

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

14 C/OH NAME

Pedro Garcia

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 -

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

\$ 10,450

EXPENDITURE TOTALS

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

\$ - 0 -

4. TOTAL POLITICAL EXPENDITURES

\$ 11,014.92

CONTRIBUTION BALANCE

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

\$ - 0 -

OUTSTANDING LOAN TOTALS

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

\$ - 0 -

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.

Pedro Garcia

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

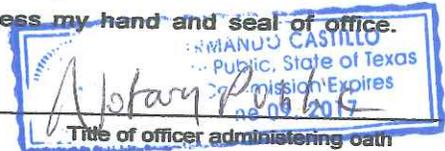
Sworn to and subscribed before me, by the said Pedro Garcia, this the 15th day of January, 2014, to certify which, witness my hand and seal of office.

Armando Castillo

Signature of officer administering oath

Armando Castillo

Print name of officer administering oath



Title of officer administering oath

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):
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2 FILER NAME <i>Pedro Garcia</i>	3 ACCOUNT # (Ethics Commission Filers)
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4 Date <i>7-15-13</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Aurelio Flores</i>	7 Amount of contribution (\$) <i>500.⁰⁰</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City, State; Zip Code <i>1217 N. Shery Rd. Mission Tx 78572</i>		(If travel outside of Texas, complete Schedule T)	

9 Contributor's principal occupation	10 Contributor's job title
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11 Contributor's employer/law firm	12 Law firm of contributor's spouse (if any)
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13 If contributor is a child, law firm of parent(s) (if any)

Date <i>9-6-13</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Rodolfo R. Molina Jr.</i>	Amount of contribution (\$) <i>3,000.⁰⁰</i>	In-kind contribution description (if applicable)
Contributor address; City, State; Zip Code <i>608 S. 12th St. McAllen Tx 78501</i>		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation	Contributor's job title
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Contributor's employer/law firm	Law firm of contributor's spouse (if any)
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If contributor is a child, law firm of parent(s) (if any)

Date <i>9-20-13</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Luis A. Figueroa</i>	Amount of contribution (\$) <i>500.⁰⁰</i>	In-kind contribution description (if applicable)
Contributor address; City, State; Zip Code <i>1818 W. Northgate McAllen, Tx 78504</i>		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation	Contributor's job title
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Contributor's employer/law firm	Law firm of contributor's spouse (if any)
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If contributor is a child, law firm of parent(s) (if any)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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 <i>Pedro Garcia</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>9-26-13</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Enrique Pena</i>	7 Amount of contribution (\$) <i>300</i> ⁰⁰	8 In-kind contribution description (if applicable)
6 Contributor address; City, State; Zip Code <i>335 W. Ruben M. Torres Sr. Blvd. Brownsville Tx. 78520</i>		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation		10 Contributor's job title	
11 Contributor's employer/law firm		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date <i>9-29-13</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Eduardo B. Vela</i>	Amount of contribution (\$) <i>1,000</i> ⁰⁰	In-kind contribution description (if applicable)
Contributor address; City, State; Zip Code <i>P.O. Box 6022 McAllen Tx. 78502</i>		(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)			
Date <i>10-29-13</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Pedro e. Brandon Fielder Collins Mott</i>	Amount of contribution (\$) <i>250</i> ⁰⁰	In-kind contribution description (if applicable)
Contributor address; City, State; Zip Code <i>400 N. McColl Suite A McAllen Tx. 78501</i>		(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)			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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 Pedro Garcia 3 ACCOUNT # (Ethics Commission Filers)

4 Date <u>10-30-13</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <u>Thelma Banduch</u>	7 Amount of contribution (\$) <u>200.⁰⁰</u>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <u>P.O. Box 4183 McAllen, TX 78502</u>		(If travel outside of Texas, complete Schedule T)	

9 Contributor's principal occupation 10 Contributor's job title

11 Contributor's employer/law firm 12 Law firm of contributor's spouse (if any)

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

Date <u>10-30-13</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <u>Hiram A. Gutierrez</u>	Amount of contribution (\$) <u>200.⁰⁰</u>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <u>2613 Northgate Ln McAllen TX 78504</u>		(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)

Date <u>11-18-13</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <u>Rodolfo R. Molina Jr.</u>	Amount of contribution (\$) <u>1000⁰⁰</u>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <u>608 S. 12th St. McAllen TX 78501</u>		(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)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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 Pedro Garcia 3 ACCOUNT # (Ethics Commission Filers)

4 Date <u>12-8-13</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <u>Chicken Plate Fund Raiser</u>	7 Amount of contribution (\$) <u>3500⁰⁰</u>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <u>1000 E. HWY 83 Pharr TX 78577</u>		(If travel outside of Texas, complete Schedule T)	

9 Contributor's principal occupation 10 Contributor's job title

11 Contributor's employer/law firm 12 Law firm of contributor's spouse (if any)

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

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)	

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)

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)	

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)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor 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: <i>10-1</i>		2 FILER NAME <i>Pedro Garcia</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>8-16-13</i>		5 Payee name <i>City of Pharr</i>			
6 Amount (\$) <i>150⁰⁰</i>		7 Payee address; City; State; Zip Code <i>118 S. Cage Blvd. Pharr Tx 78577</i>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <i>Meter Deposit 1000 R. HWY 83 Pharr</i>		(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 <i>8-16-13</i>		Payee name <i>City of Pharr</i>			
Amount (\$) <i>50⁰⁰</i>		Payee address; City; State; Zip Code <i>118 S Cage Blvd. Pharr Tx. 78577</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Building safety Permits</i>		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	
Date <i>8-27-13</i>		Payee name <i>CPRD Inc.</i>			
Amount (\$) <i>500⁰⁰</i>		Payee address; City; State; Zip Code <i>2403 N. 10th, PMB-79 McAllen Tx 78501</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Rentals Expense</i>		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	
Date <i>9-2-13</i>		Payee name <i>Beto's Printing</i>			
Amount (\$) <i>627⁸⁵</i>		Payee address; City; State; Zip Code <i>110 W. 4th St. San Juan, Tx 78589</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Printing Expense</i>		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	

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>102</i>	2 FILER NAME <i>Pedro Garcia</i>	3 ACCOUNT # (Ethics Commission Filers)
4 Date <i>9-8-13</i>	5 Payee name <i>Sam's Club.</i>	
6 Amount (\$) <i>1,081.74</i>	7 Payee address; City; State; Zip Code <i>McAllen Tx.</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Event Expense (Table + Chair)</i>	(b) Description (If travel outside of Texas, complete Schedule T)
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <i>9-10-13</i>	Payee name <i>Clara Casas</i>	
Amount (\$) <i>500.00</i>	Payee address; City; State; Zip Code <i>605 E Villegas Pharr Tx. 78577</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Gas, Food + Contract Labor</i>	Description (If travel outside of Texas, complete Schedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <i>9-13-13</i>	Payee name <i>Academy</i>	
Amount (\$) <i>31.32</i>	Payee address; City; State; Zip Code <i>W. McAllen Tx.</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Polo Shirts</i>	Description (If travel outside of Texas, complete Schedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <i>9-15-13</i>	Payee name <i>Academy</i>	
Amount (\$) <i>32.80</i>	Payee address; City; State; Zip Code <i>W. McAllen Tx.</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Polo Shirts</i>	Description (If travel outside of Texas, complete Schedule T)
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)

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|---------------------|-------------------------------|----------------------------------|--|
| 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: 103	2 FILER NAME Pedro Garcia	3 ACCOUNT # (Ethics Commission Filers)
4 Date 9-16-13	5 Payee name Academy	
6 Amount (\$) 143.04	7 Payee address; City; State; Zip Code Hwy 83 Weslco Tx.	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Polo Shirts	(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 9-18-13	Payee name Miguel Lopez	
Amount (\$) 308⁰⁰	Payee address; City; State; Zip Code S. 281 Edinburg Tx.	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Embroidery Polo Shirts	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
Date 9-18-13	Payee name Ambit Energy	
Amount (\$) 120¹²	Payee address; City; State; Zip Code Ambit Energy P.O. Box 660462 Dallas, TX 75266	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) electric service	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
Date 9-19-13	Payee name Copy Zone	
Amount (\$) 23.20	Payee address; City; State; Zip Code 4131 North 10th St. McAllen Tx 78504	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Lamination	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

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>24</i>	2 FILER NAME <i>Pedro Garcia</i>	3 ACCOUNT # (Ethics Commission Filers)
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4 Date <i>9-25-13</i>	5 Payee name <i>Rosa Idalia Ramirez</i>
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6 Amount (\$) <i>650.⁰⁰</i>	7 Payee address; City; State; Zip Code <i>1310 Andrew St. San Juan, TX 78589</i>
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Printing Expense (Banners)</i>	(b) Description (If travel outside of Texas, complete Schedule T)
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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 <i>9-28-13</i>	Payee name <i>Rosa Idalia Ramirez</i>
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Amount (\$) <i>500.⁰⁰</i>	Payee address; City; State; Zip Code <i>1310 Andrew St. San Juan, TX 78589</i>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Printing Expense (Cards)</i>	Description (If travel outside of Texas, complete Schedule T)
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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 <i>9-28-13</i>	Payee name <i>Trevino's Tire Service</i>
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Amount (\$) <i>79.⁰⁰</i>	Payee address; City; State; Zip Code <i>W. Hwy 83 San Juan TX 78589</i>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Repair tires on trailer</i>	Description (If travel outside of Texas, complete Schedule T)
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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 <i>9-29-13</i>	Payee name <i>Sam's Club</i>
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Amount (\$) <i>145.52</i>	Payee address; City; State; Zip Code <i>McAllen TX</i>
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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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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

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|---------------------|-------------------------------|----------------------------------|--|
| 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>105</i>	2 FILER NAME <i>Pedro Garcia</i>	3 ACCOUNT # (Ethics Commission Filers)
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4 Date <i>10-1-13</i>	5 Payee name <i>C PRO Inc.</i>
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6 Amount (\$) <i>500^{00.}</i>	7 Payee address; City; State; Zip Code <i>2403 N. 10th, PMB-79 McAllen Tx. 78501</i>
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Rentals Expense (Oct. 1)</i>	(b) Description (If travel outside of Texas, complete Schedule T)
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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 <i>10-4-13</i>	Payee name <i>City of Pharr</i>
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Amount (\$) <i>31.83</i>	Payee address; City; State; Zip Code <i>118 S. Cage Blvd. Pharr Tx. 78577</i>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Water Payment</i>	Description (If travel outside of Texas, complete Schedule T)
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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 <i>10-4-13</i>	Payee name <i>Beta's Printing</i>
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Amount (\$) <i>800.^{00.}</i>	Payee address; City; State; Zip Code <i>110 W. 4th. St. San Juan Tx. 78589</i>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Printing Expense (Signs)</i>	Description (If travel outside of Texas, complete Schedule T)
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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 <i>10-28-13</i>	Payee name <i>Ambit Energy</i>
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Amount (\$) <i>207.^{12.}</i>	Payee address; City; State; Zip Code <i>P.O. Box 660462 Dallas, Tx. 75266</i>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>electric Service</i>	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

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|---------------------|-------------------------------|----------------------------------|--|
| 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>10-6</i>	2 FILER NAME <i>Pedro Garcia</i>	3 ACCOUNT # (Ethics Commission Filers)
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4 Date <i>10-28-13</i>	5 Payee name <i>H. E. B.</i>
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6 Amount (\$) <i>30.00</i>	7 Payee address; City; State; Zip Code <i>813 W Expressway San Juan Tx 78589</i>
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>gas to put up signs</i>	(b) Description (If travel outside of Texas, complete Schedule T)
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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 <i>10-31-13</i>	Payee name <i>Beto's Printing</i>
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Amount (\$) <i>487.¹²</i>	Payee address; City; State; Zip Code <i>110 W. 4th St. San Juan Tx. 78589</i>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Printing Exp (Signs)</i>	Description (If travel outside of Texas, complete Schedule T)
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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 <i>11-1-13</i>	Payee name <i>City of Pharr</i>
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Amount (\$) <i>46.⁰⁷</i>	Payee address; City; State; Zip Code <i>118 S. Cage Blvd. Pharr Tx. 78577</i>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>water payment</i>	Description (If travel outside of Texas, complete Schedule T)
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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 <i>11-6-13</i>	Payee name <i>Speedy Stop</i>
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Amount (\$) <i>40.01</i>	Payee address; City; State; Zip Code <i>w. 83 HWY San Juan Tx. 78589</i>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>gas to put up signs</i>	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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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>10-7</i>	2 FILER NAME <i>Pedro Garcia</i>	3 ACCOUNT # (Ethics Commission Filers)
4 Date <i>11-8-13</i>	5 Payee name <i>Beto's Printing</i>	
6 Amount (\$) <i>1,732⁰⁰</i>	7 Payee address; City; State; Zip Code <i>110 W. 4th St. San Juan Tx. 78585</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Printing Exp. (478 Signs)</i>	(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 <i>11-15-13</i>	Payee name <i>Stripes</i>	
Amount (\$) <i>40.⁰⁰</i>	Payee address; City; State; Zip Code <i>Trenton Rd McAllen Tx. 78501</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>sgs to put up signs</i>	Description (If travel outside of Texas, complete Schedule T)
	Candidate / Officeholder name Office sought Office held	
Date <i>10-26-13</i>	Payee name <i>Tyner's El Zorpe</i>	
Amount (\$) <i>32.72</i>	Payee address; City; State; Zip Code <i>4401 N. 23rd. McAllen Tx. 78504</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Food for helpers</i>	Description (If travel outside of Texas, complete Schedule T)
	Candidate / Officeholder name Office sought Office held	
Date <i>9-28-13</i>	Payee name <i>Metts Building Materials</i>	
Amount (\$) <i>30.84</i>	Payee address; City; State; Zip Code <i>404 E. Expressway 83 Pharr Tx. 78577</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>material for signs</i>	Description (If travel outside of Texas, complete Schedule T)
	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: <i>10-8</i>	2 FILER NAME <i>Pedro Garcia</i>	3 ACCOUNT # (Ethics Commission Filers)
4 Date <i>10-5-13</i>	5 Payee name <i>Matts Building Material</i>	
6 Amount (\$) <i>38.⁶³</i>	7 Payee address; City; State; Zip Code <i>404 E. Expressway 83 Pharr Tx 78577</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>material for signs</i>	(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 <i>11-1-13</i>	Payee name <i>HEB</i>	
Amount (\$) <i>40.⁰⁰</i>	Payee address; City; State; Zip Code <i>813 W. Expressway San Juan Tx. 78589</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>gas to put up signs</i>	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
Date <i>11-23-13</i>	Payee name <i>Stripes</i>	
Amount (\$) <i>17.10</i>	Payee address; City; State; Zip Code <i>1701 N. Raul Longoria San Juan Tx 78589</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>gas to put up signs</i>	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
Date <i>11-30-13</i>	Payee name <i>Ambit Energy</i>	
Amount (\$) <i>186.¹⁴</i>	Payee address; City; State; Zip Code <i>P.O. Box 660462 Dallas Tx. 75266</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>electric service</i>	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

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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: <i>10-9</i>	2 FILER NAME <i>Pedro Garcia</i>	3 ACCOUNT # (Ethics Commission Filers)
4 Date <i>12-3-13</i>	5 Payee name <i>Hidalgo County Democratic Party</i>	
6 Amount (\$) <i>1,000⁰⁰</i>	7 Payee address, City; State; Zip Code <i>N. McCall McAllen Tx.</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Filing Fee for J.P. 2-2</i>	(b) Description (If travel outside of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH		
Date <i>12-6-13</i>	Payee name <i>City of Pharr</i>	
Amount (\$) <i>45.47</i>	Payee address; City; State; Zip Code <i>118 S. Case Blvd Pharr Tx. 78577</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Water Payment</i>	Description (If travel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH		
Date <i>12-5-13</i>	Payee name <i>CPRD Inc.</i>	
Amount (\$) <i>500⁰⁰</i>	Payee address; City; State; Zip Code <i>2463 N. 10th PMB-75 McAllen Tx. 78501</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Rent Expense (Nov. 1)</i>	Description (If travel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH		
Date <i>12-7-13</i>	Payee name <i>Rio Grande</i>	
Amount (\$) <i>108⁰⁰</i>	Payee address; City; State; Zip Code <i>4100 W. Ursule Ave. McAllen Tx 78503</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Fund Raiser Expense</i>	Description (If travel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH		

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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 |
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| 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>10-10</i>	2 FILER NAME <i>Pedro Garcia</i>	3 ACCOUNT # (Ethics Commission Filers)		
4 Date <i>12-29-13</i>	5 Payee name <i>Ambit Energy</i>			
6 Amount (\$) <i>159.⁰⁸</i>	7 Payee address; City; State; Zip Code <i>P.O. Box 660462 Dallas, Tx. 75266</i>			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>electric service</i>	(b) Description (If travel outside of Texas, complete Schedule T)		
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:25%;">Office held</td> </tr> </table>		Candidate / Officeholder name	Office sought
Candidate / Officeholder name	Office sought	Office held		
Date	Payee name			
Amount (\$)	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)		
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:25%;">Office held</td> </tr> </table>		Candidate / Officeholder name	Office sought
Candidate / Officeholder name	Office sought	Office held		
Date	Payee name			
Amount (\$)	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)		
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:25%;">Office held</td> </tr> </table>		Candidate / Officeholder name	Office sought
Candidate / Officeholder name	Office sought	Office held		
Date	Payee name			
Amount (\$)	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)		
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:25%;">Office held</td> </tr> </table>		Candidate / Officeholder name	Office sought
Candidate / Officeholder name	Office sought	Office held		

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