

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

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

15 C/OH NAME **RENE GUERRA** 16 ACCOUNT # (Ethics Commission Filers)

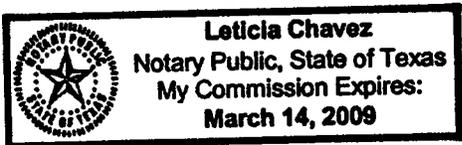
17 NOTICE FROM POLITICAL COMMITTEE(S)

** This box is for notice of 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 <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC <input type="checkbox"/> additional pages	COMMITTEE NAME	N/A
	COMMITTEE ADDRESS	
	COMMITTEE CAMPAIGN TREASURER NAME	
	COMMITTEE CAMPAIGN TREASURER ADDRESS	

18 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 85,850.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 80,450.04
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 4,151.59
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ -0-

19 AFFIDAVIT



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

Rene Guerra
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said RENE GUERRA, this the 25th. day of June, 2008, to certify which, witness my hand and seal of office.

Leticia Chavez Leticia Chavez
Signature of officer administering oath Printed name of officer administering oath 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: Twelve (12)	
2 FILER NAME <p style="text-align: center;">RENE GUERRA</p>		3 ACCOUNT # (Ethics Commission filers)	
4 Date 02-07-08	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joe E. Garcia 6 Contributor address; City; State; Zip Code 4401 N. McColl Rd., McAllen, Tx. 78504	7 Amount of contribution (\$) \$1,500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Attorney		10 Employer (See Instructions)	
Date 02-07-08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maria (Mary) Garcia Contributor address; City; State; Zip Code 705 Water Lilly Ave., McAllen, Tx. 78504	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 02-13-08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Augusto A. Castrillon Martha L. Pelaez Contributor address; City; State; Zip Code 2805 Santa Esperanza, Mission, Tx. 78572	Amount of contribution (\$) \$2,500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 02-22-08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bertha Medina, M.D. Melecio Medina, Jr. Contributor address; City; State; Zip Code 1300 S. 1½ St., McAllen, Tx. 78503	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 02-21-08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Byron J. Lewis Contributor address; City; State; Zip Code 348 Enfield St., Edinburg, Tx. 78539	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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

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 RENE GUERRA		3 ACCOUNT # (Ethics Commission filers)	
4 Date 02-22-08	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Juan Chuy Hinojosa 6 Contributor address; City; State; Zip Code 612 W. Nolana, McAllen, Tx. 78504	7 Amount of contribution (\$) \$1,000.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Attorney		10 Employer (See Instructions)	
Date 02-26-08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mr. or Mrs. Michael V. McCarthy Contributor address; City; State; Zip Code P.O. Box 542, Edinburg, Tx. 78540	Amount of contribution (\$) \$2,500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 02-26-08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saul Ortega Contributor address; City; State; Zip Code 1220 Castille Court, Edinburg, Tx. 78539	Amount of contribution (\$) \$2,500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 02-26-08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herb R. Scurlock III Nancy L. Scurlock Contributor address; City; State; Zip Code 3714 S. Expressway 281, Edinburg, Tx. 78539	Amount of contribution (\$) \$1,500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 02-27-08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) J. Humberto Rodriguez Contributor address; City; State; Zip Code 700 W. Chapin, Edinburg, Tx. 78540	Amount of contribution (\$) \$2,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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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:	
2 FILER NAME RENE GUERRA		3 ACCOUNT # (Ethics Commission filers)	
4 Date 02-27-08	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adalberto Esquivel 6 Contributor address; City; State; Zip Code 1501 N. Bryan, Mission, Tx. 78572	7 Amount of contribution (\$) \$1,000.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 02-27-08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rene O.Oliveira Contributor address; City; State; Zip Code P.O. Box 953, Brownsville, Tx. 78520	Amount of contribution (\$) \$1,500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 02-27-08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carrie B. Welch Tillmin G. Welch Contributor address; City; State; Zip Code P.O. Box 291, Edinburg, Tx. 78540	Amount of contribution (\$) \$1,500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 02-27-08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) A-Mingo Bail Bonds Domingo Rodriguez Contributor address; City; State; Zip Code P.O. Box 882, Edinburg, Tx. 78540	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 02-37-08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nick Palacios Frances Palcios Contributor address; City; State; Zip Code 1813 E. Russell Rd., Edinburg, Tx. 78539	Amount of contribution (\$) \$1,500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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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:	
2 FILER NAME RENE GUERRA		3 ACCOUNT # (Ethics Commission filers)	
4 Date 02-27-08	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jaime A. Gonzalez, Jr. 6 Contributor address; City; State; Zip Code 3511 Plazas Del Lago, Edinburg, Tx. 78539	7 Amount of contribution (\$) \$2,500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 02-27-08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arturo E. Guerra, Jr. Barbara J. Guerra Contributor address; City; State; Zip Code 2704 S. 2nd.St., Edinburg, Tx. 78539	Amount of contribution (\$) \$2,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 02-27-08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Javier E. Cortinas, MD Diana Cortinas, MD Contributor address; City; State; Zip Code 1400 Northgate Ln., McAllen, Tx. 78504	Amount of contribution (\$) \$2,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 02-27-08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pablo Garza, Jr. Contributor address; City; State; Zip Code 2100 W. Expressway 83, Mercedes, Tx. 78570	Amount of contribution (\$) \$1,500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 02-19-08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Monroe & Pena Contributor address; City; State; Zip Code 208 W. Cano St., Edinburg, Tx. 78539	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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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:	
2 FILER NAME <p style="text-align: center;">RENE GUERRA</p>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <p style="text-align: center;">02-20-08</p>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberto Jackson, Jr. 6 Contributor address; City; State; Zip Code P.O. Box 5000-203.Mission, Tx. 78573	7 Amount of contribution (\$) <p style="text-align: center;">\$1,000.00</p>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <p style="text-align: center;">02-21-08</p>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lone Star Rehab Contributor address; City; State; Zip Code 504 N. 10th., McAllen, Tx. 78501	Amount of contribution (\$) <p style="text-align: center;">\$1,500.00</p>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <p style="text-align: center;">02-22-08</p>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yzaquirre & Chapa Contributor address; City; State; Zip Code 6521 N. 10th. St., McAllen, Tx. 78504	Amount of contribution (\$) <p style="text-align: center;">\$1,500.00</p>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <p style="text-align: center;">02-22-08</p>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fidel Cortez Contributor address; City; State; Zip Code 148 E. Bus. 83, Alamo, Tx. 78516	Amount of contribution (\$) <p style="text-align: center;">\$1,000.00</p>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <p style="text-align: center;">02-27-08</p>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vickasan Contributor address; City; State; Zip Code NOTE: Person or Persons and address unknown...Monies will be held in Trust.. until proper identification has been established.	Amount of contribution (\$) <p style="text-align: center;">\$500.00</p>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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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:

2 FILER NAME

RENE GUERRA

3 ACCOUNT # (Ethics Commission filers)

4 Date
02-27-08

5 Full name of contributor out-of-state PAC (ID#: _____)
Oscar Alvarez

7 Amount of contribution (\$)
\$1,000.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

201 S. 10th. St., McAllen, Tx. 78501

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date
02-27-08

Full name of contributor out-of-state PAC (ID#: _____)
Augustin Martinez

Amount of contribution (\$)
\$500.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

McAllen, Tx. 78501

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02-27-08

Full name of contributor out-of-state PAC (ID#: _____)
Keno Vasquez

Amount of contribution (\$)
\$1,250.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

3525 W. Freddy Gonzalez, Edinburg, Tx. 785

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02-27-08

Full name of contributor out-of-state PAC (ID#: _____)
Ezequiel Reyna, Jr.

Amount of contribution (\$)
\$1,500.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

702 W. Expressway 83, Weslaco, Tx. 78596

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02-27-08

Full name of contributor out-of-state PAC (ID#: _____)
David O. Rogers, Jr.

Amount of contribution (\$)
\$5,000.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

P.O. Box 1077, Edinburg, Tx. 78540

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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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:	
2 FILER NAME RENE GUERRA			3 ACCOUNT # (Ethics Commission filers)	
4 Date 02-07-08	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia & Villarreal	7 Amount of contribution (\$) \$2,500.00	8 In-kind contribution description (if applicable)	
6 Contributor address; City; State; Zip Code 4401 N. McColl Rd., McAllen, Tx. 78504				
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)		
Date 02-15-08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez Palacios	Amount of contribution (\$) \$1,500.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 1317 E. Quebec Ave., McAllen, Tx. 78503				
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date 02-22-08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAllen Spine & Neck Clinic	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 2025 Tartan Trl., Highland Village, Tx. 75077				
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date 02-26-08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perdue Brandon Fielder Collins & Mott In Association with John David Franz	Amount of contribution (\$) \$1,500.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 400 N. McColl, McAllen, Tx. 78501				
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date 02-26-08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia & Villarreal	Amount of contribution (\$) \$1,500.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 4401 N. McColl Rd., McAllen, Tx. 78504				
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		

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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:

2 FILER NAME

RENE GUERRA

3 ACCOUNT # (Ethics Commission filers)

4 Date

02-27-08

5 Full name of contributor out-of-state PAC (ID#: _____)

L & G Investments

6 Contributor address; City; State; Zip Code

2100 W. Expressway 83, Mercedes, Tx. 78570

7 Amount of contribution (\$)

\$1,000.00

8 In-kind contribution description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

02-27-08

Full name of contributor out-of-state PAC (ID#: _____)

Ricardo R. Godinez

Contributor address; City; State; Zip Code

520 Pecan, McAllen, Tx. 78501

Amount of contribution (\$)

\$1,000.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03-03-08

Full name of contributor out-of-state PAC (ID#: _____)

DK III Hornback Enterprises

Contributor address; City; State; Zip Code

702 W. Expressway 83, Weslaco, Tx. 78596

Amount of contribution (\$)

\$2,000.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02-07-08

Full name of contributor out-of-state PAC (ID#: _____)

Mamie Farias

Contributor address; City; State; Zip Code

1308 E. Cynthia, McAllen, Tx. 78501

Amount of contribution (\$)

\$300.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02-26-08

Full name of contributor out-of-state PAC (ID#: _____)

Toribio Palacios/Hope E. Palacios

Contributor address; City; State; Zip Code

1805 E. Russell Rd., Edinburg, Tx. 78541

Amount of contribution (\$)

\$2,500.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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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:	
2 FILER NAME RENE GUERRA			3 ACCOUNT # (Ethics Commission filers)	
4 Date 02-27-08	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benjamin and Nora A. Trevino	7 Amount of contribution (\$) \$1,500.00	8 In-kind contribution description (if applicable)	
6 Contributor address; City; State; Zip Code 213 Campo Verde Cir., San Juan, Tx. 78589				
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)		
Date 03-21-08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maragarito Trujillo, Jr.	Amount of contribution (\$) \$1,500.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 2100 E. Siverbell Dr., Palmhurst, Tx. 78574				
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date 02-27-08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ricardo A. Lara	Amount of contribution (\$) \$1,500.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 2502 Dove Avd., Mission, Tx. 78574				
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date 02-29-08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Torres/David's Bail Bonds	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 3901 W.Schunior St., Edinburg, Tx. 78539				
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date 02-12-08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheldon Weisfeld	Amount of contribution (\$) \$1,500.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 855 E. Harrison, Brownsville, Tx. 78520				
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		

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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:	
2 FILER NAME RENE GUERRA		3 ACCOUNT # (Ethics Commission filers)	
4 Date 02-25-08	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Offices of Garcia Quintanilla & Palacios 6 Contributor address; City; State; Zip Code 5526 N. 10th. St., McAllen, Tx. 78504	7 Amount of contribution (\$) \$1,500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 02-25-08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Offices of Garcia Quintanilla & Palacios Contributor address; City; State; Zip Code 5526 N. 10th. St., McAllen, Tx. 78504	Amount of contribution (\$) \$1,500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 02-27-08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) International Bank of Commerce/Committee Improvement and Betterment of the Country Contributor address; City; State; Zip Code McAllen, Texas	Amount of contribution (\$) \$2,500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 03-10-08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roel R. Trevino Contributor address; City; State; Zip Code 1401 W. Polk, Pharr, Tx. 78577	Amount of contribution (\$) \$2,500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 02-15-08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santos Maldonado, Jr. Contributor address; City; State; Zip Code 209 E. University Dr., Edinburg, Tx. 78539	Amount of contribution (\$) \$2,500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
<p>ATTACH ADDITIONAL COPIES OF THIS FORM 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

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2 FILER NAME RENE GUERRA			3 ACCOUNT # (Ethics Commission filers)	
4 Date 02-15-08	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Office of Manuel Guerra, III	7 Amount of contribution (\$) \$1,000.00	8 In-kind contribution description (if applicable)	
6 Contributor address; City; State; Zip Code 320 West Pecan Blvd., McAllen, Tx. 78501				
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)		
Date 02-26-08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Office of Eddy Trevino	Amount of contribution (\$) \$1,500.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 4418 S. McColl Rd., Edinburg, Tx. 78539				
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date 02-27-08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alberto and Alma Trevino	Amount of contribution (\$) \$2,500.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 819 North I Road, Pharr, Tx. 78577				
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date 03-15-08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Office of Noe L. Perez	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 106 S. 12th. Ave., Edinburg, Tx. 78539				
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date 04-28-08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Office of Richard A. Cantu	Amount of contribution (\$) \$1,500.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code P.O. Box 6149, McAllen, Tx. 78502				
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		

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

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

RENE GUERRA

3 ACCOUNT # (Ethics Commission filers)

4 Date
05-05-08

5 Full name of contributor out-of-state PAC (ID#: _____)
Xavier and Cynthia G. Ornelas

7 Amount of contribution (\$)
\$300.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code
2620 Blue Ridge, Edinburg, Tx. 78539

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID#: _____)

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID#: _____)

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID#: _____)

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID#: _____)

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.	1 Total pages Schedule F: One (1)
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2 FILER NAME RENE GUERRA	3 ACCOUNT # (Ethics Commission filers)
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4 Date 03-24-08	5 Payee name First National Bank	7 Amount (\$) \$80,450.04
6 Payee address; City; State; Zip Code 100 W. Cano St., Edinburg, Texas 78539		

8 Purpose of payment (See instructions regarding type of information required.) Campaign Loan <i>(If travel outside of Texas, complete Schedule T)</i>	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
---	--

Date	Payee name	Amount (\$)
	Payee address; City; State; Zip Code	

Purpose of payment (See instructions regarding type of information required.) <i>(If travel outside of Texas, complete Schedule T)</i>	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
---	--

Date	Payee name	Amount (\$)
	Payee address; City; State; Zip Code	

Purpose of payment (See instructions regarding type of information required.) <i>(If travel outside of Texas, complete Schedule T)</i>	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date	Payee name	Amount (\$)
	Payee address; City; State; Zip Code	

Purpose of payment (See instructions regarding type of information required.) <i>(If travel outside of Texas, complete Schedule T)</i>	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED