



# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

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

15 C/OH NAME

16 ACCOUNT # (Ethics Commission Filers)

17 NOTICE FROM POLITICAL COMMITTEE(S)

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

COMMITTEE TYPE

COMMITTEE NAME

GENERAL

SPECIFIC

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

additional pages

18 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)

\$ 0

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$

4. **TOTAL POLITICAL EXPENDITURES**

\$ 12,495.32

CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

\$ 15,596.22

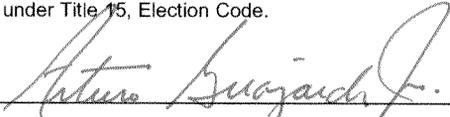
OUTSTANDING LOAN TOTALS

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

\$

19 AFFIDAVIT

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



Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Arturo Guajardo, Jr., this the 18th day of January, 20 11, to certify which, witness my hand and seal of office.



Signature of officer administering oath

Jennilee Ann Garza

Printed name of officer administering oath

Hidalgo County Deputy Clerk

Title of officer administering oath

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME Hidalgo County Clerk Arturo Guajardo, Jr.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)  6 Contributor address; City; State; Zip Code	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)  Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)  Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)  Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)  Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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

# PLEGGED CONTRIBUTIONS

# SCHEDULE B

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule B:

**2** FILER NAME

Hidalgo County Clerk Arturo Guajardo, Jr.

**3** ACCOUNT # (Ethics Commission Filers)

**4** TOTAL OF UNITEMIZED PLEDGES:      ⇨   ⇨   ⇨   ⇨   ⇨   ⇨

\$

**5** Date

**6** Full name of pledgor       out-of-state PAC (ID#: \_\_\_\_\_)

**8** Amount of pledge (\$)

**9** In-kind description (if applicable)

**7** Pledgor address;      City;   State;   Zip Code

(If travel outside of Texas, complete Schedule T)

**10** Principal occupation / Job title (See Instructions)

**11** Employer (See Instructions)

Date

Full name of pledgor       out-of-state PAC (ID#: \_\_\_\_\_)

Amount of pledge (\$)

In-kind description (if applicable)

Pledgor address;      City;   State;   Zip Code

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of pledgor       out-of-state PAC (ID#: \_\_\_\_\_)

Amount of pledge (\$)

In-kind description (if applicable)

Pledgor address;      City;   State;   Zip Code

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of pledgor       out-of-state PAC (ID#: \_\_\_\_\_)

Amount of pledge (\$)

In-kind description (if applicable)

Pledgor address;      City;   State;   Zip Code

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of pledgor       out-of-state PAC (ID#: \_\_\_\_\_)

Amount of pledge (\$)

In-kind description (if applicable)

Pledgor address;      City;   State;   Zip Code

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

# LOANS

# SCHEDULE E

The Instruction Guide explains how to complete this form. 1 Total pages Schedule E:

2 FILER NAME 3 ACCOUNT # (Ethics Commission Filers)  
**Hidalgo County Clerk Arturo Guajardo, Jr.**

4 TOTAL OF UNITEMIZED LOANS:    ⇨   ⇨   ⇨   ⇨   ⇨   ⇨   ⇨    \$

5 Date of loan	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	9 Loan Amount (\$)
6 Is lender a financial Institution?  Y    N	8 Lender address;    City;    State;    Zip Code	10 Interest rate
		11 Maturity date

12 Principal occupation / Job title (See Instructions)    13 Employer (See Instructions)

14 Description of Collateral  
 none

15 GUARANTOR INFORMATION  <input type="checkbox"/> not applicable	16 Name of guarantor  17 Guarantor address;    City;    State;    Zip Code	18 Amount Guaranteed (\$)
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19 Principal Occupation (See Instructions)    20 Employer (See Instructions)

Date of loan	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	Loan Amount (\$)
Is lender a financial Institution?  Y    N	Lender address;    City;    State;    Zip Code	Interest rate
		Maturity date

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

Description of Collateral  
 none

GUARANTOR INFORMATION  <input type="checkbox"/> not applicable	Name of guarantor  Guarantor address;    City;    State;    Zip Code	Amount Guaranteed (\$)
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Principal Occupation (See Instructions)    Employer (See Instructions)

**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.

<b>1</b> Total pages Schedule F:	<b>2</b> FILER NAME Hidalgo County Clerk Arturo Guajardo, Jr.	<b>3</b> ACCOUNT # (Ethics Commission Filers)
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<b>4</b> Date 07/01/2010	<b>5</b> Payee name Coffee Zone
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<b>6</b> Amount (\$)  \$38.50	<b>7</b> Payee address; City; State; Zip Code  1108 South McColl Road Edinburg TX 78539
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) Meeting to discuss Officeholder issues.
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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 07/14/2010	Payee name Outback Steakhouse Restaurant
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Amount (\$)  \$112.40	Payee address; City; State; Zip Code  1109 East Business 83 McAllen, TX 78501
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<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) Meeting to discuss Campaign issues.
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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 07/15/2010	Payee name Juan Chavez Check # 5155
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Amount (\$)  \$1,000.00	Payee address; City; State; Zip Code  McAllen, TX
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<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract Labor for Campaign services.
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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 07/16/2010	Payee name Jose Salinas Check # 5154
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Amount (\$)  \$400.00	Payee address; City; State; Zip Code  McAllen, TX
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<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract Labor for Campaign services.
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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.

<b>1</b> Total pages Schedule F:	<b>2</b> FILER NAME Hidalgo County Clerk Arturo Guajardo, Jr.		<b>3</b> ACCOUNT # (Ethics Commission Filers)
<b>4</b> Date 07/19/2010	<b>5</b> Payee name National Association of Counties (NACO) National Conference		
<b>6</b> Amount (\$) \$175.00	<b>7</b> Payee address; City; State; Zip Code P.O. Box 79007 Baltimore, MD 21279		
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See categories listed at the top of this schedule) Fees	<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) Officeholder Seminar	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Date 07/21/2010	Candidate / Officeholder name AT&T		
Amount (\$) \$15.29	Payee address; City; State; Zip Code 1400 East Expressway 83 #115 McAllen, TX 78503		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Wireless Internet Fees for Officeholder.	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Date 07/29/2010	Candidate / Officeholder name AT&T		
Amount (\$) \$214.34	Payee address; City; State; Zip Code 1400 East Expressway 83 #115 McAllen, TX 78503		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other political expenditures	Description (If travel outside of Texas, complete Schedule T) Cell Phone Expense for Officeholder.	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Date 08/04/2010	Candidate / Officeholder name Sea Ranch Restaurant		
Amount (\$) \$134.01	Payee address; City; State; Zip Code 1 Padre Boulevard South Padre Island, TX 78597-6402		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) Meeting to discuss Officeholder issues.	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>			

**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.

<b>1</b> Total pages Schedule F:	<b>2</b> FILER NAME Hidalgo County Clerk Arturo Guajardo, Jr.	<b>3</b> ACCOUNT # (Ethics Commission Filers)
<b>4</b> Date 08/09/2010	<b>5</b> Payee name JCPenney Store	
<b>6</b> Amount (\$) \$71.00	<b>7</b> Payee address; City; State; Zip Code 419 E. Trenton Road, Edinburg, TX 78539	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See categories listed at the top of this schedule) Other Political Expenditures	<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) Officeholder Attire
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/10/2010	Payee name Best Buy	
Amount (\$) \$1,239.42	Payee address; City; State; Zip Code 700 South Jackson Road McAllen, TX 78501	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other Political Expenditures	Description (If travel outside of Texas, complete Schedule T) Camera for Campaign
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/17/2010	Payee name De La Garza's Meat Market	
Amount (\$) \$106.03	Payee address; City; State; Zip Code Edinburg, TX	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) Meeting with constituents.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/19/2010	Payee name AT&T	
Amount (\$) \$15.09	Payee address; City; State; Zip Code 3701 Expressway 83 #100 McAllen, TX 78503	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Wireless Internet Fees for Officeholder.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

**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.

<b>1</b> Total pages Schedule F:	<b>2</b> FILER NAME Hidalgo County Clerk Arturo Guajardo, Jr.	<b>3</b> ACCOUNT # (Ethics Commission Filers)
<b>4</b> Date 08/25/2010	<b>5</b> Payee name PSJA Quarterback Club Check # 5156	
<b>6</b> Amount (\$) \$500.00	<b>7</b> Payee address; City; State; Zip Code 805 Ridge Rd. San Juan, TX 78589	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) Political Advertising in Football Program
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date 08/27/2010	Payee name Jennilee Garza	
Amount (\$) \$60.00	Payee address; City; State; Zip Code McAllen, TX	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Loan Repayment/Reimbursement	Description (If travel outside of Texas, complete Schedule T) Reimbursement for supplies used in Officeholder Meeting.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date 09/08/2010	Payee name Kumori Restaurant	
Amount (\$) \$58.24	Payee address; City; State; Zip Code 4500 North 10th St. #50 McAllen, TX 78504	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) Meeting with constituents.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date 09/13/2010	Payee name Exxon Mobil	
Amount (\$) \$49.73	Payee address; City; State; Zip Code San Juan, TX 78589	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Travel in District	Description (If travel outside of Texas, complete Schedule T) Fuel used for Campaign travel in District.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

**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.

<b>1</b> Total pages Schedule F:	<b>2</b> FILER NAME Hidalgo County Clerk Arturo Guajardo, Jr.	<b>3</b> ACCOUNT # (Ethics Commission Filers)
<b>4</b> Date 09/20/2010	<b>5</b> Payee name AT&T	
<b>6</b> Amount (\$) \$15.09	<b>7</b> Payee address; City; State; Zip Code 3701 Expressay 83 #100 McAllen, TX 78503	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See categories listed at the top of this schedule) Fees	<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) Wireless Internet Fees for Officeholder.
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/29/2010	Payee name Annette C. Muniz Check # 5157	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code McAllen, TX	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract Labor for Campaign Services.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/07/2010	Payee name Mission Regional Medical Center Check # 5158	
Amount (\$) \$300.00	Payee address; City; State; Zip Code 900 South Bryan Road Mission, TX 78572	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Contribution/Donation	Description (If travel outside of Texas, complete Schedule T) Donation for Cancer Walk Event.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/12/2010	Payee name Dirty Al's	
Amount (\$) \$80.82	Payee address; City; State; Zip Code 33396 State Park Road 100 South Padre Island, TX 78597-6412	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) Meeting with Constituents.
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.

<b>1</b> Total pages Schedule F:	<b>2</b> FILER NAME Hidalgo County Clerk Arturo Guajardo, Jr.		<b>3</b> ACCOUNT # (Ethics Commission Filers)
<b>4</b> Date 10/18/2010	<b>5</b> Payee name AT&T		
<b>6</b> Amount (\$) \$15.09	<b>7</b> Payee address; City; State; Zip Code 3701 Expressway 83 #100 McAllen, TX 78503		
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See categories listed at the top of this schedule) Fees	<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) Wireless Internet Fees for Officeholder.	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 10/20/2010	Payee name A.C. Cuellar, Jr. Campaign Check # 5159		
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code Edinburg, TX		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Contributions/Donations Made by Candidate	Description (If travel outside of Texas, complete Schedule T) Campaign Contribution.	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 10/28/2010	Payee name Feldman's Valley Wide		
Amount (\$) \$176.33	Payee address; City; State; Zip Code 318 South Cage Boulevard Pharr, TX 78577-4845		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) Beverages for Campaign Event.	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 10/29/2010	Payee name Sam's Club		
Amount (\$) \$552.77	Payee address; City; State; Zip Code 1400 E. Jackson McAllen, TX 78503		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Event Expense	Description (If travel outside of Texas, complete Schedule T) Supplies for Campaign Event.	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>			

**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.

<b>1</b> Total pages Schedule F:	<b>2</b> FILER NAME Hidalgo County Clerk Arturo Guajardo, Jr.	<b>3</b> ACCOUNT # (Ethics Commission Filers)
<b>4</b> Date 11/01/2010	<b>5</b> Payee name AT&T	
<b>6</b> Amount (\$) \$54.11	<b>7</b> Payee address; City; State; Zip Code 3701 Expressway 83 #100 McAllen, TX 78503	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See categories listed at the top of this schedule) Fees	<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) Wireless Internet Fees for Officeholder.
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date 11/02/2010	Payee name Frank Garcia Check # 5161	
Amount (\$) \$250.00	Payee address; City; State; Zip Code Donna, TX	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) Meeting with Constituents.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date 11/17/2010	Payee name Stripes	
Amount (\$) \$65.06	Payee address; City; State; Zip Code 809 North Cage Boulevard Pharr, TX 78577-3117	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Travel in District	Description (If travel outside of Texas, complete Schedule T) Fuel for Campaign travel in District.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date 11/17/2010	Payee name AT&T	
Amount (\$) \$14.99	Payee address; City; State; Zip Code 3701 Expressway 83 #100 McAllen, TX 78503	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Wireless Internet Fees for Officeholder.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

**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.

<b>1</b> Total pages Schedule F:	<b>2</b> FILER NAME Hidalgo County Clerk Arturo Guajardo, Jr.		<b>3</b> ACCOUNT # (Ethics Commission Filers)
<b>4</b> Date 11/18/2010	<b>5</b> Payee name Al Fresco's Deli Express Check # 5162		
<b>6</b> Amount (\$) \$805.86	<b>7</b> Payee address; City; State; Zip Code 219 E. Cano Edinburg, TX 78539		
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) Luncheon for Officeholder's Staff.	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 11/23/010	Payee name Barnes and Noble Bookstore		
Amount (\$) \$54.99	Payee address; City; State; Zip Code 4005 N. 10th Street McAllen, TX 78504		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Gifts/Awards/Memorials Expense	Description (If travel outside of Texas, complete Schedule T) Gift to Constituent.	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 12/02/2010	Payee name Gilbert Mercado Check # 5163		
Amount (\$) \$400.00	Payee address; City; State; Zip Code Edinburg, TX		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Gifts/Awards/Memorials Expense	Description (If travel outside of Texas, complete Schedule T) Gifts to Constituents.	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 12/09/2010	Payee name Best Buy		
Amount (\$) \$500.00	Payee address; City; State; Zip Code 700 South Jackson Road McAllen, TX 78501		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Contributions/Donations Made By Candidate	Description (If travel outside of Texas, complete Schedule T) Door Prize Items for School Fundraiser.	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>			

**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.

<b>1</b> Total pages Schedule F:	<b>2</b> FILER NAME Hidalgo County Clerk Arturo Guajardo, Jr.	<b>3</b> ACCOUNT # (Ethics Commission Filers)
<b>4</b> Date 12/10/2010	<b>5</b> Payee name Staples, Inc.	
<b>6</b> Amount (\$) \$48.14	<b>7</b> Payee address; City; State; Zip Code 1606 West University Dr. Edinburg, TX 78539	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) Political Advertising.
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/13/2010	Payee name Cheddar's Restaurant	
Amount (\$) \$112.78	Payee address; City; State; Zip Code 3020 East Expressway 83 McAllen, TX 78501	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) Meeting with Constituents.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/14/2010	Payee name PSJA Bear Baseball Check # 5164	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 805 Ridge Road San Juan, TX 78589-2557	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder	Description (If travel outside of Texas, complete Schedule T) Donation for School Fundraiser.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/15/2010	Payee name USPS	
Amount (\$) \$52.80	Payee address; City; State; Zip Code 410 South Jackson Road Edinburg, TX 78539	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Other Polital Expenditure	Description (If travel outside of Texas, complete Schedule T) Postage for Officeholder's Christmas Cards.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

**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.

<b>1</b> Total pages Schedule F:	<b>2</b> FILER NAME Hidalgo County Clerk Arturo Guajardo, Jr.	<b>3</b> ACCOUNT # (Ethics Commission Filers)
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<b>4</b> Date 12/16/2010	<b>5</b> Payee name AT&T
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<b>6</b> Amount (\$)  \$15.09	<b>7</b> Payee address; City; State; Zip Code  3701 Expressway 83 #100 McAllen, TX 78503
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<b>8</b> PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description (If travel outside of Texas, complete Schedule T) Wireless Internet Fees for Officeholder.
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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 12/17/2010	Payee name Walgreen Company
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Amount (\$)  \$382.90	Payee address; City; State; Zip Code  1520 S. McColl Rd. Edinburg, TX 78539
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Gifts/Awards/Memorials Expense	Description (If travel outside of Texas, complete Schedule T) Gifts for Officeholder Employees.
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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 12/21/2010	Payee name Holiday Wine & Liquor
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Amount (\$)  \$203.45	Payee address; City; State; Zip Code  1912 North 10th Street McAllen, TX 78501-4106
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Gifts/Awards/Memorials Expense	Description (If travel outside of Texas, complete Schedule T) Gifts for Constituents.
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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 12/22/2010	Payee name Annette Muniz & Noe Lopez, Jr. Check # 5165
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Amount (\$)  \$206.00	Payee address; City; State; Zip Code  Edinburg, TX
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Gifts/Awards/Memorials Expense	Description (If travel outside of Texas, complete Schedule T) Gifts for Officeholder's Employees.
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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 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.

<b>1</b> Total pages Schedule G:	<b>2</b> FILER NAME Hidalgo County Clerk Arturo Guajardo, Jr.	<b>3</b> ACCOUNT # (Ethics Commission Filers)
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<b>4</b> Date	<b>5</b> Payee name
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<b>6</b> Amount (\$)  <input type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See categories listed at the top of this schedule)	<b>(b)</b> Description (If travel outside of Texas, complete Schedule T)
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Date	Payee name
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Amount (\$)  <input type="checkbox"/> Reimbursement from political contributions intended	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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Date	Payee name
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Amount (\$)  <input type="checkbox"/> Reimbursement from political contributions intended	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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Date	Payee name
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Amount (\$)  <input type="checkbox"/> Reimbursement from political contributions intended	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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**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

# PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH

## SCHEDULE H

### 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.

<b>1</b> Total pages Schedule H:	<b>2</b> FILER NAME Hidalgo County Clerk Arturo Guajardo, Jr.	<b>3</b> ACCOUNT # (Ethics Commission Filers)
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<b>4</b> Date	<b>5</b> Business name
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<b>6</b> Amount (\$)	<b>7</b> Business address; City; State; Zip Code
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See categories listed at the top of this schedule)	<b>(b)</b> 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	Business name
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Amount (\$)	Business address; City; State; Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	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	Business name
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Amount (\$)	Business address; City; State; Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	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	Business name
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Amount (\$)	Business address; City; State; Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	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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**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE I

### 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.

<b>1</b> Total pages Schedule I:	<b>2</b> FILER NAME Hidalgo County Clerk Arturo Guajardo, Jr.	<b>3</b> ACCOUNT # (Ethics Commission Filers)
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<b>4</b> Date	<b>5</b> Payee name
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<b>6</b> Amount (\$)	<b>7</b> Payee address; City; State; Zip Code
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<b>8</b> PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (See instructions regarding type of information required.)
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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 (See instructions regarding type of information required.)
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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 (See instructions regarding type of information required.)
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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 (See instructions regarding type of information required.)
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**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

**CREDITS (optional)**

**SCHEDULE K**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule K:

**2** FILER NAME

Hidalgo County Clerk Arturo Guajardo, Jr.

**3** ACCOUNT # (Ethics Commission Filers)

<b>4</b> Date	<b>5</b> Payor name	<b>8</b> Amount (\$)
	<b>6</b> Payor address; City; State; Zip Code	
	<b>7</b> Reason for credit	
	Payor name	
	Payor address; City; State; Zip Code	
	Reason for credit	
	Payor name	
	Payor address; City; State; Zip Code	
	Reason for credit	
	Payor name	
	Payor address; City; State; Zip Code	
	Reason for credit	
	Payor name	
	Payor address; City; State; Zip Code	
	Reason for credit	

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

## SCHEDULE T

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule T:
<b>2</b> FILER NAME Hidalgo County Clerk Arturo Guajardo, Jr.		<b>3</b> ACCOUNT # (Ethics Commission Filers)
<b>4</b> Name of Contributor / Corporation or Labor Organization / Pledgor / Payee		
<b>5</b> Contribution / Expenditure reported on:  <input type="checkbox"/> Schedule A <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule C <input type="checkbox"/> Schedule D <input type="checkbox"/> Schedule F <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule N <input type="checkbox"/> COH-UC <input type="checkbox"/> COH-T <input type="checkbox"/> PAC-C <input type="checkbox"/> PAC-E		
<b>6</b> Dates of travel	<b>7</b> Name of person(s) traveling	
	<b>8</b> Departure city or name of departure location	
	<b>9</b> Destination city or name of destination location	
<b>10</b> Means of transportation	<b>11</b> Purpose of travel (including name of conference, seminar, or other event)	
Name of Contributor / Corporation or Labor Organization / Pledgor / Payee		
Contribution / Expenditure reported on:  <input type="checkbox"/> Schedule A <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule C <input type="checkbox"/> Schedule D <input type="checkbox"/> Schedule F <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule N <input type="checkbox"/> COH-UC <input type="checkbox"/> COH-T <input type="checkbox"/> PAC-C <input type="checkbox"/> PAC-E		
<b>Dates of travel</b>	<b>Name of person(s) traveling</b>	
	<b>Departure city or name of departure location</b>	
	<b>Destination city or name of destination location</b>	
<b>Means of transportation</b>	<b>Purpose of travel (including name of conference, seminar, or other event)</b>	
Name of Contributor / Corporation or Labor Organization / Pledgor / Payee		
Contribution / Expenditure reported on:  <input type="checkbox"/> Schedule A <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule C <input type="checkbox"/> Schedule D <input type="checkbox"/> Schedule F <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule N <input type="checkbox"/> COH-UC <input type="checkbox"/> COH-T <input type="checkbox"/> PAC-C <input type="checkbox"/> PAC-E		
<b>Dates of travel</b>	<b>Name of person(s) traveling</b>	
	<b>Departure city or name of departure location</b>	
	<b>Destination city or name of destination location</b>	
<b>Means of transportation</b>	<b>Purpose of travel (including name of conference, seminar, or other event)</b>	
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		