JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 1

The JC/OH Instruction Guide explains how to complete this form.

1 ACCOUNT # (Ethics Commission Filers)

2 Total pages filed:

OFFICE USE ONLY

Date Received: MAY 19 2014 11:52 am

Date Hand-delivered or Postmarked

Receipt #

Amount

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR: Mr. FIRST: Homero MI:

NICKNAME: LAST: Jasso SUFFIX:

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

☐ change of address

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

107 Hibiscus, McAllen, TX 78501

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE: (956) PHONE NUMBER: 827 - 0512 EXTENSION:

6 CAMPAIGN TREASURER NAME

MS / MRS / MR: Mrs. FIRST: Monica MI:

NICKNAME: LAST: Jasso-Sandoval SUFFIX:

7 CAMPAIGN TREASURER ADDRESS (residence or business)

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

704 Abbott Avenue Edinburg, Texas 78541

8 CAMPAIGN TREASURER PHONE

AREA CODE: (956) PHONE NUMBER: 386 - 0047 EXTENSION:

9 REPORT TYPE

☐ January 15 ☐ 30th day before election ☑ Runoff ☐ 15th day after campaign treasurer appointment (officeholder only)

☐ July 15 ☐ 8th day before election ☐ Exceeded $500 limit ☐ Final report (Attach C/OH - FR)

10 PERIOD COVERED

Month / Day / Year: 2 / 23 / 2014 THROUGH Month / Day / Year: 5 / 19 / 2014

11 ELECTION

ELECTION DATE Month / Day / Year: 5 / 27 / 2014

ELECTION TYPE: ☐ Primary ☑ Runoff ☐ General ☐ Special

12 OFFICE

OFFICE HELD (if any): Justice of the Peace

13 OFFICE SOUGHT (if known): Justice of the Peace

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH
COVER SHEET PG 2

14 C/OH NAME: Homer Jasso

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

☐ GENERAL

☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages

17 CONTRIBUTION TOTALS

1.	TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	$ N/A
2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 6,950.00

EXPENDITURE TOTALS

3.	TOTAL POLITICAL EXPENDITURES OF $100 OR LESS, UNLESS ITEMIZED	$ N/A
4.	**TOTAL POLITICAL EXPENDITURES**	$ 22,686.00

CONTRIBUTION BALANCE

5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 3,607.91

OUTSTANDING LOAN TOTALS

6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ N/A

18 AFFIDAVIT

ROBERTO LEAL
MY COMMISSION EXPIRES
March 13, 2018

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 Notary Public, this the 18th day of May, 20 14, to certify which, witness my hand and seal of office.

Signature of officer administering oath	Print name of officer administering oath	Title of officer administering oath
	Roberto Leal	Notary Public

CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

The Instruction Guide explains how to complete this form.
•• Complete only if "Report Type" on page 1 is marked "Final Report" ••

1 C/OH NAME
Homero Jasso

2 ACCOUNT # (Ethics Commission Filers)

3 SIGNATURE

I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.

Signature of Candidate / Officeholder

4 FILER WHO IS NOT AN OFFICEHOLDER

•• Complete A & B below *only* if you are not an officeholder. ••

A. CAMPAIGN FUNDS

Check only one:

☐ I do not have unexpended contributions or unexpended interest or income earned from political contributions.

☐ I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.

B. ASSETS

Check only one:

☐ I do not retain assets purchased with political contributions or interest or other income from political contributions.

☐ I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.

Signature of Candidate

5 OFFICEHOLDER

•• Complete this section *only* if you are an officeholder ••

☐ I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest or other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions.

Signature of Officeholder

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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:

2 FILER NAME: Homero Jasso

3 ACCOUNT # (Ethics Commission Filers):

4 Date: 3-17-2014

5 Payee name: Lupita Longoria

6 Amount ($): $500.-

7 Payee address; City; State; Zip Code: Edinburg, Texas 78539

8 PURPOSE OF EXPENDITURE

(a) Category (See categories listed at the top of this schedule): Rental Expense

(b) Description (If travel outside of Texas, complete Schedule T):

9 Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name:

Office sought:

Office held:

Date: 4-11-2014

Payee name: Print Works

Amount ($): $1,000.-

Payee address; City; State; Zip Code: 1414 Pecan Blvd. McAllen, TX 78501

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Advertising Expense

Description (If travel outside of Texas, complete Schedule T): N/A

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name: JU

Office sought:

Office held:

Date: 4-23-2014

Payee name: Randy Rodriguez

Amount ($): $635.00

Payee address; City; State; Zip Code: Edinburg, TX 78539

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Contractor Labor

Description (If travel outside of Texas, complete Schedule T): N/A

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name:

Office sought:

Office held:

Date: 4-28-2014

Payee name: Print Works

Amount ($): $416.76

Payee address; City; State; Zip Code: 1414 Pecan Blvd. McAllen, TX 78501

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Advertising

Description (If travel outside of Texas, complete Schedule T): N/A

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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:

2 FILER NAME: Homero Jasso

3 ACCOUNT # (Ethics Commission Filers):

4 Date: 4-24-2014

5 Payee name: The Monitor

6 Amount ($): $149.00

7 Payee address; City; State; Zip Code: 1400 E. Nolana McAllen, TX 78504

8 PURPOSE OF EXPENDITURE

(a) Category (See categories listed at the top of this schedule): Advertising

(b) Description (If travel outside of Texas, complete Schedule T): N/A

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

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Date: 4-30-2014

Payee name: Bernie Diaz (Print Works)

Amount ($): $485.00

Payee address; City; State; Zip Code: 1414 Pecan Blvd. McAllen, TX 78501

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Advertising

Description (If travel outside of Texas, complete Schedule T): N/A

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

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Date: 5-5-14

Payee name: Nelly Carrizalez

Amount ($): $175.00

Payee address; City; State; Zip Code: Edinburg, Texas 78501

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Contractor / Labor

Description (If travel outside of Texas, complete Schedule T): N/A

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

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Date: 5-5-2014

Payee name: Martha Carrizalez

Amount ($): $175.00

Payee address; City; State; Zip Code: Edinburg, Texas 78539

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Contractor / Labor

Description (If travel outside of Texas, complete Schedule T): N/A

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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:	2 FILER NAME Homero Tasso	3 ACCOUNT # (Ethics Commission Filers)
4 Date 5-5-2014	5 Payee name Andrea Lopez	
6 Amount ($) 75.00	7 Payee address; City; State; Zip Code Edinburg, TX 78539	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contractor/Labor	(b) Description (If travel outside of Texas, complete Schedule T) N/A
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 5-2-2014	Payee name Gracie Ramirez	
Amount ($) $100.-	Payee address; City; State; Zip Code Edinburg, Texas 78539	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contractor/Labor	Description (If travel outside of Texas, complete Schedule T) N/A
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 5-5-2014	Payee name Jose Tasso	
Amount ($) $50.00	Payee address; City; State; Zip Code Edinburg, Texas 78539	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contractor/Labor	Description (If travel outside of Texas, complete Schedule T) N/A
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 5-5-2014	Payee name Leonora Alaniz	
Amount ($) $75.00	Payee address; City; State; Zip Code Edinburg, TX 78539	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contractor/Labor	Description (If travel outside of Texas, complete Schedule T) N/A
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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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:

2 FILER NAME: Homero Tasso

3 ACCOUNT # (Ethics Commission Filers):

4 Date: 5-9-2014

5 Payee name: Leonel Castilleja

6 Amount ($): $200.-

7 Payee address; City; State; Zip Code: Edinburg, TX 78539

8 PURPOSE OF EXPENDITURE

(a) Category (See categories listed at the top of this schedule): Advertising

(b) Description (If travel outside of Texas, complete Schedule T): N/A

9 Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name:

Office sought:

Office held:

Date: 5-5-2014

Payee name: Esmeralda Carrizales

Amount ($): -25.00

Payee address; City; State; Zip Code: Edinburg, TX 78539

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Contractor / Labor

Description (If travel outside of Texas, complete Schedule T): N/A

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name:

Office sought:

Office held:

Date: 5-9-2014

Payee name: Andrea Lopez

Amount ($): $50.-

Payee address; City; State; Zip Code: Edinburg, TX 78539

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Contractor / Labor

Description (If travel outside of Texas, complete Schedule T): N/A

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name:

Office sought:

Office held:

Date: 5-9-2014

Payee name: Nellie Carrizalez

Amount ($): 100.-

Payee address; City; State; Zip Code: Edinburg, TX 78539

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Contractor / Labor

Description (If travel outside of Texas, complete Schedule T): N/A

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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:	2 FILER NAME Homero Jasso	3 ACCOUNT # (Ethics Commission Filers)
4 Date 5-9-2014	5 Payee name Gracie Ramirez	
6 Amount ($) $100.-	7 Payee address; City; State; Zip Code Edinburg, TX 78539	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contractor/Labor	(b) Description (If travel outside of Texas, complete Schedule T) N/A
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 5-10-2014	Payee name Esmeralda Carrizalez	
Amount ($) $100.-	Payee address; City; State; Zip Code Edinburg, TX 78539	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contractor/Labor	Description (If travel outside of Texas, complete Schedule T) N/A
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 5-9-2014	Payee name Jose Jasso	
Amount ($) $100.-	Payee address; City; State; Zip Code Edinburg, TX 78539	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contractor/Labor	Description (If travel outside of Texas, complete Schedule T) N/A
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 5-11-2014	Payee name Lupita Longoria	
Amount ($) $1,000.-	Payee address; City; State; Zip Code 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) N/A
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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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:

2 FILER NAME: Homero Jasso

3 ACCOUNT # (Ethics Commission Filers):

4 Date: 5-8-2014

5 Payee name: Holy Family Church

6 Amount ($): $150.-

7 Payee address; City; State; Zip Code: 1302 E. Champion Edinburg, TX 78539

8 PURPOSE OF EXPENDITURE

(a) Category (See categories listed at the top of this schedule): Gift

(b) Description (If travel outside of Texas, complete Schedule T): N/A

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

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Date: 5-15-2014

Payee name: Homero Jasso Jr.

Amount ($): $350.-

Payee address; City; State; Zip Code: Edinburg, TX 78539

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Food/Beverage Expense

Description (If travel outside of Texas, complete Schedule T):

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

5,810.70

Date: 5-15-2014

Payee name: Print Works

Amount ($): $5,688.00

Payee address; City; State; Zip Code: 1414 Pecan Blvd. McAllen, TX 78501

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Advertising Expense

Description (If travel outside of Texas, complete Schedule T): N/A

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

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Date: 5-18-2014

Payee name: Gracie Ramirez

Amount ($): $150.00

Payee address; City; State; Zip Code: Edinburg, TX 78539

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Contract Labor

Description (If travel outside of Texas, complete Schedule T): N/A

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

11,648.70

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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 G:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
	Homero Jasso	

4 Date	5 Payee name
5-05-2014	Murphy USA

6 Amount ($)	7 Payee address; City; State; Zip Code
$76.08 ☑ Reimbursement from political contributions intended	4245 South McColl Road Edinburg, TX 78539

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
	Travel in District	N/A

Date	Payee name
4-18-2014	Murphy USA

Amount ($)	Payee address; City; State; Zip Code
$34.00 ☑ Reimbursement from political contributions intended	4245 South McColl Rd. Edinburg, TX 78539

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Travel in District	N/A

Date	Payee name
4-15-2014	Murphy USA

Amount ($)	Payee address; City; State; Zip Code
$24.06 ☑ Reimbursement from political contributions intended	4045 S. McColl Rd. Edinburg, TX 78539

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Travel in District	N/A

Date	Payee name
4-15-2014	Murphy USA 5727

Amount ($)	Payee address; City; State; Zip Code
$31.02 ☑ Reimbursement from political contributions intended	1720 W. University Edinburg, TX 78539

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Travel in District	N/A

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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 G:	2 FILER NAME Homero Josso	3 ACCOUNT # (Ethics Commission Filers)
4 Date 5-5-2014	5 Payee name Murphy USA 7400	
6 Amount ($) $78.69 ☑ Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 4245 S. McColl Road Edinburg, TX 78539	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Travel in District	(b) Description (If travel outside of Texas, complete Schedule T) N/A
Date 3-21-2014	Payee name Print Works	
Amount ($) $1,145.00 ☑ Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1414 Pecan Blvd. McAllen, Texas 78501	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising	Description (If travel outside of Texas, complete Schedule T) N/A
Date 4-5-2014	Payee name Andres Lopez	
Amount ($) $75.00 ☐ Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) N/A
Date 4-5-2014	Payee name Andres Lopez	
Amount ($) 125.- ☐ Reimbursement from political contributions intended	Payee address; City; State; Zip Code Contract Labor	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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 G:	2 FILER NAME: Homero Jasso	3 ACCOUNT # (Ethics Commission Filers)

4 Date: 4-5-2014	5 Payee name: Gracie Ramirez
6 Amount ($): $100.- ☐ Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule): Contractor Labor — (b) Description (If travel outside of Texas, complete Schedule T): N/A

Date: 3-5-2014	Payee name: South Texas College
Amount ($): $150.00 ☐ Reimbursement from political contributions intended	Payee address; City; State; Zip Code: 3201 Pecan Blvd. McAllen, Texas 78501
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Event Expense — Description (If travel outside of Texas, complete Schedule T): N/A

Date: 4-11-2014	Payee name: Print Works
Amount ($): $1,000.00 ☐ Reimbursement from political contributions intended	Payee address; City; State; Zip Code: 1414 Pecan Blvd. McAllen, TX 78501
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): — Description (If travel outside of Texas, complete Schedule T):

Date: 4-10-2014	Payee name: Mike Carrera
Amount ($): $3,000.00 ☐ Reimbursement from political contributions intended	Payee address; City; State; Zip Code: Edinburg, TX 78539
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Contractor/Consulting — Description (If travel outside of Texas, complete Schedule T): N/A

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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 G:	2 FILER NAME: Homero Jasso	3 ACCOUNT # (Ethics Commission Filers)
4 Date: 4-8-2014	5 Payee name: Mayra Hernandez	
6 Amount ($): $100.- ☐ Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code: Edinburg, Texas, 78539	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule): Contractor	(b) Description (If travel outside of Texas, complete Schedule T): N/A
Date: 4-11-2014	Payee name: Print Works	
Amount ($): $2,061.32 ☐ Reimbursement from political contributions intended	Payee address; City; State; Zip Code: 1414 Pecan Blvd. McAllen, Texas 78539	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Advertising	Description (If travel outside of Texas, complete Schedule T):
Date: 5-16-2014	Payee name: Sam's Club	
Amount ($): 208.90 ☑ Reimbursement from political contributions intended	Payee address; City; State; Zip Code:	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule):	Description (If travel outside of Texas, complete Schedule T):
Date: 5-1-2014	Payee name: Don Pepe's Rest.	
Amount ($): $639.36 ☐ Reimbursement from political contributions intended	Payee address; City; State; Zip Code: 306 N. McColl McAllen, TX 78539	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Food Expense	Description (If travel outside of Texas, complete Schedule T):

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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 G:

2 FILER NAME: Homero Tosso

3 ACCOUNT # (Ethics Commission Filers):

4 Date:

5 Payee name: H.E.B

6 Amount ($): $17.60

☐ Reimbursement from political contributions intended

7 Payee address; City; State; Zip Code: 901 Trenton Road Edinburg, TX 78539

8 PURPOSE OF EXPENDITURE

(a) Category (See categories listed at the top of this schedule): Food Expense

(b) Description (If travel outside of Texas, complete Schedule T): N/A

Date: 3-9-2014

Payee name: Corner Store

Amount ($): 50.00

☑ Reimbursement from political contributions intended

Payee address; City; State; Zip Code: 3912 N. McColl Rd. McAllen, TX 78539

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Food Expense

Description (If travel outside of Texas, complete Schedule T): N/A

Date: 3-4-2014

Payee name: SAM'S

Amount ($): $342.05

☐ Reimbursement from political contributions intended

Payee address; City; State; Zip Code: McAllen, TX 78501

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Food Expense

Description (If travel outside of Texas, complete Schedule T): N/A

Date: 4-9-2014

Payee name: Church's

Amount ($): $17.98

☑ Reimbursement from political contributions intended

Payee address; City; State; Zip Code: 820. E. University Edinburg, TX 78539

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Food Expense

Description (If travel outside of Texas, complete Schedule T): N/A

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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 G:	2 FILER NAME: Homero Tasso	3 ACCOUNT # (Ethics Commission Filers)

9152.86

4 Date	5 Payee name	
4-09-2014	SAM'S CLUB	
6 Amount ($): $109.30 ☑ Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code: McAllen, TX 78501	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule): Food Expense	(b) Description (If travel outside of Texas, complete Schedule T): N/A
Date: 4-15-2014	Payee name: SAM'S CLUB	
Amount ($): $265.92 ☐ Reimbursement from political contributions intended	Payee address; City; State; Zip Code: McAllen, TX 78501	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Food Expense	Description (If travel outside of Texas, complete Schedule T): N/A
Date: 2-26-2014	Payee name: SAM'S CLUB	
Amount ($): $106.62 ☑ Reimbursement from political contributions intended	Payee address; City; State; Zip Code: McAllen, TX 78501	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Food Expense	Description (If travel outside of Texas, complete Schedule T): N/A
Date: 4-26-2014	Payee name: Murphy USA	
Amount ($): $50.61 ☑ Reimbursement from political contributions intended	Payee address; City; State; Zip Code: 4845 S. McColl Road Edinburg, TX 78539	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Travel in District	Description (If travel outside of Texas, complete Schedule T): N/A

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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 G:	2 FILER NAME: Homero Tosso	3 ACCOUNT # (Ethics Commission Filers)

4 Date: 4-24-2014	5 Payee name: Murphy USA
6 Amount ($): 38.37 ☐ Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code: 4245 S. McColl Road Edinburg, TX 78539
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule): Travel — (b) Description (If travel outside of Texas, complete Schedule T): N/A

Date: 4-30-2014	Payee name: Murphy USA 5787
Amount ($): 955.84 ☐ Reimbursement from political contributions intended	Payee address; City; State; Zip Code: 1780 W. University Edinburg, TX 78539
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Travel — Description (If travel outside of Texas, complete Schedule T): N/A

Date: 4-26-2014	Payee name: Murphy USA
Amount ($): $53.11 ☐ Reimbursement from political contributions intended	Payee address; City; State; Zip Code: 4245 S. McColl Edinburg, TX 78539
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Travel — Description (If travel outside of Texas, complete Schedule T): N/A

Date: 5-07-2014	Payee name: Walmart
Amount ($): $100.- ☐ Reimbursement from political contributions intended	Payee address; City; State; Zip Code: 4101 S. McColl Road Edinburg, TX 78539
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Travel — Description (If travel outside of Texas, complete Schedule T): N/A

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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 G:	2 FILER NAME: Homero Tasso	3 ACCOUNT # (Ethics Commission Filers)

4 Date: 5-15-2014	5 Payee name: Murphy USA
6 Amount ($): $53.79 ☑ Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code: 4245 S. McColl Road Edinburg, TX 78539
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule): Travel — (b) Description (If travel outside of Texas, complete Schedule T): N/A

Date: 5-09-2014	Payee name: Murphy USA
Amount ($): $9.00 ☑ Reimbursement from political contributions intended	Payee address; City; State; Zip Code: 4245 S. McColl Rd. Edinburg, TX 78539
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Travel — Description (If travel outside of Texas, complete Schedule T): N/A

Date: 5-13-2014	Payee name: WALMART
Amount ($): $100.- ☑ Reimbursement from political contributions intended	Payee address; City; State; Zip Code: 401 S. McColl Rd Edinburg, TX 78539
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Travel — Description (If travel outside of Texas, complete Schedule T): N/A

Date: 3-04-2014	Payee name: Stripes
Amount ($): $40.- ☑ Reimbursement from political contributions intended	Payee address; City; State; Zip Code: 100 W. Noland Loop Pharr, TX 78577
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Travel — Description (If travel outside of Texas, complete Schedule T): N/A

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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 G:	2 FILER NAME: Homero Jasso	3 ACCOUNT # (Ethics Commission Filers)

4 Date: 5-15-2014	5 Payee name: Murphy USA	
6 Amount ($): 16.11 ☐ Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code: 4245 S. McColl Rd. Edinburg, TX 78501	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule): Travel	(b) Description (If travel outside of Texas, complete Schedule T): N/A
Date: 4-30-2014	Payee name: Murphy USA	
Amount ($): $40.01 ☐ Reimbursement from political contributions intended	Payee address; City; State; Zip Code: 1780 W. University Drive Edinburg, TX 78539	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Travel	Description (If travel outside of Texas, complete Schedule T): N/A
Date: 3-15-2014	Payee name: Murphy Walmart	
Amount ($): $43.99 ☐ Reimbursement from political contributions intended	Payee address; City; State; Zip Code: 4245 S. McColl Rd. Edinburg, TX 7853	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Gas	Description (If travel outside of Texas, complete Schedule T): N/A
Date: 2-24-2014	Payee name: Academy Sports Goods	
Amount ($): $173.18 ☐ Reimbursement from political contributions intended	Payee address; City; State; Zip Code:	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Polling Expense	Description (If travel outside of Texas, complete Schedule T): N/A

10,455.84

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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 G:	2 FILER NAME: Homero Jasso	3 ACCOUNT # (Ethics Commission Filers)
4 Date: 3/11/2014	5 Payee name: Murphy U.S.A	
6 Amount ($): 283.82 ☑ Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code: 4245 S. McColl Edinburg, TX 78539	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule): Gas Expense	(b) Description (If travel outside of Texas, complete Schedule T): N/A
Date: 3/04/2014	Payee name: Academy Sporting Goods	
Amount ($): $81.61 ☑ Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Polling Expense	Description (If travel outside of Texas, complete Schedule T): N/A
Date	Payee name	
Amount ($) ☐ Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
Date	Payee name	
Amount ($) ☐ Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)

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11,037.82

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J):

2 FILER NAME

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#: N/A) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
4/17/2014	Elida Garza 4108 N. 21st Street McAllen, Texas 78504	$500.00	N/A

(If travel outside of Texas, complete Schedule T)

9 Contributor's principal occupation: Business Owner

10 Contributor's job title: Owner

11 Contributor's employer/law firm: N/A

12 Law firm of contributor's spouse (if any): N/A

13 If contributor is a child, law firm of parent(s) (if any): N/A

Date	Full name of contributor ☐ out-of-state PAC (ID#: N/A) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/15/2014	Rene A. Anzaldua P.O. Box 2658 Edinburg, Texas 78540	$500 -	N/A

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation: Business Owner

Contributor's job title: Owner

Contributor's employer/law firm: N/A

Law firm of contributor's spouse (if any): N/A

If contributor is a child, law firm of parent(s) (if any): N/A

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation

Contributor's job title

Contributor's employer/law firm

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J):

2 FILER NAME: Homero Jasso

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Full name of contributor (☐ out-of-state PAC (ID#: ____)) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
4/13/2014	Carlos Ortegon 6521 N. 10th Ste. F McAllen, TX	250.00	N/A

(If travel outside of Texas, complete Schedule T)

9 Contributor's principal occupation: Owner

10 Contributor's job title: Owner

11 Contributor's employer/law firm: N/A

12 Law firm of contributor's spouse (if any): N/A

13 If contributor is a child, law firm of parent(s) (if any): N/A

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/18/2014	ERO International, LLP 300 S. 8th Street McAllen, TX 78501	$500.00	N/A

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation: Owner

Contributor's job title: Owner

Contributor's employer/law firm: N/A

Law firm of contributor's spouse (if any): N/A

If contributor is a child, law firm of parent(s) (if any): N/A

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation

Contributor's job title

Contributor's employer/law firm

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

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

PLEDGED CONTRIBUTIONS (JUDICIAL)

SCHEDULE B (J)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B(J):

2 FILER NAME: Homero Jasso

3 ACCOUNT # (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED PLEDGES: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨ $

5 Date	6 Full name of pledgor ☐ out-of-state PAC (ID#:_____) / 7 Pledgor address; City; State; Zip Code	8 Amount of pledge ($)	9 In-kind description (if applicable)
4/17/2014	Gilbert Enriquez P.O. Box 2999 Edinburg, TX 78540	1,000.00	N/A

(If travel outside of Texas, complete Schedule T)

10 Pledgor's principal occupation: N/A

11 Pledgor's job title: Owner

12 Pledgor's employer/law firm: N/A

13 Law firm of pledgor's spouse (if any): N/A

14 If pledgor is a child, law firm of parent(s) (if any): N/A

Date	Full name of pledgor ☐ out-of-state PAC (ID#:_____) / Pledgor address; City; State; Zip Code	Amount of pledge ($)	In-kind description (if applicable)
4/17/2014	A-Lightening Bail Bonds 3901 W. Schunior Str. Edinburg, TX	$500-	

(If travel outside of Texas, complete Schedule T)

Pledgor's principal occupation: Owner

Pledgor's job title: Owner

Pledgor's employer/law firm: N/A

Law firm of pledgor's spouse (if any): N/A

If pledgor is a child, law firm of parent(s) (if any): N/A

Date	Full name of pledgor ☐ out-of-state PAC (ID#:_____) / Pledgor address; City; State; Zip Code	Amount of pledge ($)	In-kind description (if applicable)
4/17/2014	Jesus Salinas 2108 Scout Lane Mission, TX 78574	1,000 00	

(If travel outside of Texas, complete Schedule T)

Pledgor's principal occupation: Owner

Pledgor's job title: Owner

Pledgor's employer/law firm: N/A

Law firm of pledgor's spouse (if any): N/A

If pledgor is a child, law firm of parent(s) (if any): N/A

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

PLEDGED CONTRIBUTIONS (JUDICIAL)

SCHEDULE B (J)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B(J):

2 FILER NAME: Homer Jasso

3 ACCOUNT # (Ethics Commission Filers):

4 TOTAL OF UNITEMIZED PLEDGES: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨ $

5 Date	6 Full name of pledgor ☐ out-of-state PAC (ID#:) / 7 Pledgor address; City; State; Zip Code	8 Amount of pledge ($)	9 In-kind description (if applicable)
5-14-2014	Peralez Franz., LLP 1416 Dove Ave. McAllen, Texas 78504	$500.-	N/A

(If travel outside of Texas, complete Schedule T)

10 Pledgor's principal occupation: Business Owner

11 Pledgor's job title: Owner

12 Pledgor's employer/law firm: N/A

13 Law firm of pledgor's spouse (if any): N/A

14 If pledgor is a child, law firm of parent(s) (if any): N/A

Date	Full name of pledgor ☐ out-of-state PAC (ID#:) / Pledgor address; City; State; Zip Code	Amount of pledge ($)	In-kind description (if applicable)
4/28/2014	James A. Broaddus 605 Rainbow Cove Austin, Texas 78746	$500.-	N/A

(If travel outside of Texas, complete Schedule T)

Pledgor's principal occupation: Business Owner

Pledgor's job title: Owner

Pledgor's employer/law firm: Business Owner

Law firm of pledgor's spouse (if any): N/A

If pledgor is a child, law firm of parent(s) (if any): N/A

Date	Full name of pledgor ☐ out-of-state PAC (ID#:) / Pledgor address; City; State; Zip Code	Amount of pledge ($)	In-kind description (if applicable)
5-8-2014	Alfonso Quintanilla 100 E. Emory Avenue McAllen, TX 78504	200.00	N/A

(If travel outside of Texas, complete Schedule T)

Pledgor's principal occupation: Owner

Pledgor's job title: Owner

Pledgor's employer/law firm: N/A

Law firm of pledgor's spouse (if any): N/A

If pledgor is a child, law firm of parent(s) (if any): N/A

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PLEDGED CONTRIBUTIONS (JUDICIAL)

SCHEDULE B (J)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B(J):

2 FILER NAME: Homero Jasso

3 ACCOUNT # (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED PLEDGES: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨ $

5 Date	6 Full name of pledgor ☐ out-of-state PAC (ID#:) / 7 Pledgor address; City; State; Zip Code	8 Amount of pledge ($)	9 In-kind description (if applicable)
4/24/2014	Palacios & Associates 2724 W. Canton Edinburg, TX 78539	500.—	N/A

(If travel outside of Texas, complete Schedule T)

10 Pledgor's principal occupation: Attorney

11 Pledgor's job title: Partner

12 Pledgor's employer/law firm: Palacios & Associates

13 Law firm of pledgor's spouse (if any): N/A

14 If pledgor is a child, law firm of parent(s) (if any): N/A

Date	Full name of pledgor ☐ out-of-state PAC (ID#:) / Pledgor address; City; State; Zip Code	Amount of pledge ($)	In-kind description (if applicable)
4/16/2014	Perdue Brandon Fielder Collins & Mott LLP P.O. Box 2916 McAllen, TX 78502	$500.—	N/A

(If travel outside of Texas, complete Schedule T)

Pledgor's principal occupation: Owner

Pledgor's job title: Owner

Pledgor's employer/law firm: Perdue Brandon Fielder Collins & Mott LLP

Law firm of pledgor's spouse (if any): N/A

If pledgor is a child, law firm of parent(s) (if any): N/A

Date	Full name of pledgor ☐ out-of-state PAC (ID#:) / Pledgor address; City; State; Zip Code	Amount of pledge ($)	In-kind description (if applicable)
4-17-2014	Edinburg, TX 78539	500.00	N/A

(If travel outside of Texas, complete Schedule T)

Pledgor's principal occupation: Owner

Pledgor's job title: Owner

Pledgor's employer/law firm: N/A

Law firm of pledgor's spouse (if any): N/A

If pledgor is a child, law firm of parent(s) (if any): N/A

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