

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) | 2 Total pages filed: 16 |
| 3 CANDIDATE / OFFICEHOLDER NAME | MS / MRS / MR Mr. | FIRST Ricardo | MI |
| | NICKNAME | LAST Rodriguez | SUFFIX Jr. |
| | <div style="text-align: right; border: 1px solid black; padding: 5px;"> OFFICE USE ONLY Date Received Roh [Signature] 4:43 P.M. RECEIVED FEB 03 2014 </div> | | |
| | Date Hand-delivered or Postmarked Receipt # Amount Date Processed Date Imaged | | |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> change of address | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 3010 North Rogiers Edinburg, TX 78541 | | |
| 5 CANDIDATE / OFFICEHOLDER PHONE | AREA CODE PHONE NUMBER EXTENSION (956) 279-7081 | | |
| 6 CAMPAIGN TREASURER NAME | MS / MRS / MR Mrs. | FIRST Deyanira | MI |
| | NICKNAME | LAST Rodriguez | SUFFIX |
| 7 CAMPAIGN TREASURER ADDRESS (residence or business) | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 3010 North Rogiers Edinburg, TX 78541 | | |
| 8 CAMPAIGN TREASURER PHONE | AREA CODE PHONE NUMBER EXTENSION (956) 287-2947 | | |
| 9 REPORT TYPE | <input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR) | | |
| 10 PERIOD COVERED | Month Day Year THROUGH Month Day Year 01 / 01 / 2014 02 / 03 / 2014 | | |
| 11 ELECTION | ELECTION DATE Month Day Year 03 / 04 / 2014 | | ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special |
| | 12 OFFICE OFFICE HELD (if any) | | 13 OFFICE SOUGHT (if known) Hidalgo County District Attorney |
| GO TO PAGE 2 | | | |

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 C/OH NAME

15 ACCOUNT # (Ethics Commission Filers)

16 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

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

additional pages

COMMITTEE CAMPAIGN TREASURER ADDRESS

17 CONTRIBUTION
TOTALS

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

\$ 0.00

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 16,719.00

EXPENDITURE
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED

\$ 0.00

4. TOTAL POLITICAL EXPENDITURES

\$ 55,898.89

CONTRIBUTION
BALANCE

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

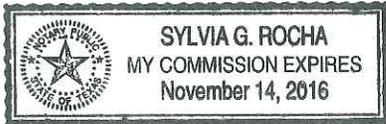
\$ 10,536.25

OUTSTANDING
LOAN TOTALS

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

\$ 180,200.00

18 AFFIDAVIT



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

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Ricardo Rodriguez, this the 3rd day of February, 20 14, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Sylvia G Rocha Notary

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: 3 | |
| 2 FILER NAME Ricardo Rodriguez, Jr. | | 3 ACCOUNT # (Ethics Commission Filers) | |
| 4 Date 01-25-2014 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cecilia Salinas | 7 Amount of contribution (\$) 300.00 | 8 In-kind contribution description (if applicable) |
| 6 Contributor address; City; State; Zip Code 1709 Calle de Amistad San Juan, TX 78589 | | (If travel outside of Texas, complete Schedule T) | |
| 9 Principal occupation / Job title (See Instructions) | | 10 Employer (See Instructions) | |
| Date 01-22-2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Joel Rivera & Marissa Rivera | Amount of contribution (\$) 200.00 | In-kind contribution description (if applicable) |
| Contributor address; City; State; Zip Code P.O. Box 1055 Weslaco, TX 78596 | | (If travel outside of Texas, complete Schedule T) | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 01-22-2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) The Law Office of Abel Flores | Amount of contribution (\$) 1,000.00 | In-kind contribution description (if applicable) |
| Contributor address; City; State; Zip Code 10213 N. 10th St. McAllen, TX 78504 | | (If travel outside of Texas, complete Schedule T) | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 01-22-2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dampco, LLC Tomas A. Canales | Amount of contribution (\$) 3,000.00 | In-kind contribution description (if applicable) |
| Contributor address; City; State; Zip Code 2725 W. University Dr. Edinburg, TX 78539 | | (If travel outside of Texas, complete Schedule T) | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 01-13-2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) The Law Office of Rudy Moreno, LLC | Amount of contribution (\$) 300.00 | In-kind contribution description (if applicable) |
| Contributor address; City; State; Zip Code 67 Russ St. Suite 2nd Hartford, Ct 06106-5408 | | (If travel outside of Texas, complete Schedule T) | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| <p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p> | | | |

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

| | | | |
|--|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A: 3 | |
| 2 FILER NAME Ricardo Rodriguez, Jr. | | 3 ACCOUNT # (Ethics Commission Filers) | |
| 4 Date 01-01-2014 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guerra Enterprises, Ltd | 7 Amount of contribution (\$) 1,000.00 | 8 In-kind contribution description (if applicable) |
| 6 Contributor address; City; State; Zip Code P.O. Box 418 Linn, TX 78563 | | (If travel outside of Texas, complete Schedule T) | |
| 9 Principal occupation / Job title (See Instructions) | | 10 Employer (See Instructions) | |
| Date 01-30-2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Felix Carrizales | Amount of contribution (\$) 30.00 | In-kind contribution description (if applicable) |
| Contributor address; City; State; Zip Code 805 Melanie Dr. Pharr, TX 78577 | | (If travel outside of Texas, complete Schedule T) | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 01-04-2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Juana M. Jimenez | Amount of contribution (\$) 100.00 | In-kind contribution description (if applicable) |
| Contributor address; City; State; Zip Code 74 El Valle Drive Brownsville, TX 78521 | | (If travel outside of Texas, complete Schedule T) | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 01-01-2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lineberger Goggan Blair & Sampson | Amount of contribution (\$) 5,000.00 | In-kind contribution description (if applicable) |
| Contributor address; City; State; Zip Code P.O. Box 17428 Austin, TX 78760 | | (If travel outside of Texas, complete Schedule T) | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 01-03-2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adriana Vega | Amount of contribution (\$) 1,500.00 | In-kind contribution description (if applicable) |
| Contributor address; City; State; Zip Code 1009 W Hwy 83 Pharr, TX 78577 | | (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

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

| | | | |
|--|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A: 3 | |
| 2 FILER NAME Ricardo Rodriguez, Jr. | | 3 ACCOUNT # (Ethics Commission Filers) | |
| 4 Date 01-02-2014 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hector Pena | 7 Amount of contribution (\$) 1,000.00 | 8 In-kind contribution description (if applicable) Entertainment for Meet and Greet Expense |
| 6 Contributor address; City; State; Zip Code 3700 North 10th McAllen, TX 78501 | | (If travel outside of Texas, complete Schedule T) | |
| 9 Principal occupation / Job title (See Instructions) | | 10 Employer (See Instructions) | |
| Date 01-23-2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mark Wilkins | Amount of contribution (\$) 1,289.00 | In-kind contribution description (if applicable) Food/Beverage for Meet and Greet Expense |
| Contributor address; City; State; Zip Code 6316 North 10th McAllen, TX 78501 | | (If travel outside of Texas, complete Schedule T) | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 01-11-2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eric Flores | Amount of contribution (\$) 1,000.00 | In-kind contribution description (if applicable) Food/Beverage for Meet and Greet Expense |
| Contributor address; City; State; Zip Code 113 21 North Bentsen Road McAllen, TX 78501 | | (If travel outside of Texas, complete Schedule T) | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 01-25-2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eric Flores | Amount of contribution (\$) 1,000.00 | In-kind contribution description (if applicable) Food/Beverage for Meet and Greet Expense |
| Contributor address; City; State; Zip Code 11321 North Bentsen Road McAllen, TX 78501 | | (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#: _____) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| Contributor 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: 1 |
| 2 FILER NAME Ricardo Rodriguez | | 3 ACCOUNT # (Ethics Commission Filers) |
| 4 TOTAL OF UNITEMIZED LOANS: ⇒ ⇒ ⇒ ⇒ ⇒ ⇒ | | \$ - 0 - |
| 5 Date of loan 01-29-2014 | 7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas National Bank | 9 Loan Amount (\$) 17,000.00 |
| 6 Is lender a financial Institution? <input checked="" type="radio"/> Y <input type="radio"/> N | 8 Lender address; City; State; Zip Code 4914 South Jackson Road Edinburg, TX 78539 | 10 Interest rate 7% |
| | | 11 Maturity date 09-09-2014 |
| 12 Principal occupation / Job title (See Instructions) N/A | | 13 Employer (See Instructions) N/A |
| 14 Description of Collateral <input checked="" type="checkbox"/> none | | 15 Check if personal funds were deposited into political account <input type="checkbox"/> |
| 16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable | 17 Name of guarantor Ricardo Rodriguez, Sr. | 19 Amount Guaranteed (\$) 17,000.00 |
| | 18 Guarantor address; City; State; Zip Code 1003 South 20th, Edinburg, TX 78539 | |
| 20 Principal Occupation (See Instructions) Watermelon Harvester | | 21 Employer (See Instructions) Ricardo Rodriguez Custom Packing |
| Date of loan 01-30-2014 | Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas National Bank | Loan Amount (\$) 18,200.00 |
| Is lender a financial Institution? <input checked="" type="radio"/> Y <input type="radio"/> N | Lender address; City; State; Zip Code 4914 South Jackson Road Edi | Interest rate 7% |
| | | Maturity date 09-09-2014 |
| Principal occupation / Job title (See Instructions) N/A | | Employer (See Instructions) N/A |
| Description of Collateral <input checked="" type="checkbox"/> none | | Check if personal funds were deposited into political account <input type="checkbox"/> |
| GUARANTOR INFORMATION <input type="checkbox"/> not applicable | Name of guarantor Ricardo Rodriguez, Sr. | Amount Guaranteed (\$) 18,200.00 |
| | Guarantor address; City; State; Zip Code 1003 South 20th, Edinburg, TX 78539 | |
| Principal Occupation (See Instructions) Watermelon Harvester | | Employer (See Instructions) Ricardo Rodriguez Custom Packing |

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

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|--|
| 1 Total pages Schedule F: 10 | 2 FILER NAME Ricardo Rodriguez, Jr. | 3 ACCOUNT # (Ethics Commission Filers) |
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|-----------------------------|---------------------------------------|
| 4 Date 01-27-2014 | 5 Payee name Brand Boosters |
|-----------------------------|---------------------------------------|

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|-----------------------------------|--|
| 6 Amount (\$) 19,122.32 | 7 Payee address; City; State; Zip Code 3607 S. L. Lane McAllen, TX 78503 |
|-----------------------------------|--|

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| 8 PURPOSE OF EXPENDITURE | (a) Category (See categories listed at the top of this schedule) Advertising Expense | (b) Description (If travel outside of Texas, complete Schedule T) Campaign billboards |
|--------------------------|--|---|

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

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|---------------------------|--------------------------------|
| Date 01-15-2014 | Payee name Copy Plus |
|---------------------------|--------------------------------|

| | |
|------------------------------|--|
| Amount (\$) 925.32 | Payee address; City; State; Zip Code 4500 N. 10th, Ste 240 McAllen, TX 78504 |
|------------------------------|--|

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| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule) Advertising Expense | Description (If travel outside of Texas, complete Schedule T) Invitations for Event |
|------------------------|--|---|

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

| | |
|---------------------------|--|
| Date 01-29-2014 | Payee name The Sheperd Group |
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| Amount (\$) 1,000.00 | Payee address; City; State; Zip Code 16584 FM 498 Lyford, TX 78569 |
|--------------------------------|--|

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|------------------------|--|---|
| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule) Advertising Expense | Description (If travel outside of Texas, complete Schedule T) Political Advertising |
|------------------------|--|---|

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

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|---------------------------|----------------------------|
| Date 01-22-2014 | Payee name M A P |
|---------------------------|----------------------------|

| | |
|---------------------------------|---|
| Amount (\$) 10,000.00 | Payee address; City; State; Zip Code 2400 S. 4th St. Austin, TX 78704 |
|---------------------------------|---|

| | | |
|------------------------|---|---|
| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule) Consulting Expense | Description (If travel outside of Texas, complete Schedule T) Campaign services |
|------------------------|---|---|

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|--|
| 1 Total pages Schedule F: 10 | 2 FILER NAME Ricardo Rodriguez, Jr. | 3 ACCOUNT # (Ethics Commission Filers) |
|--|---|--|

| | |
|-----------------------------|--|
| 4 Date 01-17-2014 | 5 Payee name Francisco Sanchez |
|-----------------------------|--|

| | |
|--------------------------------|---|
| 6 Amount (\$) 100.00 | 7 Payee address; City; State; Zip Code 3612 Augustine McAllen, TX 78501 |
|--------------------------------|---|

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| 8 PURPOSE OF EXPENDITURE | (a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services |
|--------------------------|--|--|

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

| | |
|---------------------------|---------------------------------------|
| Date 01-18-2014 | Payee name Maria Elena Sosa |
|---------------------------|---------------------------------------|

| | |
|------------------------------|--|
| Amount (\$) 300.00 | Payee address; City; State; Zip Code 503 North 83rd Edinburg, TX 78539 |
|------------------------------|--|

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|------------------------|--|--|
| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor | Description (If travel outside of Texas, complete Schedule T) contract labor for campaign services |
|------------------------|--|--|

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

| | |
|---------------------------|----------------------------------|
| Date 01-15-2014 | Payee name The Monitor |
|---------------------------|----------------------------------|

| | |
|--------------------------------|---|
| Amount (\$) 4,800.00 | Payee address; City; State; Zip Code 1400 East Nokna Loop McAllen, TX 78504 |
|--------------------------------|---|

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|------------------------|--|---|
| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule) Advertising Expense | Description (If travel outside of Texas, complete Schedule T) Political Advertising |
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|---|-------------------------------|---------------|-------------|
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | Office held |
|---|-------------------------------|---------------|-------------|

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|---------------------------|-----------------------------------|
| Date 01-22-2014 | Payee name Jose A. Vela |
|---------------------------|-----------------------------------|

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|------------------------------|--|
| Amount (\$) 200.00 | Payee address; City; State; Zip Code 1208 East Hernandez Donna, TX 78537 |
|------------------------------|--|

| | | |
|------------------------|--|--|
| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule) Salaries/Wages/Contract labor | Description (If travel outside of Texas, complete Schedule T) Contract Labor for Campaign Services |
|------------------------|--|--|

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|---|
| 1 Total pages Schedule F: <i>10</i> | 2 FILER NAME <i>Ricardo Rodriguez, Jr.</i> | 3 ACCOUNT # (Ethics Commission Filers) |
| 4 Date <i>01-15-2014</i> | 5 Payee name <i>Lamar</i> | |
| 6 Amount (\$) <i>4,333.33</i> | 7 Payee address; City; State; Zip Code <i>2001 Industrial Way San Benito, TX 78586</i> | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See categories listed at the top of this schedule) <i>Advertising Expense</i> | (b) Description (If travel outside of Texas, complete Schedule T) <i>Campaign Billboards</i> |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought Office held |
| Date <i>01-20-2014</i> | Payee name <i>Graciela Sanchez</i> | |
| Amount (\$) <i>300.00</i> | Payee address; City; State; Zip Code <i>114 N. Republic Weslaco, TX 78596</i> | |
| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule) <i>salaries/wages/contract labor</i> | Description (If travel outside of Texas, complete Schedule T) <i>contract labor for campaign services</i> |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought Office held |
| Date <i>01-16-2014</i> | Payee name <i>Print Works</i> | |
| Amount (\$) <i>64.95</i> | Payee address; City; State; Zip Code <i>1414 Pecan McAllen, TX 78501</i> | |
| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule) <i>Advertising Expense</i> | Description (If travel outside of Texas, complete Schedule T) <i>Wires for yard signs</i> |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought Office held |
| Date <i>01-22-2014</i> | Payee name <i>Caridad Murillo</i> | |
| Amount (\$) <i>300.00</i> | Payee address; City; State; Zip Code <i>206 West 3rd San Juan, TX 78589</i> | |
| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule) <i>Salaries/Wages/contract labor</i> | Description (If travel outside of Texas, complete Schedule T) <i>Contract labor for campaign services</i> |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought Office held |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

| | | |
|--|--|---|
| 1 Total pages Schedule F: 10 | 2 FILER NAME Ricardo Rodriguez | 3 ACCOUNT # (Ethics Commission Filers) |
|--|--|---|

| | |
|-----------------------------|-------------------------------------|
| 4 Date 01-15-2014 | 5 Payee name Karka Gamboa |
|-----------------------------|-------------------------------------|

| | |
|--------------------------------|---|
| 6 Amount (\$) 250.00 | 7 Payee address; City; State; Zip Code 4001 Orchid Ave McAllen, TX 78501 |
|--------------------------------|---|

| | | |
|---------------------------------|--|---|
| 8 PURPOSE OF EXPENDITURE | (a) Category (See categories listed at the top of this schedule) Event Expens | (b) Description (If travel outside of Texas, complete Schedule T) Video Shooting Campaign block walk |
|---------------------------------|--|---|

| | | | |
|--|-------------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | Office held |
|--|-------------------------------|---------------|-------------|

| | |
|--------------------|-------------------|
| Date 01-11-2014 | Payee name CWT |
|--------------------|-------------------|

| | |
|-----------------------|---|
| Amount (\$) 700.00 | Payee address; City; State; Zip Code 100 W. 6th St; Suite 1 La Joya, TX |
|-----------------------|---|

| | | |
|------------------------|---|---|
| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule) Office Overhead | Description (If travel outside of Texas, complete Schedule T) Rental Expense |
|------------------------|---|---|

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|--|-------------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | Office held |
|--|-------------------------------|---------------|-------------|

| | |
|--------------------|--------------------------------|
| Date 01-06-2014 | Payee name Vanguard Academy |
|--------------------|--------------------------------|

| | |
|-----------------------|---|
| Amount (\$) 225.00 | Payee address; City; State; Zip Code 901 S. Athol St. Pharr, TX 78577 |
|-----------------------|---|

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| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule) Advertising Expense | Description (If travel outside of Texas, complete Schedule T) Political Advertising |
|------------------------|---|--|

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|--|-------------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | Office held |
|--|-------------------------------|---------------|-------------|

| | |
|--------------------|-------------------------|
| Date 01-10-2014 | Payee name Star Gala |
|--------------------|-------------------------|

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|-------------------------|--|
| Amount (\$) 1,000.00 | Payee address; City; State; Zip Code 2409 E. Griffin Parkway Mission, TX 78572 |
|-------------------------|--|

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|------------------------|---|--|
| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule) Advertising Expense | Description (If travel outside of Texas, complete Schedule T) Political Advertising |
|------------------------|---|--|

| | | | |
|--|-------------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | Office held |
|--|-------------------------------|---------------|-------------|

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

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

The Instruction Guide explains how to complete this form.

| | | | |
|---|--|--|-------------|
| 1 Total pages Schedule F: 10 | 2 FILER NAME Ricardo Rodriguez, Jr. | 3 ACCOUNT # (Ethics Commission Filers) | |
| 4 Date 01-10-2014 | 5 Payee name Cristelle Herrera | | |
| 6 Amount (\$) 250.00 | 7 Payee address; City; State; Zip Code | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See categories listed at the top of this schedule) Advertising Expense | (b) Description (If travel outside of Texas, complete Schedule T) Political Advertising | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | Office held |
| Date 01-10-2014 | Payee name Catholic War Veterans | | |
| Amount (\$) 300.00 | Payee address; City; State; Zip Code 1501 North International Weslaco, TX 78596 | | |
| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule) Rental Expense | Description (If travel outside of Texas, complete Schedule T) Event Expense | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | Office held |
| Date 01-09-2014 | Payee name Por Caro LLC | | |
| Amount (\$) 800.00 | Payee address; City; State; Zip Code 324 West University Edinburg, TX 78539 | | |
| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule) Rental Expense | Description (If travel outside of Texas, complete Schedule T) Campaign Office Rent | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | Office held |
| Date 01-13-2014 | Payee name Angel Casillas | | |
| Amount (\$) 400.00 | Payee address; City; State; Zip Code P.O. Box 712 Elsa, TX 78543 | | |
| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor | Description (If travel outside of Texas, complete Schedule T) contract labor for campaign services | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | Office held |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

| | | |
|--|--|--|
| 1 Total pages Schedule F: 10 | 2 FILER NAME Ricardo Rodriguez, Jr | 3 ACCOUNT # (Ethics Commission Filers) |
|--|--|--|

| | |
|-----------------------------|---------------------------------------|
| 4 Date 01-10-2014 | 5 Payee name Celia Regalado |
|-----------------------------|---------------------------------------|

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| 6 Amount (\$) 400.00 | 7 Payee address; City; State; Zip Code 911 South 19th Edinburg, TX 78539 |
|--------------------------------|--|

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| 8 PURPOSE OF EXPENDITURE | (a) Category (See categories listed at the top of this schedule) Office Overhead | (b) Description (If travel outside of Texas, complete Schedule T) Campaign office services |
|--------------------------|--|--|

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

| | |
|---------------------------|--------------------------------------|
| Date 01-10-2014 | Payee name Randy Cervantes |
|---------------------------|--------------------------------------|

| | |
|------------------------------|--|
| Amount (\$) 500.00 | Payee address; City; State; Zip Code 1509 Hooper Street San Juan, TX 78589 |
|------------------------------|--|

| | | |
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| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule) Event Expense | Description (If travel outside of Texas, complete Schedule T) Block walking Transportation |
|------------------------|--|--|

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

| | |
|---------------------------|--------------------------------------|
| Date 01-27-2014 | Payee name Randy Cervantes |
|---------------------------|--------------------------------------|

| | |
|------------------------------|--|
| Amount (\$) 300.00 | Payee address; City; State; Zip Code 1509 Hooper Street San Juan, TX 78589 |
|------------------------------|--|

| | | |
|------------------------|--|--|
| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule) Event Expense | Description (If travel outside of Texas, complete Schedule T) Block walking Transportation |
|------------------------|--|--|

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

| | |
|---------------------------|---|
| Date 01-16-2014 | Payee name Edinburg Beef Club |
|---------------------------|---|

| | |
|-----------------------------|--|
| Amount (\$) 75.00 | Payee address; City; State; Zip Code 1414 West Alamo Road Edinburg, TX 78541 |
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| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule) Advertising Expense | Description (If travel outside of Texas, complete Schedule T) Political Advertising |
|------------------------|--|---|

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|--|--|
| 1 Total pages Schedule F: 10 | 2 FILER NAME Ricardo Rodriguez, Jr. | 3 ACCOUNT # (Ethics Commission Filers) |
| 4 Date 01-02-2014 | 5 Payee name BMC | |
| 6 Amount (\$) 2,332.20 | 7 Payee address; City; State; Zip Code 1100 E. Ebony Lane Edinburg, TX 78539 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See categories listed at the top of this schedule) Advertising Expense | (b) Description (If travel outside of Texas, complete Schedule T) Political Advertising |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought Office held |
| Date 01-03-2014 | Payee name Jose A. Vela | |
| Amount (\$) 60.00 | Payee address; City; State; Zip Code 1208 East Hernandez Donna, TX 78537 | |
| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor | Description (If travel outside of Texas, complete Schedule T) contract labor for campaign services |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought Office held |
| Date 01-07-2014 | Payee name LSMCIC | |
| Amount (\$) 500.00 | Payee address; City; State; Zip Code P.O. Box 345 Linn, TX 78563 | |
| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule) Advertising Expense | Description (If travel outside of Texas, complete Schedule T) COOK OFF |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought Office held |
| Date 01-06-2014 | Payee name Jose A. Vela | |
| Amount (\$) 140.00 | Payee address; City; State; Zip Code 1208 East Hernandez Donna, TX 78537 | |
| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor | Description (If travel outside of Texas, complete Schedule T) contract labor for campaign services |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought Office held |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|---|
| 1 Total pages Schedule F: 10 | 2 FILER NAME Ricardo Rodriguez, Jr. | 3 ACCOUNT # (Ethics Commission Filers) |
|--|---|---|

| | |
|-----------------------------|---|
| 4 Date 01-08-2014 | 5 Payee name American Legion Post 408 |
|-----------------------------|---|

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|--------------------------------|--|
| 6 Amount (\$) 250.00 | 7 Payee address; City; State; Zip Code 4605 S. Hwy 281 Edinburg, TX 78539 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See categories listed at the top of this schedule) Event Expense | (b) Description (If travel outside of Texas, complete Schedule T) Advertising |
|---------------------------------|---|--|

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

| | |
|--------------------|--------------------------------------|
| Date 01-13-2014 | Payee name Beto's Screen Printing |
|--------------------|--------------------------------------|

| | |
|-----------------------|--|
| Amount (\$) 378.87 | Payee address; City; State; Zip Code 110 W 4th Street San Juan, TX 78589 |
|-----------------------|--|

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| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule) Printing Expense | Description (if travel outside of Texas, complete Schedule T) Advertising/Literature |
|------------------------|--|---|

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

| | |
|--------------------|--|
| Date 01-10-2014 | Payee name American Legion Post 408 |
|--------------------|--|

| | |
|-----------------------|---|
| Amount (\$) 250.00 | Payee address; City; State; Zip Code 4605 S. Hwy 281 Edinburg, TX 78539 |
|-----------------------|---|

| | | |
|------------------------|---|--|
| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule) Event Expense | Description (if travel outside of Texas, complete Schedule T) Advertising |
|------------------------|---|--|

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

| | |
|--------------------|-----------------------------|
| Date 01-07-2014 | Payee name Paez Printing |
|--------------------|-----------------------------|

| | |
|-------------------------|--|
| Amount (\$) 1,041.90 | Payee address; City; State; Zip Code 2236 Beaumont Ave McAllen, TX 78501 |
|-------------------------|--|

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| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule) Printing Expense | Description (if travel outside of Texas, complete Schedule T) Advertising/Literature |
|------------------------|--|---|

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

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|---|
| 1 Total pages Schedule F: 10 | 2 FILER NAME Ricardo Rodriguez, Jr. | 3 ACCOUNT # (Ethics Commission Filers) |
|--|---|---|

| | |
|-----------------------------|------------------------------------|
| 4 Date 01-20-2014 | 5 Payee name Jimmy Garza |
|-----------------------------|------------------------------------|

| | |
|--------------------------------|--|
| 6 Amount (\$) 350.00 | 7 Payee address; City; State; Zip Code 504 W. Pacific Edcouch, TX 78538 |
|--------------------------------|--|

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|---------------------------------|---|---|
| 8 PURPOSE OF EXPENDITURE | (a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description (If travel outside of Texas, complete Schedule T) contract labor for campaign services |
|---------------------------------|---|---|

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

| | |
|--------------------|---------------------------|
| Date 01-15-2014 | Payee name Social Life |
|--------------------|---------------------------|

| | |
|-------------------------|--|
| Amount (\$) 1,450.00 | Payee address; City; State; Zip Code 1300 N. 10th, Suite 310 McAllen, TX 78504 |
|-------------------------|--|

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| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule) Advertising Expense | Description (If travel outside of Texas, complete Schedule T) Political Advertising |
|------------------------|---|--|

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

| | |
|--------------------|------------------------------|
| Date 01-27-2014 | Payee name Leo Castilleja |
|--------------------|------------------------------|

| | |
|-------------------------|---|
| Amount (\$) 1,000.00 | Payee address; City; State; Zip Code 1420 East Fay Edinburg, TX 78539 |
|-------------------------|---|

| | | |
|------------------------|---|---|
| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor | Description (If travel outside of Texas, complete Schedule T) contract labor for campaign services |
|------------------------|---|---|

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

| | |
|--------------------|------------------------------|
| Date 01-24-2014 | Payee name Melissa Juarez |
|--------------------|------------------------------|

| | |
|-----------------------|--|
| Amount (\$) 350.00 | Payee address; City; State; Zip Code 1012 South Chapa Mercedes, TX 78570 |
|-----------------------|--|

| | | |
|------------------------|---|---|
| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor | Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services |
|------------------------|---|---|

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

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|--|
| 1 Total pages Schedule F: 10 | 2 FILER NAME Ricardo Rodriguez, Jr. | 3 ACCOUNT # (Ethics Commission Filers) |
|--|---|--|

| | |
|---------------------------|-------------------------------------|
| 4 Date 01-14-14 | 5 Payee name Jose A. Vela |
|---------------------------|-------------------------------------|

| | |
|--------------------------------|--|
| 6 Amount (\$) 200.00 | 7 Payee address; City; State; Zip Code 1208 East Hernandez Donna, TX 78537 |
|--------------------------------|--|

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|--------------------------|--|--|
| 8 PURPOSE OF EXPENDITURE | (a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description (If travel outside of Texas, complete Schedule T) contract labor for campaign services |
|--------------------------|--|--|

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

| | |
|---------------------------|---|
| Date 01-14-2014 | Payee name Orfelinda Hinojosa |
|---------------------------|---|

| | |
|------------------------------|--|
| Amount (\$) 300.00 | Payee address; City; State; Zip Code 2321 Elizabeth Street Mission, TX 78574 |
|------------------------------|--|

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|------------------------|--|--|
| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor | Description (If travel outside of Texas, complete Schedule T) contract labor for campaign services |
|------------------------|--|--|

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

| | |
|---------------------------|------------------------------------|
| Date 01-15-2014 | Payee name Sergio Cortez |
|---------------------------|------------------------------------|

| | |
|------------------------------|--|
| Amount (\$) 350.00 | Payee address; City; State; Zip Code 16224 Monte Calvario Drive Edinburg, TX 78539 |
|------------------------------|--|

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|------------------------|--|--|
| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor | Description (If travel outside of Texas, complete Schedule T) contract labor for campaign services |
|------------------------|--|--|

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

| | |
|---------------------------|------------------------------------|
| Date 01-14-2014 | Payee name Sylvia Flores |
|---------------------------|------------------------------------|

| | |
|------------------------------|--|
| Amount (\$) 300.00 | Payee address; City; State; Zip Code 2509 Paseo Encantado Street Mission, TX 78572 |
|------------------------------|--|

| | | |
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| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor | Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services |
|------------------------|--|--|

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

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