payee address; City; State; Zip Code 1214 N. 8th St. McAllen, TX 78501	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising	(b) Description (If travel outside of Texas, complete Schedule T) t-shirts/sign deposits
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date 12-3-13	Payee name Jaime Farias	
Amount (\$) 6,400.00	Payee address; City; State; Zip Code 1214 N. 8th St McAllen, TX 78501	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) advertising	Description (If travel outside of Texas, complete Schedule T) signs
	Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date 10-18-13	Payee name Javier Garza	
Amount (\$) 75.00	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contribution / donation	Description (If travel outside of Texas, complete Schedule T) donation
	Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date 12-1-13	Payee name Jesse Moran	
Amount (\$) 250.00	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salary/wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract
	Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages, Schedule F: 20/32	2 FILER NAME Marla Cuellar	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 11-22-13	5 Payee name Jorge Pena
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6 Amount (\$) 200.00	7 Payee address; City; State; Zip Code 11111 Cirro Casares Elsa, TX 78543
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) advertising	(b) Description (If travel outside of Texas, complete Schedule T) signs
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12-16-13	Payee name Jorge Pena
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Amount (\$) 1000.00	Payee address; City; State; Zip Code 11111 Cirro Casares Elsa, TX 78543
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Polling expense	Description (If travel outside of Texas, complete Schedule T) rental
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12-2-13	Payee name Juan Diego Academy
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Amount (\$) 1100.00	Payee address; City; State; Zip Code 5208 S FM 494 Mission TX 78572
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contribution / Donation	Description (If travel outside of Texas, complete Schedule T) Donation
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12-13-13	Payee name Juan Sanchez
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Amount (\$) 200.00	Payee address; City; State; Zip Code 323 E owassa Rd Edinburg, TX 78539
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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) sketch shoot flyer
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 21/32	2 FILER NAME Marla Cuellar	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 11-30-13	5 Payee name Just Kawz It's Right
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6 Amount (\$) 100.00	7 Payee address; City; State; Zip Code 323 Cano St Edinburg, TX 78539
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) contribution/donation	(b) Description (If travel outside of Texas, complete Schedule T) donation
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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 12-4-13	Payee name K Mart
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Amount (\$) 217.65	Payee address; City; State; Zip Code 1405 E. Expwy 83 Mission Tx 78572
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) advertising	Description (If travel outside of Texas, complete Schedule T) parade expense
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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 12-16-13	Payee name Karin Joel
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Amount (\$) 250.00	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising	Description (If travel outside of Texas, complete Schedule T) Advertising - program book
------------------------	---	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10-30-13	Payee name Kim Catergiani
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Amount (\$) 25.00	Payee address; City; State; Zip Code 3113 Sandra Drive Fort Worth, TX 76008
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) contribution/donation	Description (If travel outside of Texas, complete Schedule T) donation
------------------------	---	---

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

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 22/32	2 FILER NAME Marla Cuellar	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 11-11-13	5 Payee name Kool River Media
---------------------------	---

6 Amount (\$) 2,900.00	7 Payee address; City; State; Zip Code 1401 E. Expressway 83 Donna, TX 78537
----------------------------------	--

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) Miyamas radio ad
---------------------------------	--	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12-6-13	Payee name La Capana Fabric Store
------------------------	---

Amount (\$) 25.92	Payee address; City; State; Zip Code 105 S. 16th St McAllen, Texas 78501
-----------------------------	--

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12-17-13	Payee name Linn-San Manuel Community Improvement
-------------------------	--

Amount (\$) 75.00	Payee address; City; State; Zip Code P.O. Box 345 Linn, Texas 78563
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contribution/donation	Description (If travel outside of Texas, complete Schedule T) donation
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10-29-13	Payee name Lone Star Beverages
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Amount (\$) 315.00	Payee address; City; State; Zip Code 201 E. Quamasia McAllen, Texas 78504
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Solicitation/fundraising	Description (If travel outside of Texas, complete Schedule T) beverages
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 23/32	2 FILER NAME Marla Cuellar	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 12-21-13	5 Payee name Lorenzo Cabrera
---------------------------	--

6 Amount (\$) 750.00	7 Payee address; City; State; Zip Code
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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) Contract
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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 10-10-13	Payee name L' Pastel
-------------------------	--------------------------------

Amount (\$) 104.00	Payee address; City; State; Zip Code 2505 E. Griffin Pkwy Mission, TX 78572
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) solicitation/fundraising	Description (If travel outside of Texas, complete Schedule T) pastry kick off
-------------------------------	---	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10-22-13	Payee name Lynn Lee Paury Queen
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Amount (\$) 1008.89	Payee address; City; State; Zip Code 800 E. Highway 83 McAllen, Texas 78501
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) solicitation/fundraising	Description (If travel outside of Texas, complete Schedule T) campaign event
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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 11-23-13	Payee name Mario Palomin Jr.
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Amount (\$) 750.00	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/wages/contract	Description (If travel outside of Texas, complete Schedule T) Contract
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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 FOR BOX 8(a)**

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

The Instruction Guide explains how to complete this form.

1 Total Pages Schedule F: 2+132		2 FILER NAME Marla Cuellar		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 11-14-13		5 Payee name MB Graphics			
6 Amount (\$) 1,957.33		7 Payee address; City; State; Zip Code 912 W. Beech McAllen, TX 78501			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Printing expenses		(b) Description (If travel outside of Texas, complete Schedule T) push cards / invitations	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 12-3-13		Payee name McAllen Chamber of Commerce			
Amount (\$) 50.00		Payee address; City; State; Zip Code 1200 Ash Avenue McAllen, TX 78501			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) advertising		Description (If travel outside of Texas, complete Schedule T) parade entry	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 12-5-13		Payee name Mercedes Chamber of Commerce			
Amount (\$) 75.00		Payee address; City; State; Zip Code 320 S Ohio Ave. Mercedes TX 78570			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) advertising		Description (If travel outside of Texas, complete Schedule T) parade entry	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10-4-13		Payee name MISSION PINK			
Amount (\$) 350.00		Payee address; City; State; Zip Code 900 S Bryan Rd Mission, TX 78572			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) contribution / donation		Description (If travel outside of Texas, complete Schedule T) donation	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 25/32	2 FILER NAME Marla Cuellar	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 9-19-13	5 Payee name MPA Digital
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6 Amount (\$) 1,845.00	7 Payee address; City; State; Zip Code 2243 W. Pecan Ave. McAllen, TX 78501
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) advertising	(b) Description (If travel outside of Texas, complete Schedule T) signs
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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 9-20-13	Payee name MPA Digital
------------------------	----------------------------------

Amount (\$) 180.00	Payee address; City; State; Zip Code 2243 W. Pecan Ave. McAllen, TX 78501
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) advertising	Description (If travel outside of Texas, complete Schedule T) banners
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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 11-21-13	Payee name Angels of Love
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Amount (\$) 100.00	Payee address; City; State; Zip Code 4020 N. 22nd St. McAllen, TX 78504
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contribution/Donation	Description (If travel outside of Texas, complete Schedule T) toy drive
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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 9-14-13	Payee name Office Depot
------------------------	-----------------------------------

Amount (\$) 49.73	Payee address; City; State; Zip Code 1406 W Expwy 83 Weslaco, TX 78596
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) office sup/supplies	Description (If travel outside of Texas, complete Schedule T) tag printing material
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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 FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 2 of 32	2 FILER NAME Marla Cuellar	3 ACCOUNT # (Ethics Commission Filers)
4 Date 10-8-13	5 Payee name Orlando Villarreal	
6 Amount (\$) 500.00	7 Payee address; City; State; Zip Code	
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) Contract
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 9-4-13	Payee name Oscar Garcia	
Amount (\$) 500.00	Payee address; City; State; Zip Code 2122 3 Main St. Ed couch, Tx 78538	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/wages/contract	Description (If travel outside of Texas, complete Schedule T) Contract
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12-14-13	Payee name Our Lady of Guadalupe Catholic Church	
Amount (\$) 100.00	Payee address; City; State; Zip Code 620 N Dunlap Mission, TX 78572	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) contribution/donation	Description (If travel outside of Texas, complete Schedule T) donation
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11-22-13	Payee name Palm Oliver Photography	
Amount (\$) 667.00	Payee address; City; State; Zip Code 1023 S Texas Blvd Westaco, TX 78596	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising	Description (If travel outside of Texas, complete Schedule T) Campaign Pictures
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 27/32	2 FILER NAME Marla Cuellar	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 9-25-13	5 Payee name Party City
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6 Amount (\$) 29.18	7 Payee address; City; State; Zip Code 305 E. Trenton Rd Edinburg, TX 78539
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising	(b) Description (If travel outside of Texas, complete Schedule T) balloons
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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 11-14-13	Payee name Derik Palomin
------------------	-----------------------------

Amount (\$) 300.00	Payee address; City; State; Zip Code PO Box 596 La Villa, Texas 78562
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract	Description (If travel outside of Texas, complete Schedule T) contract
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name labor	Office sought	Office held
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Date 11-20-13	Payee name Planned Parenthood of Hidalgo County
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Amount (\$) 250.00	Payee address; City; State; Zip Code 916 E Hackberry Ave McAllen, TX 78501
-----------------------	---

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contribution/Donation	Description (If travel outside of Texas, complete Schedule T) donation
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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 11-19-13	Payee name Probuild
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Amount (\$) 3199.87	Payee address; City; State; Zip Code 5020 W Bus Hwy 83 Mission, TX 78572
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising	Description (If travel outside of Texas, complete Schedule T) material for signs
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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 FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 28132	2 FILER NAME Marla Cuellar	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 12-20-13	5 Payee name Probuild
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6 Amount (\$) 1,945.82	7 Payee address; City; State; Zip Code 5020 W Bus Hwy 83 Mission, TX 78572
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising	(b) Description (If travel outside of Texas, complete Schedule T) Material for signs
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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 12-2-13	Payee name Resurrection Catholic Church
------------------------	---

Amount (\$) 200.00	Payee address; City; State; Zip Code 834 Citrus Ave Alamo, TX 78516
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contribution/Donation	Description (If travel outside of Texas, complete Schedule T) donation
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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 10-26-13	Payee name Rio Grande Valley Diabetes Assoc.
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Amount (\$) 250.00	Payee address; City; State; Zip Code 4121 N 10th St McAllen, TX 78504
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) contribution/Donation	Description (If travel outside of Texas, complete Schedule T) donation
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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 12-12-13	Payee name Roman David Delgado Scholarship Fund
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Amount (\$) 2,200.00	Payee address; City; State; Zip Code 5111 N. 10th St McAllen, TX 78504
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contribution/Donation	Description (If travel outside of Texas, complete Schedule T) donation
------------------------	--	--

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

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 29/32	2 FILER NAME Marla Cuellar	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 10-18-13	5 Payee name Ruben Gonzalez
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6 Amount (\$) 1000.00	7 Payee address; City; State; Zip Code
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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) contract
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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 10-24-13	Payee name Salvador Hernandez Jr.
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Amount (\$) 300.00	Payee address; City; State; Zip Code Edinburg, Texas
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) event expense	Description (If travel outside of Texas, complete Schedule T) Kickoff photographer
------------------------	---	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11-9-13	Payee name Sams Club
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Amount (\$) 69.30	Payee address; City; State; Zip Code 1400 E. Jackson McAllen, Texas 78503
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) solicitation/fundraising	Description (If travel outside of Texas, complete Schedule T) event-beverages
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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 10-25-13	Payee name Sams Club
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Amount (\$) 343.18	Payee address; City; State; Zip Code 7601 N. 10th St McAllen, Texas 78501
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) solicitation/fundraising	Description (If travel outside of Texas, complete Schedule T) cutlery, beverages
------------------------	--	---

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

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 30/32	2 FILER NAME Marla Cuellar	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 12-13-13	5 Payee name Speedy Stop 45
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6 Amount (\$) 62.36	7 Payee address; City; State; Zip Code 300 E Expwy 83 Mercedes, TX 78570
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) travel	(b) Description (If travel outside of Texas, complete Schedule T) fuel/gas
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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 12-10-13	Payee name Stripes
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Amount (\$) 61.78	Payee address; City; State; Zip Code 3618 W Pecan McAllen, TX 78501
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) travel	Description (If travel outside of Texas, complete Schedule T) gas fuel
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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 11-22-13	Payee name Sylvia Arjona
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Amount (\$) 150.00	Payee address; City; State; Zip Code 8420 S. Cage Blvd Pharr, Tx. 78577
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contribution/donation	Description (If travel outside of Texas, complete Schedule T) donation
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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 9-19-13	Payee name Target
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Amount (\$) 17.69	Payee address; City; State; Zip Code 708 E Expwy 83 McAllen, Texas 78503
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office air/Supplies	Description (If travel outside of Texas, complete Schedule T) storage bins
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 3132	2 FILER NAME Marla Cuellar	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 10-16-13	5 Payee name The Monitor
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6 Amount (\$) 150.00	7 Payee address; City; State; Zip Code 1400 E Nolana Ave. McAllen, TX 78504
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) advertising	(b) Description (If travel outside of Texas, complete Schedule T) football ad
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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 9-30-13	Payee name USPS
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Amount (\$) 92.00	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) office ovr supplies	Description (If travel outside of Texas, complete Schedule T) stamps
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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 9-30-13	Payee name USPS
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Amount (\$) 138.00	Payee address; City; State; Zip Code 620 E Pecan McAllen, TX 78501
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) office ovr supplies	Description (If travel outside of Texas, complete Schedule T) stamps
------------------------	---	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10/24/13	Payee name Victoria Palms
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Amount (\$) 1116.00	Payee address; City; State; Zip Code 602 Victoria Palms Blvd Donna, TX 78537
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) solicitation fundraising	Description (If travel outside of Texas, complete Schedule T) ballroom rental / drink deposit
------------------------	--	--

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

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 32/32	2 FILER NAME Marla Cuellar	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 12-7-13	5 Payee name Walgreens
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6 Amount (\$) 28.10	7 Payee address; City; State; Zip Code 701 E Nolana McAllen, TX 78504
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contribution/Donation	(b) Description (If travel outside of Texas, complete Schedule T) toys for tots
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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	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: 1/7		2 FILER NAME Marla Cuellar		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 08/17/2013		5 Payee name Border BBQ			
6 Amount (\$) 28.09 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code 1200 W Pike Weslaco, TX 78596			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Food/Beverage		(b) Description (If travel outside of Texas, complete Schedule T) Lunch for Mid Valley Campaign	
Date 08/18/2013		Payee name Sam's Club			
Amount (\$) 38.91 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 1400 E Jackson McAllen, TX 78501			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Printing		Description (If travel outside of Texas, complete Schedule T) Campaign proofs	
Date 08/27/2013		Payee name Jose's Cafe			
Amount (\$) 8.66 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 260 S. Texas Blvd Weslaco, TX 78596			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Food/Beverage		Description (If travel outside of Texas, complete Schedule T) Breakfast to discuss Campaign	
Date 08/27/2013		Payee name Dairy Queen			
Amount (\$) 20.46 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 524 N. Salinas Donna, TX 78537			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Food/Beverage		Description (If travel outside of Texas, complete Schedule T) meeting with Ladies of Donna	

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: 2/7	2 FILER NAME Marla Cuellar	3 ACCOUNT # (Ethics Commission Filers)
4 Date 09/02/2013	5 Payee name Cricket	
6 Amount (\$) 118.90 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 600 E Expwy 83 McAllen, TX 78501	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead	(b) Description (If travel outside of Texas, complete Schedule T) cell phone service
Date 09/05/2013	Payee name Longhorn Steakhouse	
Amount (\$) 65.83 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 701 E Expwy 83 Weslaco, TX 78596	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage	Description (If travel outside of Texas, complete Schedule T) Lunch with Production business
Date 09/06/2013	Payee name Rudy's BBQ	
Amount (\$) 17.98 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 2096 W Nolana Pharr, TX 78577	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage	Description (If travel outside of Texas, complete Schedule T) Lunch with Aviso Production
Date 09/26/2013	Payee name Lone Star BBQ	
Amount (\$) 22.47 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 3619 N 10th McAllen, TX 78501	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage	Description (If travel outside of Texas, complete Schedule T) Lunch with Elite Productions
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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials 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 Total pages Schedule G: 3/7	2 FILER NAME Marla Cuellar	3 ACCOUNT # (Ethics Commission Filers)
4 Date 09/24/2013	5 Payee name T-Shirt Express	
6 Amount (\$) 76.83 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 3611 W Expwy 83 Mission, TX 78572	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising	(b) Description (If travel outside of Texas, complete Schedule T) Shirt embriodery
Date 09/08/2013	Payee name Office Depot	
Amount (\$) 98.80 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 2509 E Expwy 83 McAllen, TX 78501	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office overhead	Description (If travel outside of Texas, complete Schedule T) Badgs and labels
Date 09/12/2013	Payee name Academy	
Amount (\$) 36.65 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 391 E Expwy 83 McAllen, TX 78501	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising	Description (If travel outside of Texas, complete Schedule T) Polo shirts for campaign
Date 09/23/2013	Payee name HEB	
Amount (\$) 60.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 2409 E Expwy 83 Misson, TX 78572	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Travel in District	Description (If travel outside of Texas, complete Schedule T) Gas
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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: 4/7	2 FILER NAME Marla Cuellar	3 ACCOUNT # (Ethics Commission Filers)
4 Date 09/13/2013	5 Payee name Thai Red Chilis	
6 Amount (\$) 39.43 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 3507 N Ware Rd McAllen, TX 78504	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage	(b) Description (If travel outside of Texas, complete Schedule T) meeting for campaign
Date 09/16/2013	Payee name T-Shirt Express	
Amount (\$) 175.37 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 3611 WExpwy 83 Mission, TX 78572	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising	Description (If travel outside of Texas, complete Schedule T) Embroidery Logos
Date 09/30/2013	Payee name Office Depot	
Amount (\$) 8.63 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 5115 N 10th St McAllen, TX 78504	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office overhead	Description (If travel outside of Texas, complete Schedule T) Badges & labels
Date 10/23/2013	Payee name Shop 4 less	
Amount (\$) 24.36 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1411 W Bus 83 McAllen, TX 78501	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office overhead	Description (If travel outside of Texas, complete Schedule T) Supplies for parade float

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: 5/7	2 FILER NAME Marla Cuellar	3 ACCOUNT # (Ethics Commission Filers)
4 Date 10/23/2013	5 Payee name La Imports	
6 Amount (\$) 5.36 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 2 Main St McAllen, TX 78501	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office overhead	(b) Description (If travel outside of Texas, complete Schedule T) Supplies for parade float
Date 10/23/2013	Payee name Junction Cafe	
Amount (\$) 47.04 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 11 South Cage Pharr, TX 78577	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage	Description (If travel outside of Texas, complete Schedule T) meeting for campaign
Date 10/29/2013	Payee name Lone Star Bank	
Amount (\$) 5.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code PO Box 1127 Pharr, TX 78577	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Money order fee
Date 11/06/2013	Payee name Home Depot	
Amount (\$) 8.05 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 120 S Shary Rd Mission, TX 78572	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising	Description (If travel outside of Texas, complete Schedule T) nails for signs
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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: 617	2 FILER NAME Marla Cuellar	3 ACCOUNT # (Ethics Commission Filers)
4 Date 11/25/2013	5 Payee name Lorghorn Steakhouse	
6 Amount (\$) 29.29 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 3600 Expwy 83 McAllen, TX 78501	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage	(b) Description (If travel outside of Texas, complete Schedule T) meeting for campaign
Date 12/01/2013	Payee name Instant Ballon Stands	
Amount (\$) 50.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 403 Acapulco Lane San Juan, TX 78589	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Solicitatin Fundraising	Description (If travel outside of Texas, complete Schedule T) Campaign event
Date 12/06/2013	Payee name K Mart	
Amount (\$) 25.22 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1405 E Expwy 83 Mission, TX 78572	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising	Description (If travel outside of Texas, complete Schedule T) Staples & Candy canes for parade
Date 12/03/2013	Payee name Home Depot	
Amount (\$) 102.68 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 120 S Shary Rd Mission, TX 78572	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising	Description (If travel outside of Texas, complete Schedule T) paint for signs

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: 7/7	2 FILER NAME Marla Cuellar	3 ACCOUNT # (Ethics Commission Filers)
4 Date 12/17/2013	5 Payee name Lone Star BBQ	
6 Amount (\$) 70.58 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 2224 E Bus 83 Mission, TX 78572	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage	(b) Description (If travel outside of Texas, complete Schedule T) meeting with Graphic designer
Date 12/23/2013	Payee name Home Depot	
Amount (\$) 126.26 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 120 S Shary Rd Mission, TX 78572	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising	Description (If travel outside of Texas, complete Schedule T) Battery/fuel for parade float
Date	Payee name	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
Date	Payee name	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)

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OUTSTANDING LOANS

SCHEDULE L

The Instruction Guide explains how to complete this form.

1 Total pages Schedule L:
1/1

2 FILER NAME

Marla Cuellar

3 ACCOUNT # (Ethics Commission Filers)

LENDER INFORMATION

4 Name of lender
Lone Star National Bank

5 Lender address; City; State; Zip Code
206 W Ferguson Pharr TX 78577

GUARANTOR INFORMATION

6 Name of guarantor

not applicable

7 Guarantor address; City; State; Zip Code

LENDER INFORMATION

Name of lender

Lender address; City; State; Zip Code

GUARANTOR INFORMATION

Name of guarantor

not applicable

Guarantor address; City; State; Zip Code

LENDER INFORMATION

Name of lender

Lender address; City; State; Zip Code

GUARANTOR INFORMATION

Name of guarantor

not applicable

Guarantor address; City; State; Zip Code

LENDER INFORMATION

Name of lender

Lender address; City; State; Zip Code

GUARANTOR INFORMATION

Name of guarantor

not applicable

Guarantor address; City; State; Zip Code

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