

FORM COR-C/OH

CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

1 ACCOUNT #		2 Total pages filed:		OFFICE USE ONLY	
3 CANDIDATE / OFFICEHOLDER NAME		MS / MRS / MR FIRST MI			
		MR. GUADALUPE		8/6/13	
		NICKNAME LAST SUFFIX		Date Hand-delivered or Postmarked	
		"LUPE" TREVINO JR.		8/6/13	
4 ORIGINAL REPORT TYPE		<input type="checkbox"/> January 15 <input type="checkbox"/> Runoff <input type="checkbox"/> Other (specify) _____ <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> Exceeded \$500 limit _____ <input type="checkbox"/> 30th day before election <input type="checkbox"/> 15th day after treasurer appointment (officeholder only) <input type="checkbox"/> 8th day before election <input type="checkbox"/> Final report		Receipt # Amount	
5 ORIGINAL PERIOD COVERED		Month Day Year Month Day Year		Date Processed	
		01 / 01 / 13 THROUGH 06 / 30 / 13		Date Imaged	

6 EXPLANATION OF CORRECTION

CHECKS WERE PHOTO COPIED AND DEPOSITED IN A TIMELY MANNER. WHILE RECONCILING THE ACCOUNT I NOTICED THAT THEY WERE NOT IN THE REPORT.

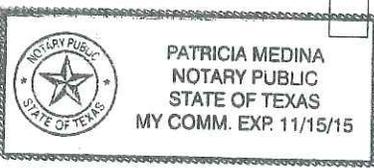
7 AFFIDAVIT

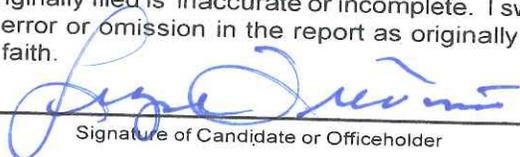
I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check ONLY if applicable:

Semiannual reports: This report is an amendment/correction to a semiannual report due on or after September 1, 2011. If amendment/correction is filed on or after the eighth day after the original report was filed, I swear, or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

Other reports (excluding semiannual reports due on or after September 1, 2011): I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.




 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Guadalupe "Lupe" Trevino Jr., this the 6th day of August, 2013, to certify which, witness my hand and seal of office.

Patricia Medina Patricia Medina Notary Public
 Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

2011 AUG 6 8 00 AM '13

Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME GUADALUPE "LUPE" TREVINO, JR.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 6/13/13	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOSE M. FLORES RANCH ACCT.	7 Amount of contribution (\$) \$10,000.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code P.O. BOX 310 MISSION, TX 78573		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 6/13/13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUFINO GARZA RANCH ACCT.	Amount of contribution (\$) \$5,000.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3779 Bentsen Palm Dr. MISSION, TX 78574		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 6/27/13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EL SALINAS RANCH	Amount of contribution (\$) \$5,000.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 500 E. 9th St. MISSION, TX 78572		(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)	
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)	

2013 AUG 6 PM 4 15

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

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME **GUADALUPE "LUPE" TREVINO, JR.** 15 ACCOUNT # (Ethics Commission Filers)

16 NOTICE FROM POLITICAL COMMITTEE(S)

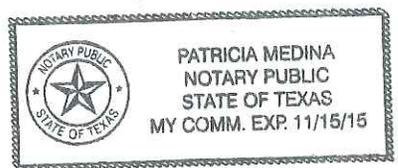
THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO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

<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC <input type="checkbox"/> additional pages	COMMITTEE TYPE	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ -0-
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$102,830.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ -0-
	4. TOTAL POLITICAL EXPENDITURES	\$ 107,414.17
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 34,590.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 215,000.00

2013 AUG 15 PM 4:15

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.

Lupe Trevino, Jr.
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Guadalupe "Lupe" Trevino, Jr., this the 14th day of August, 2013, to certify which, witness my hand and seal of office.

Patricia Medina Patricia Medina Notary Public
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath