Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512)463-5800 1-800-325-8506

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.

1 ACCOUNT # (Ethics Commission filers): 00000000

2 Total pages this report: 1/52

OFFICE USE ONLY

Date Received: 2010 JAN 15 PM 4:17

Date Hand-delivered or Date Postmarked

Receipt # | Amount

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

TITLE | FIRST: Ramon | MI

NICKNAME | LAST: Garcia | SUFFIX

4 CANDIDATE / OFFICEHOLDER ADDRESS

☐ Change of Address

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

222 W. UNIVERSITY DRIVE

Edinburg TX 78539

5 CAMPAIGN TREASURER NAME

TITLE | FIRST: ISMAEL | MI

NICKNAME | LAST: RODRIGUEZ | SUFFIX

6 CAMPAIGN TREASURER ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

1111 N. YUCCA

MCALLEN TX 78504

7 CAMPAIGN TREASURER PHONE

AREA CODE: (956) PHONE NUMBER: 537-6900 EXTENSION:

8 REPORT TYPE

- [X] January 15
- [ ] 30th day before election
- [ ] Runoff
- [ ] 15th day after campaign treasurer appointment (officeholder only)
- [ ] July 15
- [ ] 8th day before election
- [ ] Exceeded $500 limit
- [ ] Final report (Attach C/OH - FR)

9 PERIOD COVERED

Month Day Year: 07/01/2009 THROUGH Month Day Year: 12/31/2009

10 ELECTION

ELECTION DATE Month Day Year: 03/02/2010

ELECTION TYPE: ☐ Primary ☐ Runoff ☐ General ☐ Special

11 OFFICE

OFFICE HELD (if any):

12 OFFICE SOUGHT (if known): Other -- COUNTY JUDGE

13 DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS

Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure.

Name

Address/PO Box; Apt. / Suite #; City; State; Zip Code

☐ additional pages

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME
Ramon Garcia

15 ACCOUNT # (Ethics Commission filers)
00000000

16 NOTICE FROM POLITICAL COMMITTEE(S)

.. This listing includes political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..

COMMITTEE TYPE	COMMITTEE NAME
☐ GENERAL	COMMITTEE ADDRESS
☐ SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages

17 NO REPORTABLE ACTIVITY

☐ Check here if no reportable activity occured during this reporting period. (Sign affidavid below and submit pages 1 and 2 only.)

18 CONTRIBUTION TOTALS

1.	TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	$ 25.00
2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 112326.00

EXPENDITURE TOTALS

3.	TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED	$ 535.00
4.	**TOTAL POLITICAL EXPENDITURES**	$ 148970.00

OUTSTANDING LOAN TOTALS

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

19 AFFIDAVIT

NOTARY PUBLIC STATE OF TEXAS
NORMA LINDA CERDA
My Commission Expires
March 10, 2013

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

Sworn to and subscribed before me, by the said Ramon Garcia, this the15th day of Jan, 2010, to certify which, witness my hand and seal of office.

Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath
	Norma L Cerda	Notary

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 3/52

2 FILER NAME
Ramon Garcia

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
12/04/2009	A-FAST BAILBONDS 710 E. EL CIBOLO RD. EDINBURG TX 78539	1000.00	POLITICAL CONTRIB - UTION

9 Principal occupation (Optional)
10 Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
11/11/2009	AJAIMIE LLP 711 LOUISIANA STE. 2150 HOUSTON TX 77002	1000.00	POLITICAL CONTRIB - UTION

Principal occupation (Optional)
Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
11/06/2009	ROSENDO ALMARAZ Jr. 260 S. TEXAS BLVD STE. 300 WESLACO TX 78596	500.00	POLITICAL CONTRIB - UTION

Principal occupation (Optional)
Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
08/31/2009	ATLAS & HALL LLP P.O. DRAWER 3725 MCALLEN TX 78502	1000.00	POLITICAL CONTRIB - UTION

Principal occupation (Optional)
Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
08/12/2009	YAMIL W. AUDE 1001 E. FERN AVE. E502 MCALLEN TX 78501	500.00	POLITICAL CONTRIB - UTION

Principal occupation (Optional)
Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 4/52

2 FILER NAME
Ramon Garcia

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
12/02/2009	REZA BADIOZZAMANI 2820 ROAYL PALM CIRCLE MCALLEN TX 78501	1000.00	POLITICAL CONTRIB - UTION
9 Principal occupation (Optional)		10 Employer (Optional)	
11/09/2009	JAMES A. BROADDUS 605 RAINBOW COVE AUSTIN TX 78746	1000.00	POLITICAL CONTRIB - UTION
Principal occupation (Optional)		Employer (Optional)	
12/02/2009	ANA L. AND RICARDO CANALES 621 MCKEE EDINBURG TX 78539	2500.00	POLITICAL CONTRIB - UTION
Principal occupation (Optional)		Employer (Optional)	
09/17/2009	IDALIA P. CANALES RT. 12 BOX 1550 EDINBURG TX 78539	5000.00	POLITICAL CONTRIB - UTION
Principal occupation (Optional)		Employer (Optional)	
09/02/2009	CARLOS E. ORTEGON 6521 N. 10TH ST. STE F MCALLEN TX 78504	500.00	POLITICAL CONTRIB - UTION
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 5/52

2 FILER NAME
Ramon Garcia

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
09/21/2009	DALE A. NIXON P.O. BOX 4589 MCALLEN TX 78501	10000.00	POLITICAL CONTRIB - UTION

9 Principal occupation (Optional)	10 Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/01/2009	Dale & Klein LLP 6301 N. 10th McAllen TX 78504	500.00	POLITICAL CONTRIB - UTION

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/02/2009	ELLIS KOENEKE & RAMIREZ LLP 1101 CHICAGO AVE. MCALLEN TX 78501	500.00	POLITICAL CONTRIB - UTION

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/07/2009	ENRIQUE GRIEGO MD PA 1900 S. JACKSON RD. STE. 9 MCALLEN TX 78503	500.00	POLITICAL CONTRIB - UTION

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/20/2009	ERO INTERNATIONAL LLP 300 S. 8TH ST. MCALLEN TX 78501	1000.00	POLITICAL CONTRIBT - ION

Principal occupation (Optional)	Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 6/52

2 FILER NAME
Ramon Garcia

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/22/2009	ERO INTERNATIONAL LLP 300 S. 8TH ST. MCALLEN TX 78501	1000.00	POLITICAL CONTRIB - UTION
9 Principal occupation (Optional)		10 Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
08/12/2009	GUADALUPE REYNA FLEMING P.O. BOX 3228 MISSION TX 78572	3000.00	POLITICAL CONTRIB - UTION
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/04/2009	RAMIRO J. FLORES 2804 NORTH SHARY RD MISSION TX 78572	2500.00	POLITICAL CONTRIB - UTION
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
08/14/2009	G & A INVESTMENTS 16360 PARK TEN PL STE. 230 HOUSTON TX 77084	5000.00	POLITICAL CONTRIB - UTION
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/04/2009	G & A INVESTMENTS 16360 PARK TEN PL STE. 230 HOUSTON TX 77084	2500.00	POLITICAL CONTRIB - UTION
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 7/52

2 FILER NAME
Ramon Garcia

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
09/02/2009	JOHN GALLAGHER 304 WILDROSE FLORESVILLE TX 78114	1000.00	POLITICAL CONTRIB - UTION
9 Principal occupation (Optional)		10 Employer (Optional)	
08/12/2009	POTENCIANO GARCIA Jr. P.O. BOX 4876 MCALLEN TX 78502	500.00	POLITICAL CONTRIB - UTION
Principal occupation (Optional)		Employer (Optional)	
11/16/2009	MARSHA GREEN GARZA 2820 W. CANTON RD. EDINBURG TX 78539	1000.00	POLITICAL CONTRIB - UTION
Principal occupation (Optional)		Employer (Optional)	
09/04/2009	RUFINO GARZA 3779 N. BENSEN PALM DR. MISSION TX 78572	2500.00	POLITICAL CONTRIB - UTION
Principal occupation (Optional)		Employer (Optional)	
10/19/2009	HALFF ASSOCIATES STATE PAC 1201 NORTH BOWSER RD RICHARDSON TX 75081	2500.00	POLITICAL CONTRIB - UTION
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 8/52

2 FILER NAME
Ramon Garcia

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
09/02/2009	HARRISON BETTIS STAFF MCFARLAND & WEEMS 500 DALLAS,STE. 2650 HOUSTON TX 77002	1000.00	POLITICAL CONTRIB - UTION
9 Principal occupation (Optional): LAW FIRM	10 Employer (Optional):		
08/28/2009	HIDALGO PARKING LOT P.O. BOX 663 HIDALGO TX 78577	2500.00	POLITICAL CONTRIB - UTION
Principal occupation (Optional):	Employer (Optional):		
10/22/2009	JAVIER HINOJOSA 1308 ENCANTO BLVD. MISSION TX 78574	1000.00	POLITICAL CONTRIB - UTION
Principal occupation (Optional):	Employer (Optional):		
10/22/2009	RICARDO HINOJOSA 307 E. 27TH ST. MISSION TX 78572	1000.00	POLITICAL CONTRIB - UTION
Principal occupation (Optional):	Employer (Optional):		
12/01/2009	JACINTO GARZA 27304 S. BASS BLVD HARLINGEN TX 78552	1000.00	POLITICAL CONTRIB - UTION
Principal occupation (Optional):	Employer (Optional):		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

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1 Total pages this report: 9/52

2 FILER NAME
Ramon Garcia

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
09/04/2009	JAMES D. DANNENBAUM 3100 W. ALABAMA ST. HOUSTON TX 77098	5000.00	POLITICAL CONTRIB - UTION
9 Principal occupation (Optional)		10 Employer (Optional)	
08/12/2009	JAVIER E. CORTINAS MD 1400 NORTHGATE LN MCALLEN TX 78504	1000.00	POLITICAL CONTRIB - UTION
Principal occupation (Optional)		Employer (Optional)	
08/12/2009	JOSE MARIO AYALA 2003 FAIR OAKS DR. MISSION TX 78572	500.00	POLITICAL CONTRIB - UTION
Principal occupation (Optional)		Employer (Optional)	
08/12/2009	JUAN RIVERA 3809 E. SUNDOWN COURT MCALLEN TX 78503	500.00	POLITICAL CONTRIB - UTION
Principal occupation (Optional)		Employer (Optional)	
12/07/2009	L. HOLLMANN 327 W. ST. CHARLES BROWNSVILLE TX 78520	750.00	POLITICAL CONTRIB - UTION
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 10/52

2 FILER NAME
Ramon Garcia

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/01/2009	LAW FIRM OF ROLANDO CANTU & ASS P.L.L.C. 4428 S. MCCOLL RD EDINBURG TX 78539	1000.00	POLITICAL CONTRIB - UTION
9 Principal occupation (Optional)		10 Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/02/2009	LAW OFFICE OF M. TERESA CORONADO 324 W. UNIVERSITY DR. EDINBURG TX 78539	500.00	POLITICAL CONTRIB - UTION
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/01/2009	LEWIS,MONROE & PENA ATTORNEYS 208 W. CANO ST. EDINBURG TX 78539	500.00	POLITICAL CONTRIB - UTION
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
11/23/2009	LINEBARGER GOGGAN BLAIR & SAMPSON P.O. BOX 17428 AUSTIN TX 78760	2500.00	POLITICAL CONTRIB - UTION
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/01/2009	GARY LOONEY 12514 CHAPEL BELL SAN ANTONIO TX 78230	1000.00	POLITICAL CONTRIB - UTION
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 11/52

2 FILER NAME
Ramon Garcia

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
12/02/2009	ERASMO LOPEZ 2100 W. EXPRESSWAY 83 MERCEDES TX 78570	2000.00	POLITICAL CONTRIB - UTION
9 Principal occupation (Optional)		10 Employer (Optional)	
09/02/2009	SONIA IRIS LOPEZ 7017 N. 4TH ST. MCALLEN TX 78504	1000.00	POLITICAL CONTRIB - UTION
Principal occupation (Optional)		Employer (Optional)	
12/04/2009	SAUL DANIEL MALDONADO 801 E. FERGUSON STE. B PHARR TX 78577	1000.00	POLITICAL CONTRIB - UTION
Principal occupation (Optional)		Employer (Optional)	
12/02/2009	MARISELA G. MARIN 419 RIO GRANDE DR. MISSION TX 78572	1000.00	POLITICAL CONTRIB - UTION
Principal occupation (Optional)		Employer (Optional)	
09/01/2009	MARK W. PUPHER 17406 MASONRIDGE DR. HOUSTON TX 77095	2500.00	POLITICAL CONTRIB - UTION
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 12/52

2 FILER NAME
Ramon Garcia

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
11/04/2009	ANTONIO MARTINEZ 1201 E. VAN BUREN BROWNSVILLE TX 78520	2500.00	POLITICAL CONTRIB - UTION

9 Principal occupation (Optional)
10 Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
08/12/2009	MARY J. MCCOY 2001 DANA DR. PHARR TX 78577	1000.00	POLITICAL CONTRIB - UTION

Principal occupation (Optional)
Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
08/12/2009	MARY J. MCCOY 2001 DANA DR. PHARR TX 78577	500.00	POLITICAL CONTRIB - UTION

Principal occupation (Optional)
Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/05/2009	MONZER H. YAZJI MD. 502 S. CLOSNER EDINBURG TX 78539	1500.00	POLITICAL CONTRIB - UTION

Principal occupation (Optional)
Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
11/30/2009	FEDERICO E. MORON 1012 FAIRWAY DR. MISSION TX 78572	250.00	POLITICAL CONTRIB - UTION

Principal occupation (Optional)
Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 13/52

2 FILER NAME
Ramon Garcia

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/22/2009	LEONARDO MUNOZ Jr. 1103 W. 5TH ST. WESLACO TX 78596	1000.00	POLITICAL CONTRIB - UTION
9 Principal occupation (Optional)	10 Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
08/12/2009	Ivan Melendez,M.D.	3001.00	POLITICAL CONTRIB - UTION
Principal occupation (Optional)	Employer (Optional)		
Medical Physician			
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
11/30/2009	Memorial Funeral Home 311 E. Expwy. 83 San Juan TX 78589	500.00	POLITICAL CONTRIB - UTION
Principal occupation (Optional)	Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/02/2009	PIERRE NEWKIRK RT. 2 BOX 144 WN MCALLEN TX 78504	1000.00	POLITICAL CONTRIB - UTION
Principal occupation (Optional)	Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/03/2009	JOE M. OCHOA 2220 ARLINA DR. EDINBURG TX 78539	500.00	POLTICAL CONTRIBU - TION
Principal occupation (Optional)	Employer (Optional)		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 14/52

2 FILER NAME
Ramon Garcia

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
08/13/2009	OSCAR MENDEZ MD PA 2625 BLUE BIRD AVE. MCALLEN TX 78504	1000.00	POLITICAL CONTRIB - UTION
9 Principal occupation (Optional)	10 Employer (Optional)		
12/01/2009	PAPPAS & SUCHMA 10375 RICHMOND STE. 1670 HOUSTON TX 77042	1000.00	POLITICAL CONTRIB - UTION
Principal occupation (Optional)	Employer (Optional)		
12/02/2009	PASAR PUBLIC AFFAIRS CONSULTING LLP 2313 LAKE AUSTIN BLVD. STE 204 AUSTIN TX 78703	500.00	POLTICAL CONTRIBU - TION
Principal occupation (Optional)	Employer (Optional)		
11/18/2009	PERALEZ FRANZ LLP 1416 DOVE AVE. MCALLEN TX 78504	2000.00	POLITICAL CONTRIB - UTION
Principal occupation (Optional)	Employer (Optional)		
12/02/2009	PERDUE BRANDON FIELDER COLLINS & MOTT LLP 400 N. MCCOLL STE. A MCALLEN TX 78501	2500.00	POLITICAL CONTRIB - UTION
Principal occupation (Optional)	Employer (Optional)		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 15/52

2 FILER NAME
Ramon Garcia

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/19/2009	JORGE D. PEREZ 317 EAGLE AVE. MCALLEN TX 78501	1000.00	POLITICAL CONTRIB - UTION
9 Principal occupation (Optional)		10 Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
08/12/2009	BETH PETERS 1101 VINE AVE. STE. B1 MCALLEN TX 78501	1000.00	POLITICAL CONTRIB - UTION
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
11/20/2009	RABA-KISTNER P.A.C. P.O. BOX 690287 SAN ANTONIO TX 78269	1000.00	POLITICAL CONTRIB - UTION
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
11/25/2009	ROBERT RAMIREZ Jr. P.O. BOX 1266 PHARR TX 78577	500.00	POLITICAL CONTRIB - UTION
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
08/12/2009	RAMON I. RODRIGUEZ R. MD PA 1200 E. SAVANNAH AVE. STE. 16 MCALLEN TX 78501	500.00	POLITICAL CONTRIB - UTION
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 16/52

2 FILER NAME
Ramon Garcia

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
12/03/2009	FERNANDO A. RIVERA 2006 SABINAL ST. MISSION TX 78572	2500.00	POLITICAL CONTRIB - UTION

9 Principal occupation (Optional) | 10 Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/27/2009	ROERIG,OLIVEIRA & FISHER ATTORNEYS AT LAW 855 W. PRICE RD. STE. 9 BROWNSVILLE TX 78520	200.00	POLITICAL CONTRIB - UTION

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/04/2009	Ricardo Rincon 1800 N. 13th St. McAllen TX 78501	500.00	POLITOCA; CONTRIB - UTION

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/02/2009	JESSE SALINAS 2108 SCOUT LN MISSION TX 78572	1000.00	POLITICAL CONTRIB - UTION

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/28/2009	RICHARD D. SCHELL 1801 S. 2ND ST. STE. 460 MCALLEN TX 78501	5000.00	POLITICAL CONTRIB - UTION

Principal occupation (Optional) | Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 17/52

2 FILER NAME
Ramon Garcia

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
11/24/2009	THE AMMONS LAW FIRM LLP 3700 MONTROSE BLVD HOUSTON TX 77006	500.00	POLITICAL CONTRIB - UTION
9 Principal occupation (Optional)		10 Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/26/2009	TREVINO AND BODDEN 805 MEDIA LUNA STE. 380 BROWNSVILLE TX 78520	1000.00	POLITICAL CONTRIB - UTION
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/01/2009	ALBERTO TREVINO 819 N. I RD PHARR TX 78577	1000.00	POLITICAL CONTRIB - UTION
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/02/2009	JESSE TREVINO P.O. BOX 429 MCALLEN TX 78505	100.00	POLITICAL CONTRIB - UTION
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
08/13/2009	CARLOS VELA 3002 SANTA ALEJANDRA MISSION TX 78572	500.00	POLITICAL CONTRIB - UTION
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 18/52

2 FILER NAME
Ramon Garcia

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
11/29/2009	JOSE ALBERTO VELA 1405 MELINDA DR. MISSION TX 78572	250.00	POLITICAL CONTRIB - UTION

9 Principal occupation (Optional)
10 Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/04/2009	RICHARD A. WALKER 1950 PAREDES LINE RD. BROWNSVILLE TX 78521	750.00	POLITICAL CONTRIB - UTION

Principal occupation (Optional)
Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/02/2009	WIGINGTON RUMLEY DUNN LLP 800 N. SHORELINE BLVD CORPUS CHRISTI TX 78401	500.00	POLITICAL CONTRIB - UTION

Principal occupation (Optional)
Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/27/2009	J.M. WRIGHTSON 7920 DEERTRAIL DALLAS TX 75238	500.00	POLITICAL CONTRIB - UTION

Principal occupation (Optional)
Employer (Optional)

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 19/52

2 FILER NAME
Ramon Garcia

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
07/07/2009	A & A CUSTOM DESGINS 1120 N. CONWAY AVE. MISSION TX 78572	541.25

8 Purpose of expenditure (See instructions regarding type of information required.)
ADVERTISING BUMPER STICKERS

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
08/04/2009	A & A CUSTOM DESGINS 1120 N. CONWAY AVE. MISSION TX 78572	18663.66

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN SIGNS

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/01/2009	A & A CUSTOM DESGINS 1120 N. CONWAY AVE. MISSION TX 78572	1049.66

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN EXPENSE SIGNS

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/04/2009	A & A CUSTOM DESGINS 1120 N. CONWAY AVE. MISSION TX 78572	16264.66

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN ADVERTISING SIGNS

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 20/52

2 FILER NAME
Ramon Garcia

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
12/18/2009	HECTOR ALEMAN Jr. TX	756.00

8 Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN SIGN REPAIRS

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/23/2009	HECTOR ALEMAN Jr. TX	346.50

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN SIGN REPAIRS

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
11/05/2009	ANNETT FRANZ TX	825.00

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN EXPENSE ADVERTISING

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
11/06/2009	ANNETT FRANZ TX	1272.00

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN EXPENSE ADVERTISING

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 21/52

2 FILER NAME
Ramon Garcia

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
12/11/2009	DALINDA ANZALDUA TX	100.00

8 Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN DONATION STUDENTS

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
08/13/2009	ART VILLAGE TX	400.00

Purpose of expenditure (See instructions regarding type of information required.)
POLITICAL FUNCTION EXPENSE

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
11/30/2009	EFREN BARAJAS TX	500.00

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN WORK

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/14/2009	HERMINA BELTRAN TX	1000.00

Purpose of expenditure (See instructions regarding type of information required.)
POLITICAL FUNCTION EXPENSE

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 22/52

2 FILER NAME
Ramon Garcia

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
10/02/2009	BETO'S PRINTING 709 S. NEBRASKA SAN JUAN TX 78589	250.00

8 Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN ADVERTISING

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/04/2009	BETTS ELEMENTARY PTA TX	500.00

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN ADVERTISING

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
07/16/2009	BRIAN GODINEZ 311 S. 8TH ST. MCALLEN TX 78501	2500.00

Purpose of expenditure (See instructions regarding type of information required.)
PROFESSIONAL SERVICES

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
08/18/2009	BRIAN GODINEZ 311 S. 8TH ST. MCALLEN TX 78501	2500.00

Purpose of expenditure (See instructions regarding type of information required.)
PROFESSIONAL SERVICES

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 23/52

2 FILER NAME
Ramon Garcia

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
10/05/2009	BRIAN GODINEZ 311 S. 8TH ST. MCALLEN TX 78501	3000.00

8 Purpose of expenditure (See instructions regarding type of information required.)
PROFESSIONAL SERVICES

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/07/2009	BRIAN GODINEZ 311 S. 8TH ST. MCALLEN TX 78501	8695.64

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN ADVERTISING

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
11/11/2009	BRIAN GODINEZ 311 S. 8TH ST. MCALLEN TX 78501	3000.00

Purpose of expenditure (See instructions regarding type of information required.)
PROFESSIONAL SERVICES

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/14/2009	BRIAN GODINEZ 311 S. 8TH ST. MCALLEN TX 78501	3000.00

Purpose of expenditure (See instructions regarding type of information required.)
PROFESSIONAL SERVICES

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 24/52

2 FILER NAME
Ramon Garcia

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
09/02/2009	BROOKS OSBORN TX	300.00

8 Purpose of expenditure (See instructions regarding type of information required.)
POLITICAL FUNCTION EXPENSE

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
09/10/2009	CANTU'S SPECIAL EVENTS LLC 1601 N. 7TH ST. MCALLEN TX 78501	1012.14

Purpose of expenditure (See instructions regarding type of information required.)
POLITICAL FUNCTION EXPENSE

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/29/2009	CANTU'S SPECIAL EVENTS LLC 1601 N. 7TH ST. MCALLEN TX 78501	465.48

Purpose of expenditure (See instructions regarding type of information required.)
POLITICAL FUNCTION EXPENSE

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/01/2009	CANTU'S SPECIAL EVENTS LLC 1601 N. 7TH ST. MCALLEN TX 78501	2400.99

Purpose of expenditure (See instructions regarding type of information required.)
POLITICAL FUNCTION EXPENSE

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 25/52

2 FILER NAME
Ramon Garcia

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
09/03/2009	CARMEN'S CATERING 901 S. CAGE PHARR TX 78577	800.00

8 Purpose of expenditure (See instructions regarding type of information required.)
POLITICAL FUNCTION EXPENSE

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/04/2009	CASA OF HIDALGO COUNTY TX	100.00

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN DONATION

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/16/2009	CLARA CASAS TX	500.00

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN EXPENSE

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/14/2009	SOCORRO CASTRO TX	125.00

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN WORK

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 26/52

2 FILER NAME
Ramon Garcia

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
12/11/2009	ALEX CAVAZOS TX	290.50

8 Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN SIGN LABOR

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/18/2009	ALEX CAVAZOS TX	387.16

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN SIGN LABOR

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/23/2009	ALEX CAVAZOS TX	491.62

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN SIGN LABOR

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/30/2009	ALEX CAVAZOS TX	316.05

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN SIGN LABOR

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 27/52

2 FILER NAME
Ramon Garcia

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
10/27/2009	CELIA GARCIA CAMPAIGN TX	250.00

8 Purpose of expenditure (See instructions regarding type of information required.)
POLITICAL CONTRIBUTION

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/05/2009	CITY OF PENITAS TX	250.00

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN DONATION

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/04/2009	CITY OF SAN JUAN PUBLIC WORKS TX	100.00

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN DONATION

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/21/2009	CONCERNED CITIZENS OF HIDALGO TX	1000.00

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN DONATION

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 28/52

2 FILER NAME
Ramon Garcia

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
07/01/2009	DAVID CASAS TX	1000.00

8 Purpose of expenditure (See instructions regarding type of information required.)
DONATION CHESS COMPETITION FOR SCHOLA - RSHIP FOR KIDS

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/14/2009	ROBERTO DE LA CRUZ TX	125.00

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN WORK

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
07/15/2009	DIANA URESTI TX	321.26

Purpose of expenditure (See instructions regarding type of information required.)
FUNCTION EXPENSE REIMBURSEMENT

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
07/16/2009	EDINBURG GLORY ALLSTAR TX	150.00

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN ADVERTISING

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 29/52

2 FILER NAME
Ramon Garcia

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
10/08/2009	EDINBURG KIWAINIS CLUB TX	100.00

8 Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN ADVERTISING

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
09/18/2009	EDINBURG VOLUNTEER FIRE DEPARTMENT TX	105.00

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN DONATION EXPENSE

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
11/03/2009	EDINBURG VOLUNTEER FIRE DEPARTMENT TX	300.00

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN ADVERTISING

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/14/2009	OLGA ENGLE TX	125.00

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN WORK

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 30/52

2 FILER NAME
Ramon Garcia

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
07/07/2009	EXCLUSIVE MISSION TX 78572	446.26

8 Purpose of expenditure (See instructions regarding type of information required.)
ADVERTISING CAMPAIGN SHIRTS

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
11/20/2009	VIDAL FLORES TX	400.00

Purpose of expenditure (See instructions regarding type of information required.)
POLITICAL FUNCTION EXPENSE

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/10/2009	Fast Signs 4107 N. 10th McAllen TX 78504	88.33

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN SIGNS

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/11/2009	RAMON GARCIA Jr. EDINBURG TX 78539	160.00

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN SIGN LABOR

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 31/52

2 FILER NAME
Ramon Garcia

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
12/18/2009	RAMON GARCIA Jr. EDINBURG TX 78539	224.00

8 Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN SIGN LABOR

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/23/2009	RAMON GARCIA Jr. EDINBURG TX 78539	322.10

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN SIGN LABOR

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/30/2009	RAMON GARCIA Jr. EDINBURG TX 78539	166.00

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN SIGN LABOR

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/30/2009	RAMON GARCIA Jr. EDINBURG TX 78539	2000.00

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN EXPENSE REIMBURSEMENTS

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 32/52

2 FILER NAME
Ramon Garcia

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
09/11/2009	RAMON GARCIA 222 W. UNIVERSITY DRIVE EDINBURG TX 78539	1000.00

8 Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN FUNCTION EXPENSE REIMBURSEM - ENT

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/26/2009	Mr. RAMON GARCIA Sr. 222 W. UNVIERSITY DRIVE EDINBURG TX 78539	3000.00

Purpose of expenditure (See instructions regarding type of information required.)
POLITICAL FUNCTIONS EXPENSES REIMBURSE - MENT

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
11/06/2009	RAMON GARCIA 222 W. UNIVERSITY DRIVE EDINBURG TX 78539	3000.00

Purpose of expenditure (See instructions regarding type of information required.)
POLITICAL FUNCTION EXPENSES REIMBURSEM - ENT

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/21/2009	RAMON GARCIA 222 W. UNIVERSITY DRIVE EDINBURG TX 78539	2000.00

Purpose of expenditure (See instructions regarding type of information required.)
POLITICAL FUNCTION EXPENSE REIMBURSEME - NT

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 33/52

2 FILER NAME
Ramon Garcia

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
12/23/2009	RAMON GARCIA 222 W. UNIVERSITY DRIVE EDINBURG TX 78539	1500.00

8 Purpose of expenditure (See instructions regarding type of information required.)
POLITICAL FUNCTION EXPENSE REIMBURSEME - NT

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
11/13/2009	SANDRA DENISE GARCIA EDINBURG TX 78539	97.67

Purpose of expenditure (See instructions regarding type of information required.)
POLITICAL FUNCTION EXPENSE REIMBURSEME - NT

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/15/2009	SANDRA DENISE GARCIA EDINBURG TX 78539	60.00

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN EXPENSE REIMBURSEMENT

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/17/2009	SANDRA DENISE GARCIA EDINBURG TX 78539	50.00

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN EXPENSE REIMBURSEMENT

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 34/52

2 FILER NAME
Ramon Garcia

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
12/23/2009	SANDRA DENISE GARCIA EDINBURG TX 78539	143.53

8 Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN EXPENSE REIMBURSEMENT

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/14/2009	JANIE GARZA TX	125.00

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN WORK

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/14/2009	NINA GARZA TX	125.00

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN WORK

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
09/03/2009	GIRL SCOUTS OF GREATER SOUTH TEXAS TX	425.00

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN DONATION

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 35/52

2 FILER NAME
Ramon Garcia

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
10/29/2009	GREY EYED CREATIVE TX	500.00

8 Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN ADVERTISING DESIGN

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
11/10/2009	HARLINGEN HISPANIC CHAMBER OF COMMERCE HARLINGEN TX 78550	250.00

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN ADVERTISING

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
11/16/2009	HEB 3200 N. 10th McAllen TX 78501	525.00

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN GIFT DONATIONS

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/11/2009	MOISES HERNANDEZ TX	126.00

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN SIGN REPAIRS

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 36/52

2 FILER NAME
Ramon Garcia

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
12/18/2009	MOISES HERNANDEZ TX	341.00

8 Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN SIGN REPAIRS

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/23/2009	MOISES HERNANDEZ TX	181.50

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN SIGN REPAIRS

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/08/2009	HIDALGO COUNTY BAR FOUNDATION TX	500.00

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN ADVERTISING

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
11/02/2009	HIDALGO COUNTY DEMOCRACTIC WOMEN TX	350.00

Purpose of expenditure (See instructions regarding type of information required.)
POLITICAL FUNCTION EXPENSE

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 37/52

2 FILER NAME
Ramon Garcia

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
08/13/2009	HIDALGO COUNTY YOUNG DEMOCRATS TX	150.00

8 Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN DONATION

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
11/23/2009	I GRAFX MEDIA TX	200.00

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN ADVERTISING-SHIRTS

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/11/2009	CAMILO IBARRA TX	240.00

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN SIGN LABOR

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/18/2009	CAMILO IBARRA TX	256.00

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN SIGN LABOR

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 38/52

2 FILER NAME
Ramon Garcia

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
12/23/2009	CAMILO IBARRA TX	288.00

8 Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN SIGN LABOR

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/30/2009	CAMILO IBARRA TX	192.00

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN SIGN LABOR

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/15/2009	INTERNATIONAL BANK OF COMMERCE COMMITTEE IMPROVEMENT ONE BROADWAY MCALLEN TX 78501	1250.00

Purpose of expenditure (See instructions regarding type of information required.)
FILING FEES FOR COUNTY JUDGE

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
09/24/2009	IYSLAH FLORES TX	300.00

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN DONATION

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 39/52

2 FILER NAME
Ramon Garcia

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
09/04/2009	JENNIFER RUIZ TX	300.00

8 Purpose of expenditure (See instructions regarding type of information required.)
POLITICAL FUNCTION REIMBURSEMENT

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
08/13/2009	JOANN PEREZ TX	200.00

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN ADVERTISING

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/22/2009	JORGE ORLANDO GUTIERREZ FOUNDATION P.O. BOX 859 ELSA TX 78543	750.00

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN DONATION

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
11/03/2009	JUAN DEMETRIO GONZALEZ TX	150.00

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN DONATION

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 40/52

2 FILER NAME
Ramon Garcia

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
11/10/2009	JUDGE HOMERO GARZA CAMPAIGN TX	500.00

8 Purpose of expenditure (See instructions regarding type of information required.)
POLITICAL CONTRIBUTION

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
07/14/2009	JUDGE JESSE MORALES CAMPAIGN TX	200.00

Purpose of expenditure (See instructions regarding type of information required.)
POLITICAL CONTRIBUTION

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/23/2009	K OF C CUNCIL #10887 TX	500.00

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN DONATION

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/21/2009	MARY ALLCIE PALACIOS TX	500.00

Purpose of expenditure (See instructions regarding type of information required.)
POLITICAL CONTRIBUTION

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 41/52

2 FILER NAME
Ramon Garcia

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
07/17/2009	MATT CROCKER TX	200.00

8 Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN ADVERTISING WEBSITE

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
08/28/2009	MATT CROCKER TX	629.00

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN ADVERTISING WEBSITE

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/09/2009	MATT CROCKER TX	270.00

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN ADVERTISING

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/29/2009	MAYTE'S EVENTS 156 A SOUTH TEXAS BLVD WESLACO TX 78596	550.00

Purpose of expenditure (See instructions regarding type of information required.)
POLITICAL FUNCTION EXPENSE

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 42/52

2 FILER NAME
Ramon Garcia

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
07/16/2009	MIGUEL CARRERA 2627 MCORMACK EDINBURG TX 78539	1500.00

8 Purpose of expenditure (See instructions regarding type of information required.)
PROFESSIONAL SERVICES

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
08/18/2009	MIGUEL CARRERA 2627 MCORMACK EDINBURG TX 78539	1616.20

Purpose of expenditure (See instructions regarding type of information required.)
PROFESSIONAL SERVICES

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
09/28/2009	MIGUEL CARRERA 2627 MCORMACK EDINBURG TX 78539	1600.00

Purpose of expenditure (See instructions regarding type of information required.)
PROFESSIONAL SERVICES

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
11/02/2009	MIGUEL CARRERA 2627 MCORMACK EDINBURG TX 78539	1600.00

Purpose of expenditure (See instructions regarding type of information required.)
PROFESSIONAL SERVICES

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 43/52

2 FILER NAME
Ramon Garcia

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
12/09/2009	MIGUEL CARRERA 2627 MCORMACK EDINBURG TX 78539	1600.00

8 Purpose of expenditure (See instructions regarding type of information required.)
PROFESSIONAL SERVICES

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
09/03/2009	MIGUEL CONTRERAS TX	225.00

Purpose of expenditure (See instructions regarding type of information required.)
POLITICAL FUNCTION EXPENSE

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/16/2009	MIKE SINDER 6521 N. 10TH STE A MCALLEN TX 78501	10000.00

Purpose of expenditure (See instructions regarding type of information required.)
POLITICAL CONSULTING SERVICES

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/05/2009	MISSION SERVICE LEAGUE TX	200.00

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN ADVERTISING

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 44/52

2 FILER NAME
Ramon Garcia

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
12/30/2009	AURORA MOLINA P.O. BOX 956 ELSA TX 78543	250.00

8 Purpose of expenditure (See instructions regarding type of information required.)
POLITCAL CONSULTANT SERVICES

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/01/2009	NOEMI RODRIGUEZ ELSA TX	250.00

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN EXPENSE

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/30/2009	NOEMI RODRIGUEZ ELSA TX	500.00

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN CONSULTANT SERVICES

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
11/19/2009	NORMA'S SPECIALTY CAKES TX	182.00

Purpose of expenditure (See instructions regarding type of information required.)
POLITICAL FUNCTION EXPENSE

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 45/52

2 FILER NAME
Ramon Garcia

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
11/10/2009	PRINT WORKS 2627 MCCORMACK EDINBURG TX 78539	918.31

8 Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN ADVERTISING INVITATIONS

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/03/2009	PRO BUILD TX	7120.71

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN MATERIAL FOR SIGNS

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
11/25/2009	PROMTIONAL CONCEPTS 3400 N. MCCOLL RD MCALLEN TX 78501	449.73

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN ADVERTISING BAGS

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
11/12/2009	JUAN MANUEL RAMIREZ EDINBURG TX 78539	250.00

Purpose of expenditure (See instructions regarding type of information required.)
POLITICAL FUNCTION EXPENSE

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 46/52

2 FILER NAME
Ramon Garcia

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
10/21/2009	RIO GRANDE VALLEY GUARDIANS TX	300.00

8 Purpose of expenditure (See instructions regarding type of information required.)
CAMPAING DONATION

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/22/2009	RIO GRANDE VALLEY GUARDIANS TX	500.00

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN ADVERTISING

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
11/20/2009	LUISA RUIZ TX	570.81

Purpose of expenditure (See instructions regarding type of information required.)
POLITICAL FUNCTION EXPENSE REIMBURSEME - NT

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
09/18/2009	Romeo Garcia Agency 610 E. Monte Cristo Rd. Edinburg TX 78539	406.22

Purpose of expenditure (See instructions regarding type of information required.)
POLITICAL FUNCTION EXPENSE

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 47/52

2 FILER NAME
Ramon Garcia

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
12/16/2009	Romeo Garcia Agency 610 E. Monte Cristo Rd. Edinburg TX 78539	433.73

8 Purpose of expenditure (See instructions regarding type of information required.)
POLITICAL FUNCTION EXPENSE

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/05/2009	SAM HOUSTON PTA TX	150.00

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN ADVERTISING

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/14/2009	HECTOR SANCHEZ TX	125.00

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN WORK

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
11/09/2009	SERGIO AGUILAR TX	200.00

Purpose of expenditure (See instructions regarding type of information required.)
POLITICAL FUNCTION EXPENSE REIMBURSEME - NT

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 48/52

2 FILER NAME
Ramon Garcia

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
07/21/2009	SILVA FAMILY TRUST TX	250.00

8 Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN DONATION

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
09/11/2009	STANFORD CAMPAIGNS 2520 LONGVIEW ST. STE 410 AUSTIN TX 78705	2500.00

Purpose of expenditure (See instructions regarding type of information required.)
PROFESSIONAL SERVICES

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
11/10/2009	STATE REP AARON PENA'S CAMPAIGN TX	500.00

Purpose of expenditure (See instructions regarding type of information required.)
POLITICAL CONTRIBUTION

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
08/13/2009	SULLIVAN CITY CITIZENS TX	250.00

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN DONATION

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 49/52

2 FILER NAME
Ramon Garcia

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
12/08/2009	SULLIVAN CITY CITIZENS TX	250.00

8 Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN ADVERTISING

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
09/21/2009	Sam's Club 2nd Ave. McAllen TX 78501	725.40

Purpose of expenditure (See instructions regarding type of information required.)
POLITICAL FUNCTION EXPENSE

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/09/2009	THE CLUB OF CIMARRON MISSION TX 78572	2226.31

Purpose of expenditure (See instructions regarding type of information required.)
POLTICAL FUNCTION EXPENSE

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/04/2009	MANUEL G. TREVINO TX	2000.00

Purpose of expenditure (See instructions regarding type of information required.)
POLITICAL FUNCTION EXPENSE

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 50/52

2 FILER NAME
Ramon Garcia

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
12/07/2009	MANUEL G. TREVINO TX	2000.00

8 Purpose of expenditure (See instructions regarding type of information required.)
POLITICAL FUNCTION EXPENSE

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/29/2009	MARIO TREVINO TX	500.00

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN SIGN LABOR

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/10/2009	Hillario Tallabas Rt. 8 Box 1111 Mission TX 78572	1500.00

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN SIGN REPAIRS

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
09/03/2009	Tejas Equipment Rent 1212 N 23rd St. McAllen TX 78505	229.51

Purpose of expenditure (See instructions regarding type of information required.)
POLITICAL FUNCTION EXPENSE

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 51/52

2 FILER NAME
Ramon Garcia

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
11/17/2009	Tejas Equipment Rent 1212 N 23rd St. McAllen TX 78505	1055.37

8 Purpose of expenditure (See instructions regarding type of information required.)
POLITICAL FUNCTION EXPENSE

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
09/18/2009	VICTOR PEREZ CAMPAIGN TX	600.00

Purpose of expenditure (See instructions regarding type of information required.)
POLITICAL CONTRIBUTION

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
09/02/2009	WALMART TX	243.35

Purpose of expenditure (See instructions regarding type of information required.)
POLITICAL FUNCTION EXPENSE

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/14/2009	WALMART TX	246.39

Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN SIGN EXPENSE

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 52/52

2 FILER NAME
Ramon Garcia

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name	7 Amount ($)
12/04/2009	RON WHITLOCK	500.00
	6 Payee address; City; State; Zip Code TX	

8 Purpose of expenditure (See instructions regarding type of information required.)
CAMPAIGN ADVERTISING

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